



Network Notification

Date: August 12, 2010

Number: OH-P-2010-22

To: Ohio Providers

From: CareSource

Subject: Appealing Sterilization Claims

The Ohio Hospital Association (OHA) Admitting, Billing & Collection Committee has been working with CareSource on several operational and claims payment issues on bills for sterilization and hysterectomy services that were rejected.

The bills were rejected because the hospital included a JFS 03198, *Consent for Sterilization* or a JFS 03199, *Acknowledgement of Hysterectomy Information* form that was out-of-date.

The rejections occurred because the Ohio Department of Job and Family Services (ODJFS) retroactively changed the implementation date of revised versions of the JFS 03198 and JFS 03199 forms from July 2009 to July 2010. This occurred after many of the Managed Care Plans (MCPs) had already updated their policies and procedures to require the new versions of the forms.

As a result, MCPs began rejecting bills with the old versions of the forms, even though ODJFS communicated to providers that the forms were acceptable through June 30, 2010.

CareSource's Decision:

CareSource will reconsider any bill for sterilization or hysterectomy services performed prior to July 1, 2010, that was rejected solely because the hospital used a form that was determined to be out-of date. **CareSource will accept appeals of the rejections, regardless of the date they were initially rejected, until September 30, 2010.**

Three Ways to Submit an Appeal:

1. Resubmit a hard copy rejected bill and documentation that you are appealing because of the use of an outdated form, JFS 03198 or JFS 03199

2. Use the provider Clinical / Claim Appeal form available at www.caresource.com. Please document that are you appealing because of the use of the outdated form.

Methods 1 and 2 should be submitted to the following address:

CareSource
Attn: Provider Appeals
P.O. Box 2008
Dayton, Ohio 45401-2008

3. Access the online Provider Appeals feature on the CareSource secure online Provider Portal at <https://providerportal.caresource.com/OH/>. Please document that you are appealing because of the use the outdated form.

Reason for the appeal: Use of an outdated Consent for Sterilization or Acknowledgement of Hysterectomy Information form

If you have need additional information or assistance contact CareSource Provider Services at 1-800-488-0134.