

MANAGED CARE PLAN MEMBERSHIP

Benefits and Services



Your Medicaid. Your Choice.

Choose the Plan Ohio Trusts

WHY CARESOURCE?

With over 30 years of service, CareSource is a leading non-profit health insurance company. We're part of your community, and meet you where you live, work and play. We care about our members and your health and well-being. That's why we want to help you get the most from life and your health. We'd love to have you join our Ohio Medicaid plan.

If you have any problem reading or understanding this or any other CareSource information, please contact Member Services at 1-800-488-0134 (TTY: 711) for help at no cost to you. We can explain this information in English or in your primary language. The information in other languages is at no cost to you. You can also get this information for free in other formats, such as large print, braille or audio.

Si tiene algún problema para leer o comprender esta o cualquier otra información de CareSource, comuníquese con Servicios para Afiliados al 1-800-488-0134 (TTY: 711) en forma gratuita. Podemos explicarle esta información en inglés o en su idioma principal. La información disponible en otros idiomas es gratuita para usted. También puede obtener esta información de forma gratuita en otros formatos, como letra grande, braille o audio.

Managed Care Organization Membership

CareSource is a managed care plan that works with the Ohio Department of Medicaid (ODM) to coordinate your Medicaid health benefits and your healthcare. Once you are determined to be eligible for Ohio's Medicaid program, ODM will enroll you into a managed care plan right away. ODM will send you a letter to tell you which managed care plan you were assigned to. It is important that you read the letter and decide if you want to keep the managed care plan you were assigned to or if you want to change to another plan.

You can change to another plan for the following reasons only:

It is still within the first three (3) months after enrollment,

It is during annual open enrollment, or

For just cause.



Do I have to be in a managed care plan?

If you are an Ohio resident, you may be eligible for Medicaid benefits under any of the following groups:

Aged, Blind, or Disabled;

Covered Families and Children (including Healthy Start and Healthy Families);

Children in Custody and Adopted Children;

Breast and Cervical Cancer Project (BCCP) individuals;

Medicaid eligible individuals enrolled in the Bureau of Children with Medical handicaps (BCMh) program; or

Adult extension.

Most individuals on Medicaid must be in a managed care plan. Being in a managed care plan will not cause you to lose your Medicaid, WIC or other public assistance benefits. Choosing to be a member in CareSource is voluntary. It is your choice.

With all managed care plans, you get:

All medically necessary Medicaid-covered services, including Healthchek services for individuals under age 21.

A CareSource ID card that replaces your monthly Medicaid card.

A 24-hour medical advice line to help you with your questions and concerns.

A care team that includes you, your family, your doctor(s), your managed care plan and anyone else you want to help you make healthcare decisions.

As a member of CareSource, you will also get these additional benefits*:

Large provider network, with access to more than 9,000 primary care providers and more than 58,000 specialists.

Extra dental and vision care, including checkups, teeth cleanings and a large selection of eyeglasses. CareSource also provides a \$100 allowance for contact lenses and lens fittings.**

***NOTE:** Allowance amount and frequency may vary. Contact CareSource for details.

CareSource Life Services® – We can help connect you to local resources for housing, food access and legal aid. Your Life Coach can also help you get and keep a job, as well as education and training goals.

***NOTE:** Some medically-necessary services will need to be approved by CareSource.



Easy Access to Care

Get a ride to and from doctors' visits, food pantries, pharmacies, WIC and County Department of Job and Family Services (CDJFS) visits.

CareSource24® – Nurse advice line gives you access to a team of nurses who can answer health questions 24/7/365.

Local Care Managers to coordinate your health care needs and help connect you to local resources such as utility help, housing and food banks.

Telehealth allows you to talk to a doctor 24/7/365 using a smartphone or computer and avoid long waits at the ER or urgent care for non-emergency health issues when you can't get in to see your primary care doctor.

FREE mobile app to help you find a doctor, access your member ID card on the go and more.

Rewards and Incentives

Get rewarded for healthy habits! We have programs to encourage you and your family to take part in yearly wellness visits and get preventive care. You and your family can earn rewards for taking part in the CareSource MyKids and MyHealth rewards programs. Learn more about each program below.

CareSource MyKids – Pregnant women and kids from birth through 17 years of age can earn up to \$595 for keeping doctor appointments, well-child visits, vaccines and dental exams. Rewards may change based on the health and wellness needs of your child.

MyHealth Rewards – Adults age 18 through 64 years old can earn up to \$615 for going to routine doctor visits and keeping up with screenings.

Health and Wellness Benefits

Behavioral health resources that support the health of mind, body and spirit.

