

SPRING 2017

PROVIDERSource

A newsletter for Indiana CareSource Health Partners

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OPERATIONAL NEWS

MEDICAL RECORD REVIEWS BEGIN FOR 2017

In February 2017, CareSource started the process of abstracting data from member medical records for Healthcare Effectiveness Data and Information Set (HEDIS®) scoring. HEDIS is a set of standardized performance measures designed to ensure that purchasers and consumers have the information they need to reliably compare health care quality. Collecting data from member medical records ensures that CareSource's HEDIS measures accurately represent the high quality of care that you provide to our members. Collecting this information is part of your Health Partner Agreement with CareSource to fulfill state, federal, and accreditation obligations.

We appreciate your assistance in providing access to the medical information as requested. We have contracted with a vendor to abstract records on our behalf. As a CareSource business associate, our vendor is required to maintain the confidentiality of any protected health information (PHI) it may access during this process in accordance with the Health Insurance Portability and Accountability Act (HIPAA). As part of the HEDIS data collection process, our vendor will contact your office to secure medical records or to schedule a visit to review records at your office.

FROM THE MEDICAL DIRECTORS

As you know, skyrocketing prescription drug prices have become the norm. According to the OneRx National Drug Index, the cost of brand-name drugs increased by more than 14 percent in 2015 alone.

At CareSource, we take a multi-faceted approach to help keep our pharmacy benefit both effective and affordable. We provide:

- A pharmacy benefit manager to help coordinate benefits and facilitate member safety with protocols such as generic substitution, step therapy and quantity limits
- A convenient online formulary search tool for both health partners and members
- A comprehensive medication therapy management program, member education, and disease and specialty drug-specific care management services to improve member health outcomes and medication adherence

We continue to look for ways to deliver efficient pharmacy care and coverage for our members, and we appreciate your support in our efforts to serve them.

Sincerely,



Dawana Stubbs, MD, MS
Medical Director



DUE DATES FOR RECORD REQUESTS



In order for CareSource to investigate and resolve clinical grievances from members within prescribed timeframes, requests for medical records must be answered by the due date listed on the request. Please return the requests to the individual at the address listed on the request. As specified in your Health Partner Agreement with us, all records are to be provided to CareSource free of charge. Thank you for your cooperation.



FIND A DOCTOR/PROVIDER ONLINE SEARCH TOOL UPGRADED

CareSource is excited about recent upgrades to our online health partner search tool. We have reached out to health partners and members for input about how to make our search tool better.

The input has resulted in a more robust tool that is easier to use. The information is more detailed and complete. Users can easily search and locate health partners within specified parameters.

You can search based on name, location, specialty and more.

Visit **CareSource.com** and click on “**Find A Doctor/Provider.**” We are sure you will find it easier to use with a more consumer-oriented feel similar to retail web-based search tools commonly in use.

Coverage for Clinical Trials

Clinical trials are research studies that test how well new medical approaches work in people. Each study answers scientific questions and tries to find better ways to prevent, screen, diagnose, or treat a disease. Every clinical trial has a protocol or action plan for conducting the trial.

CareSource has very specific criteria for covering clinical trials. The criteria differ based on product line. These criteria can be found at [CareSource.com/providers/policies/](https://www.caresource.com/providers/policies/) under the Administrative Policies column.

The purpose of the policies is to address the requirements of CareSource to continue to pay for routine care costs while a qualified individual participates in an approved trial. They are based on specific state or federal regulations outlined within the policies. Please consult these policies before billing CareSource for services associated with a clinical trial, and contact us if you have any questions.

IT'S SURVEY SEASON

Please remind your patients to respond to any survey they may receive. Surveys include questions for patients about:

- Getting needed care
- Getting appointments and care quickly
- Care coordination
- Improving health (physical, mental)
- The patient's rating of health care received



FLU VACCINES: IT'S NOT TOO LATE

Flu season continues through March so it's not too late to offer flu vaccines to patients who have not yet received one this season. Patients are asked if they have received a flu vaccine since last July on the Consumer Assessment of Healthcare Providers and Systems (CAHPS®) survey. Help them answer "yes" to that question.

CAHPS® is a registered trademark of the Agency for Healthcare Research and Quality (AHRQ).

COLORECTAL CANCER SCREENINGS

The best weapon against colorectal cancer is appropriate screenings. We recommend that members ages 50-75 are screened for colorectal cancer using one of the following methods:

- Annual screening with high-sensitivity fecal occult blood testing (FOBT)
- Sigmoidoscopy every five years, with high-sensitivity FOBT every three years
- Screening colonoscopy every 10 years

Please take family history and other risk factors into account when determining the best screening methods and intervals for your patients and continue to educate members about the importance of self-care through efforts such as nutrition and exercise to help prevent disease.

