



CARESOURCE

2023 SPRING MEDICAID FAIR

Presented by:

Taura White & Becky Katzowitz

April 20, 2023

For access to this presentation, please visit: www.mmis.georgia.gov -> Provider Information -> Provider Notices –
“Presentation – Spring Medicaid Fair/CareSource - April 2023” Watch the “Live” presentation: <https://youtu.be/SkgFyM82oO0>

MEMBER ENGAGEMENT

Presented by

Taura White
Sr Director, Population Health



Maternal Access to Care

Mom & Baby Beginnings™

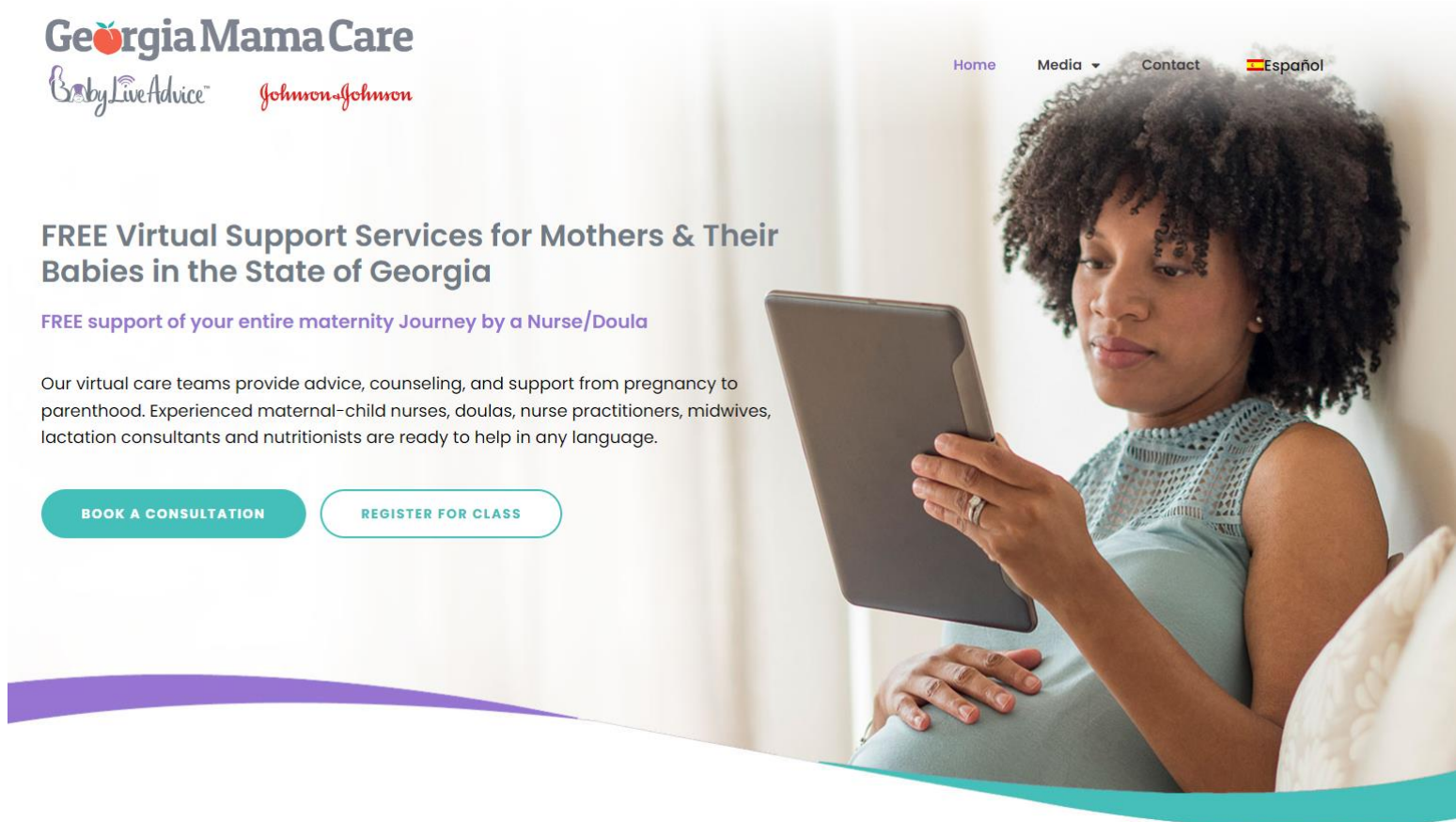
CareSource knows the importance of having a safe and healthy pregnancy journey. Our Mom & Baby Beginnings is a special program for moms. It will help support a healthy pregnancy and well child experience.



