



## **Network Notification**

**Notice Date:** 6/29/2018  
**To:** Ohio Health Partners  
**From:** CareSource®  
**Subject:** New Address for Refund Checks

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CareSource has updated the address for refund check submissions. Effective immediately, please send refund checks to:

**CareSource**  
**P.O. Box 706365**  
**Cincinnati, OH 45270-6365**

The addresses listed above are for refund check submissions only. Correspondence other than Refund Checks submitted to these lock boxes will cause a delay in the processing of the checks and remaining correspondence.

To streamline the process of submitting refund checks, CareSource has created a form to help ensure timely and accurate processing. [The Claim Recovery Request](#) Form is available to download on **CareSource.com**. A separate form and appropriate documentation must be submitted for each refund check.