Help Ensure Screenings for Members With Diabetes

Regular screenings for patients with diabetes are vital to comprehensive diabetes management. Please ensure your patients with diabetes complete the following tests at least annually:

- Retinal eye exam
- HbA1C screening and control
- Nephropathy screening or monitoring test (urine protein test)
- Documentation and control of blood pressure



REDUCING HYPERTENSION AND CARDIOVASCULAR DISEASE RISK

Helping patients reduce their risk of cardiovascular disease can be difficult since many risk factors, such as high cholesterol and hypertension, can be asymptomatic at onset. One strategy involves the use of a heart attack risk assessment tool like the one at www.cvriskcalculator.com.

The assessment tool can help estimate a patient's risk of having a heart attack or dying from coronary heart disease. Tools like this can also help patients discover how small changes and improvements in risk factors can reduce their risk estimate. In addition, the tool encourages patients to make a plan to reduce risk through medication or lifestyle changes.

Please remember that member medical records should include:

- A diagnosis of hypertension/high blood pressure, when appropriate
- Documentation of the member's blood pressure with each visit

We value your partnership in improving the health of our members.



WELL-CARE CHECKUPS ARE NOT JUST FOR CHILDREN

Preventive care is important for patients of every age, including adolescents and adults. Depending on your patient's age, gender and risk factors, preventive care may include:

- **Children and adolescents** – Immunizations, developmental screening/assessment, height and weight
- **Adults** – Cholesterol screening, body mass index (BMI), diabetes screening, colorectal cancer screening, breast exam and Pap test (females), immunizations

Be sure to include appropriate well-care and screening codes when submitting claims for these services. Please remember that the Welcome to Medicare visit for new Medicare Advantage members and subsequent annual wellness visits have different billing codes.

ANTIBIOTIC USE REMINDER

The repeated and inappropriate use of antibiotics is the primary cause of the increase in drug resistant bacteria, and we are committed to helping patients understand the most appropriate use of antibiotics. Please remember the following guidelines:

- **Children with URI** –Children with an upper respiratory infection (URI) should not be treated with antibiotics unless they have a concurrent bacterial infection.
- **Adults with acute bronchitis** – Antibiotics are not indicated for treating healthy adults, ages 18-64 years, with acute bronchitis who do not have a comorbidity or other infection for which antibiotics may be appropriate.

If you prescribe an antibiotic for a member with one of these conditions, who also has a concurrent diagnosis, be sure to document the proper diagnosis on the claim. You can also remind members of our 24-hour nurse advice line that provides timely medical education and support, assessment of symptoms and direction to the appropriate level of care 24 hours a day/seven days a week.

NEW MENTAL HEALTH WELLNESS TOOL FOR MEMBERS

We are excited to add a new wellness tool for our members called myStrength that they can access online or on their mobile device at no cost to them. MyStrength's proven tools can help strengthen mind, body and spirit.

MyStrength offers:

- Online learning for topics such as depression, anxiety, drugs and alcohol
- Empowering self-help tools such as a mood tracker, thought and feeling log, and fitness log
- Wellness resources such as mindfulness and relaxation exercises as well as physical fitness, smoking cessation, stress management, and nutritional resources
- Inspirational quotes and articles

Members can access the tool by visiting

<https://www.mystrength.com/r/caresource> for more information and clicking on “Sign-Up.”

If you have any questions, please contact Health Services.



FIND UPDATES ONLINE

CareSource provides our health partners with valuable information on our website. Our medical policy statements, network notifications and announcements are just some of the ways we strive to keep you fully informed about any changes to our policies or procedures that make doing business with us more efficient.

Some recent network notifications, among others, include:

- CareSource Marketplace Plans No Longer Called Just4Me
- Cite AutoAuth Expansion for Inpatient Authorizations
- Curbing Opioid Overdose with Naloxone

Network notifications are continually added and updated.

Please refer to our website often to view the most recent additions at **CareSource.com**.

CareSource Health Partner Services Contact Information

 Indiana	Marketplace	1-866-286-9949
	Medicare Advantage	1-855-202-0557
	Medicaid	1-844-607-2831



P.O. Box 8738
Dayton, OH 45401-8738

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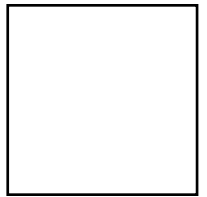
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FIND PDL (PREFERRED DRUG LIST) UPDATES ONLINE

CareSource regularly reviews and updates the PDL's for our Medicaid and Marketplace products. These PDL updates and other important pharmacy information can be found at CareSource.com

Drug coverage information is also available via apps on your smart phone. Apps include Formulary Search by MMIT and Epocrates.

If you do not have access to the internet, please call us and we will send you the updates. Please call and follow the prompts to reach the pharmacy department.

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