- Focus on maternal and infant health
- Integrated social and clinical support
- Access to value added benefits, wellness programs and incentive programs
- Community based partnerships and events



Maternal Access to Care- High Touch Pregnancy Care



The screenshot shows the Georgia Mama Care website. At the top left, the logo for Georgia Mama Care is displayed, featuring an orange dot above the 'o' in 'Georgia'. Below the logo are the 'Baby Live Advice' logo and the 'Johnson & Johnson' logo. In the top right corner, there are navigation links for 'Home', 'Media', 'Contact', and 'Español' with a small Spanish flag icon. The main heading reads 'FREE Virtual Support Services for Mothers & Their Babies in the State of Georgia'. Below this, a sub-heading states 'FREE support of your entire maternity Journey by a Nurse/Doula'. A paragraph of text describes the services: 'Our virtual care teams provide advice, counseling, and support from pregnancy to parenthood. Experienced maternal-child nurses, doulas, nurse practitioners, midwives, lactation consultants and nutritionists are ready to help in any language.' At the bottom of the text area, there are two buttons: 'BOOK A CONSULTATION' and 'REGISTER FOR CLASS'. The background of the screenshot is a photograph of a pregnant woman with curly hair, wearing a light blue sleeveless top, sitting and looking at a tablet computer. A purple and teal wave graphic is at the bottom of the screenshot area.

Visit georgiamamacare.com for more information



Behavioral Health Complex Member Strategy

Caresource Stronger Together™ (Program for high-risk members that affords access to value added benefits, community-based partnerships, wellness programs and intensive case management)

Autism Spectrum Disorder (Pilot designed to increase family involvement, increase early screening and intervention, as well as to ensure appropriate quality of service)

Suicide (Initiative to provide support and enhanced benefit to high-risk members who have experienced suicidal ideation and/or behavior)

First Episode Psychosis (Initiative to support younger members experiencing psychotic symptoms)

Trauma Informed Care (Movement to ensure we operate as a trauma informed organization by providing specialized training to all staff)



CareSource



Stronger Together™

CareSource's Family Preservation
& Reunification Initiative



Telehealth Support



- Provides 24/7 support where PCPs do not have telehealth or have set hours.
- Access to board-certified providers who can assist with common health problems and behavioral health care.
- Can be accessed via website, 1-800 number and the mobile app
- Can also be referred from the CareSource 24 Nurse line for additional support



Bring Access to the Community



- Partnered with providers to drive member engagement around well visits and immunizations
- Partnered with mobile units and community organizations to provide services, like well checks and health screenings, where in the communities where members live
- Partnered with the Atlanta Hawks and College Park Skyhawks to promote youth wellness campaign, **“Don’t miss a free throw, don’t miss a well check”**
- Partnered with Walmart to promote Baby + CareSource that provides education and information to new and expectant moms



Incentivizing Healthy Behaviors

REWARD PROGRAMS for getting and staying healthy



Babies First®

Who's Eligible?

Pregnant women and babies through 15 months old*

Reward Amount*

Up to **\$265**

*Pregnant women 18 years and older can also join the MyHealth Rewards program. Pregnant women 17 years and younger can also join the Kids First Rewards program.



