Network Notification

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Date: 11/1/2015

To: Ohio Health Partners

From: CareSource

Subject: Health Partner Network Notification

CareSource has heard you, and we are listening to our Providers.

Based off the 2014 Provider Satisfaction Survey these few distinct needs have been brought to our attention: Claims Status, Claims Payment, Prior Authorization and Contracting.

Here are some of the changes we have made thus far in 2015…
1. <u>Provider portal updates</u>: Claim statuses and prior authorization statuses meant to provide "a more simplified view".
   - Claim status updates focus on the ability to upload documents, have an advanced options filter, and contain a summary view of detailed claims.
2. <u>Cite Auto Authorization</u>:   We now offer the ability for our health partners to obtain prior authorization for 5 different procedures with plans to add more in the future.
3. <u>ePA (Cover My Meds)</u> will have a pharmacy electronic prior authorization system.

There are still many more improvements that are being processed and planned…
1. We will be implementing an integrated <u>pharmacy and medical prior authorization system</u>. Through this system we will be able to:
   - ☐ Have a code look up for prior authorization requirements
   - ☐ Integrate clinical attachments
   - ☐ Have the ability to process clinical appeals online
   - ☐ Have the ability to process claims appeals online
   - ☐ Check the status on prior authorizations
   - ☐ Have eFax options for services not setup for electronic submission
2. The <u>claims payment status system will also be updated</u> to show both clinical edit details and the status on real time payments.

As you can see, many of these items are focused around Prior Authorizations. This is because we believe in getting you the "yes" faster by pursuing several various avenues to that purpose.

CareSource wants to build an enabling partnership with our providers that delivers quality outcomes to the members we both serve.