Kids First

Who's Eligible?

Kids ages 16 months through 17 years old

Reward Amount*

Up to **\$185**

*Rewards may vary by age or health issue.



MyHealth

Who's Eligible?

Adults 18 years and older

Reward Amount*

Up to **\$240**

*Rewards are subject to change and may vary by age, gender and health needs. If you are no longer a CareSource member, your access to the Rewards Portal will be deactivated and any unused Rewards may be no longer available.

- **Babies First**

- Covers pregnant members (adults/youth) and babies through 15 months
- Includes prenatal, postpartum and well baby visits and health screenings

- **Kids First**

- Covers youth ages 16 months through 17 years
- Includes well and dental visits, immunizations and health screenings

- **MyHealth**

- Covers adults ages 18 and over
- Includes well and dental visits, immunizations and health screenings



Redetermination Education Strategy

IVR Messaging

Member Portal

**Call Center– Incoming
Calls**

**Call Center-
Member Outreach**

Text Messages/Emails

Provider Education

**High Volume Provider
Visits**

**Community
Partnerships-
Advertisement/
Member Education**

Member Encounters

Referrals



PROVIDER ENGAGEMENT

Presented by

Becky Katzowitz, MBA, M.Ed, CCC-SLP, CSM
Sr Director, Network Performance & Engagement



What are the CMOs doing to strengthen the provider network? This has been a problem with the provider network, in general, but disproportionately affects behavioral health providers. Describe outreach efforts.

- Whole Health of Georgia
- Monthly provider meetings
- Monthly PRTF meetings
- Conferences
- Optimizing Operations to attract new BH providers
 - Access and Availability issues
 - Recruitment efforts
 - Quick claim payments
 - Decreased administrative burden for BH providers
 - Provider Education and Resource Team
 - Health Equity and Care Management
 - Telehealth for BH
 - Incentive programs available to all providers, including BH



Improving Outcomes through Value-Based Care



2X more members

are seeing a primary care physician each year.



nearly doubled

the amount of value-based care incentive payments to healthcare providers



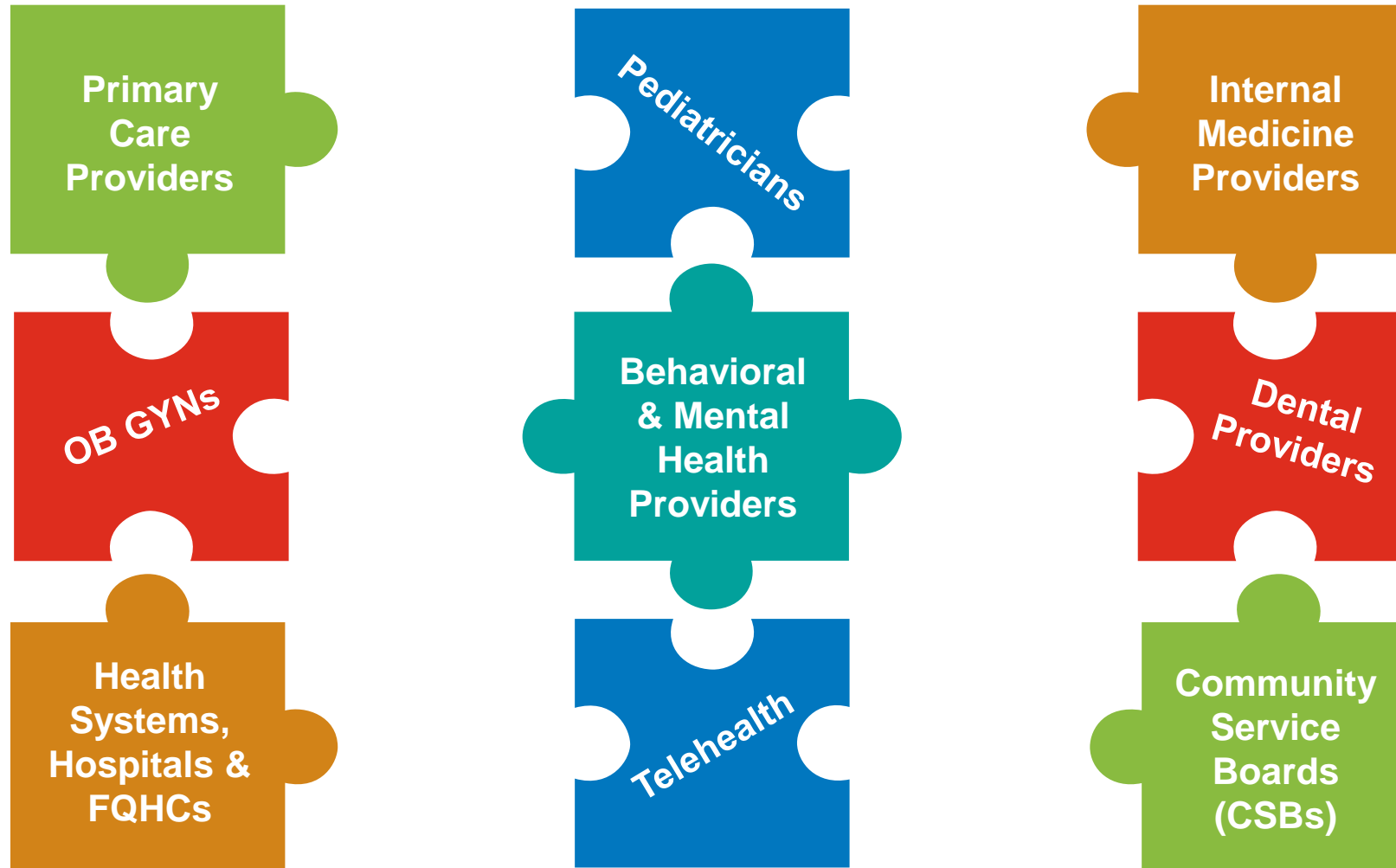
44% increase

in the number of well child visits, plus a 10% increase in preventative dental visits



Describe the CMO's available provider incentives and how providers can participate in these incentive programs

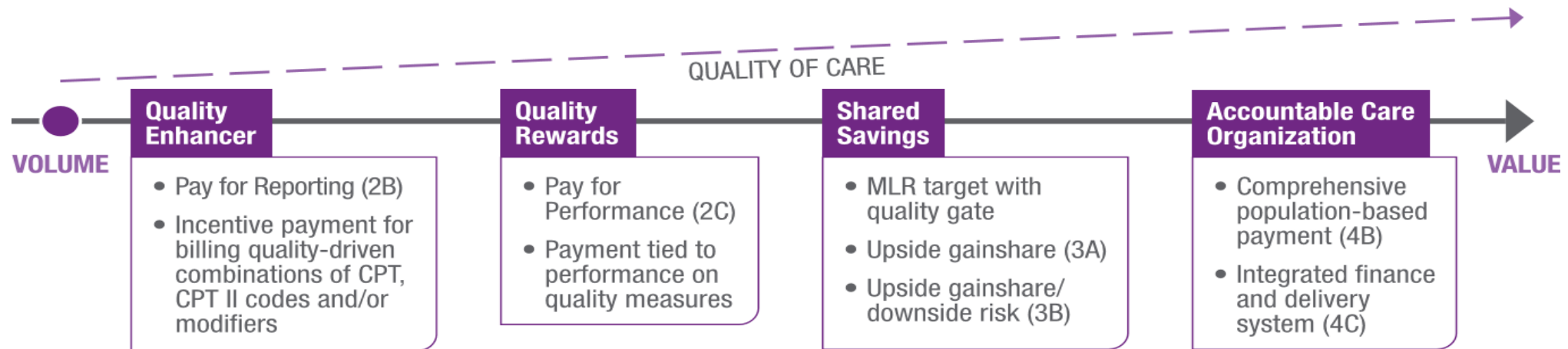
We have programs available to All Professional Providers




Value Based Reimbursement Continuum

Design and implementation of VBR includes an array of models departing from traditional fee-for-service (FFS) architecture and elevating providers along a stepped continuum from least to most complex in relation to financial risk.

- Based upon the HCP-LAN Advanced Payment Model (APM) framework
- Links providers to quality outcomes as a requirement for receipt of financial incentives
- Incorporates STARS, CAHPS® and HEDIS® metrics, along with any state specified quality outcomes objectives and provider specific performance goals



Incentive Program Training Opportunities

	May 2, 2023	<ul style="list-style-type: none">• Virtual• Quality Rewards and Quality Enhancer contracted providers
	May 7, 2023	<ul style="list-style-type: none">• Virtual• Groups not in a contract VBR• Quality Enhancer
	Ongoing	<ul style="list-style-type: none">• Virtual & In-person• Select groups in our Member Engagement VBR and largest provider groups



For more information on CareSource's incentive programs, please contact your Health Partner Manager

Health Partners Engagement Map [2023]

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Georgia Health Systems

All CSBs & FQHCs-Shay Daniels
 Piedmont Healthcare-Lisa Bender
 Northside Hospital-Edwina Mincey-Warren
 WellStar Health System-Edwina Mincey-Warren
 Children's Healthcare of Atlanta-Tameka Lee
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CareSource

2023 Spring Medicaid Fair

April 20, 2023

CARESOURCE.COM      



CareSource Session Questions	CareSource Answers
99212 office visit when well check up and sick. Why not paid?	Services are separately payable when the appropriate modifiers are billed indicating that a separate service was rendered on the same date of service.
Are there any plans to improve the prior authorization process for medication ? When will we be able to use cover my meds.com?	CoverMyMeds is setup to accept GA MCD prior authorization requests today, and we actively receive ePAs via that channel. We are happy to work with this practice to troubleshoot what they are seeing, but pharmacy can confirm there is no configuration block.
CareSource denials when commercial insurance does not cover the codes and does not allow the provider to bill the code, example T codes.	On COB claims, the EOB from the primary carrier should always be included. Even if the services will be denied, CareSource will need to evaluate the EOB to determine the appropriate payment due.
How am I assigned a provider relations rep and when and how will they contact me?	Health Partner Managers are assigned territories by counties/regions. I have attached our territory map so you may reach out to your Health Partner Manager.
How can I become a Georgia Medicaid Provider?	Please enroll through (GAMMIS/Ga Medicaid) the CVO process at www.mmis.georgia.gov



<p>How does a provider get enrolled?</p>	<p>Please enroll through (GAMMIS/GA Medicaid) the CVO process at www.mmis.goergia.gov. Once you receive your GA Medicaid ID you may start the CareSource application process. This process is for the initial contract: The application may be found on our website at www.caresource.com. Click on becoming a provider and complete the required information. You will receive timely feedback via e-mail so be sure to use an email that is monitored daily.</p> <p>If you already have a contract and want to add a provider/practitioner: Please enroll through (GAMMIS/Ga Medicaid) the CVO process at www.mmis.goergia.gov. Once they are enrolled in Georgia Medicaid their information will be sent to CareSource on the 7400 file. CareSource will pick up the provider/practitioners information and add it to the existing contract to become Participating.</p>
<p>How does the credentialing for CMO flow over from CVO to CareSource and the timeframe to be in network with CareSource CMO?</p>	<p>Once the provider is enrolled with through the CVO (GAMMIS/Ga Medicaid) the provider/practitioners information is sent to CareSource. This information is sent on the 7400 file and will be picked up by CareSource. CareSource will add the provider/practitioner to the existing contract to become Participating. This process may take up to 45 business days from the date of the Ga Medicaid Welcome letter.</p>
<p>How to get credentialed for all plans?</p>	<p>Please enroll through (GAMMIS/GA Medicaid) the CVO process at www.mmis.goergia.gov. Once you receive your GA Medicaid ID you may start the CareSource application process. This process is for the initial contract: The application may be found on our website at www.caresource.com. Click on becoming a provider and complete the required information. You will receive timely feedback via email so be sure to use an email that is monitored daily.</p> <p>If you already have a contract and want to add a provider/practitioner: Please enroll through (GAMMIS/GA Medicaid) the CVO process at www.mmis.goergia.gov. Once they are enrolled in Georgia Medicaid their information will be sent to CareSource on the 7400 file. CareSource will pick up the provider/practitioners information and add it to the existing contract to become Participating.</p>



<p>How to set up online Provider Portal and how to submit PA</p>	<p>Once you receive your welcome to CareSource letter you will be given a CareSource ID. Go to www.caresource.com and create a login. You will need your CareSource ID to set up the log in process.</p> <p>The preferred method for submission of prior authorization requests is through the use of Georgia’s Department of Community Health (DCH) centralized prior authorization portal. This feature allows submission of prior authorization requests through a centralized source, the Georgia Medicaid Management Information System (GAMMIS). For questions related to prior authorization for health care services, you can contact the CareSource Medical Management department by phone, fax, or mail.</p> <p>Phone: 1-855-202-1058 Fax: 1-877-716-9480 1-844-676-0370 Mail: CareSource Attn: Medical Management Dept. P.O. Box 1598 Dayton, OH 45401-1598</p>
<p>I would like to ask if there are any upcoming changes for outpatient authorization processes?</p>	<p>CareSource evaluates prior authorization requests based on medical necessity, medical appropriateness, and benefit limits. CareSource posts updates through network notifications on the Updates & Announcements page (https://www.caresource.com/ga/providers/tools-resources/updates-announcements/medicaid/). Please check this webpage often to stay current with all updates. For questions related to prior authorization for health care services, you can contact the CareSource Medical Management department by phone, fax, or mail. Phone: 1-855-202-1058 Fax: 1-877-716-9480 1-844-676-0370 Mail: CareSource, Attn: Medical Management Dept., P.O. Box 1598, Dayton, OH 45401-1598</p>
<p>Are there any incentives being introduced around pregnancy for providers and or the member?</p>	<p>OB incentives are as follows - Timeliness of Prenatal Care \$75; Postpartum Care \$100; Postpartum Depression Screening \$10. Please reach out to your Health Partner to obtain the Obstetrics Quality Program 2023 Flier which has the details for coding and billing</p>
<p>Is certain procedure such as a surgical extraction be covered if the authorization was put in the same date of service.</p>	<p>At this time, D7250 [removal of residual tooth roots (cutting procedure) includes cutting of soft tissue and bone, removal of tooth structure, and closure] requires prior authorization. If requested as an urgent request, there is an expected turnaround time of 24 hours.</p>










<p>Is the Value Based Reimbursement Program still active and if so, what are the current modifiers to use?</p>	<p>Yes, there is a Quality Enhancer Program for 2023 posted on CareSource's website under Updates and Announcements for Providers with the current measures and modifiers. If you have any questions, please reach out to your Health Partner</p>
<p>NDC codes- is Medicaid still requiring 11-digit NDC? Specific to Rhogam, we have a 10-digit, but it was been rejected for payment.</p>	<p>Yes, we still require NDC for drug codes. NDC numbers always have 11 digits. Make sure you include any leading zeros.</p>
<p>Process on claims follow-up.</p>	<ul style="list-style-type: none"> • For claims questions such as why a claim denied, please contact the CareSource Provider Call Center at 855-202-1058 for assistance. The phone representative can provide immediate feedback on next steps for claims resolution. • If you do not agree with how a claim was processed/reimbursed, you may follow the claims appeal process which includes the submission of supporting documentation, such as medical records, to help substantiate the reprocessing of the claim. Once received, all documentation will be reviewed, and a resolution will be determined. • If these processes are not working for you, please contact your CareSource Health Partner for further assistance.
<p>When a CMO states another payer is primary; is there a way to obtain this info on payer website who is considered primary?</p>	<p>Eligibility information is available on the GAMMIS website.</p>



<p>Who should the school systems contact for help for originating site claims?</p>	<ul style="list-style-type: none"> • For claims questions such as why a claim denied, please contact the CareSource Provider Call Center at 855-202-1058 for assistance. The phone representative can provide immediate feedback on next steps for claims resolution. • If you do not agree with how a claim was processed/reimbursed, you may follow the claims appeal process which includes the submission of supporting documentation, such as medical records, to help substantiate the reprocessing of the claim. Once received, all documentation will be reviewed, and a resolution will be determined. • If these processes are not working for you, please contact your CareSource Health Partner for further assistance.
<p>WE ARE PCP IF MEMBER IS PREGNANT CAN WE SEE THEM?</p>	<p>If the service they are rendering is within the provider/practitioners scope of practice then CareSource will consider the claim based on medical necessity.</p>
<p>What is the best way to update provider information with Caresource? We have changed with Medicaid/GAMMIS web portal, but nothing is coming through to Caresource.</p>	<p>All provider/practitioners are required to update/add/terms through GAMMIS/Ga Medicaid. Once the information is updated in GAMMIS it is sent to CareSource on the 7400 file. If you would like me to check our system, please send me the providers TAX ID, NPI and name.</p>
<p>Was Walgreens in network with Caresource in November 2022?</p>	<p>No, Walgreens was not in the CareSource Medicaid Network in 2022.</p>
<p>Wellchild check annual visits covered?</p>	<p>Yes, covered with the same benefit as FFS.</p>
<p>Will there be training on all process?</p>	<p>CareSource frequently adds provider notifications under “Updates and Announcements.” Updates and Announcements may be found under the provider tab on our website www.caresource.com.</p>



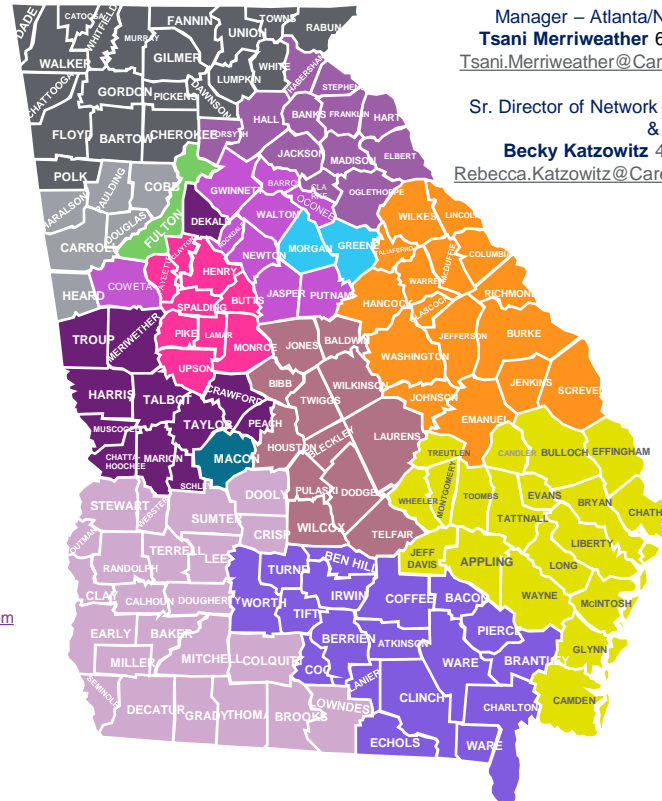
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