Disease management programs to help manage asthma, diabetes, depression and high blood pressure (hypertension).



Choosing a Primary Care Provider

You must choose a primary care provider (PCP) from CareSource's network of providers. Your PCP is your personal doctor and will direct most of your healthcare needs or send you to other doctors (specialists) if needed.

To find a network provider, call member services or use the Find-a-Doctor tool on **CareSource.com**. You can also contact the Ohio Medicaid Consumer Hotline at 1-800-324-8680 (TTY 711) or visit www.ohiomh.com.

You can change your PCP to another CareSource in-network PCP at any time (as often as once a month, if needed). To change your PCP, call CareSource Member Services Department and ask for the change.

As a CareSource member, you must use network providers, facilities, and pharmacies to get covered services. The only time you can use an out-of-network provider is for:

Emergency services

Services at federally qualified health centers or rural health clinics

Certified nurse midwives or certified nurse practitioners

An out-of-network provider CareSource has approved you to see.

Prescription Drug Coverage

As a CareSource member, all your pharmacy services are covered by Gainwell, Ohio Medicaid's Single Pharmacy Benefit Manager (SPBM). Gainwell covers all Medicaid-covered, medically necessary prescription and over-the-counter (OTC) medications. You must use only Gainwell network pharmacies to get medications under the pharmacy benefit.

Emergency Services

Emergency services are services for a medical problem that you think is so serious that it must be treated right away. We cover emergency care in and outside of the county where you live. If you have an emergency, call 911 or go to the nearest emergency department (ED) or other appropriate setting. If you are not sure if you have an emergency, call your PCP. CareSource members can also call their PCP or CareSource24[®], CareSource's 24-hour medical advice line.



Where can I get more information?

For more information about the managed care plans available and for help selecting a managed care plan, call the Ohio Medicaid Consumer Hotline at 1-800-324-8680 (TTY 711) or visit www.ohiomh.com.

You may ask ODM to end your membership at any time for certain reasons. If ODM decides that you meet one of these reasons, it will end your membership. Also, if there is something special about the care you need or how you get the care and your managed care plan is not able to provide it, you can ask to end your membership. ODM will give you more information about this.

To learn more about CareSource

CALL 1-800-488-0134 (TTY: 711)
7 a.m. to 8 p.m., Monday through Friday

VISIT CareSource.com/OhioMedicaid

This brochure is only a summary of important information. CareSource can provide you a list of network providers, share information on how we pay our providers, and answer any other questions.

Your privacy matters! CareSource only shares the data needed for your health care. Learn more at CareSource.com.

English: Get free help in your language with interpreters and other written materials. Get free aids and support if you have a disability. Call **1-800-488-0134** (TTY: 711).



Spanish: Obtenga ayuda gratuita en su idioma a través de intérpretes y otros materiales en formato escrito. Obtenga ayudas y apoyo gratuitos si tiene una discapacidad. Llame al **1-800-488-0134** (TTY: 711).

Haitian Creole: Jwenn èd gratis nan lang ou ak entèprèt ak lòt materyèl ki ekri. Jwenn èd ak sipò gratis si ou gen yon andikap. Rele **1-800-488-0134** (TTY: 711).

Ukrainian: Отримайте безкоштовну допомогу своєю мовою з перекладачами та іншими письмовими матеріалами. Отримайте безкоштовні засоби допомоги та підтримку, якщо Ви є особою з інвалідністю. Телефонуйте за номером **1-800-488-0134** (Для осіб з вадами слуху TTY: 711).

Nepali: तपाईंकाे भाषामा दोभाषे तथा अन्य लिखित सामग्रीहरू निःशुल्क प्राप्त गर्नुहोस्। तपाईंसँग असक्षमता छ भने निःशुल्क सहायताहरू तथा समर्थन प्राप्त गर्नुहोस्। **1-800-488-0134** (TTY: 711) मा फोन गर्नुहोस्।

Arabic: حصل على مساعدة مجانية بلغتك من خلال المترجمين الفوريين والمواد المكتوبة الأخرى. حصل على مساعدات مجانية ودعم مجاني إذا كنت تعاني من إعاقة. اتصل على الرقم **1-800-488-0134** (TTY الهاتف النصي للصم وضعاف السمع: 711).

Somali: Ka hel caawimo bilaash ah luqadaada leh turjubaano iyo agab kale oo qoran. Hel gargaar iyo taageero bilaash ah haddii aad naafo tahay Wac **1-800-488-0134** (TTY: 711).

Russian: Получите бесплатную помощь на своём языке с переводчиками и другими письменными материалами. Получите бесплатные вспомогательные средства и поддержку, если Вы являетесь лицом с инвалидностью. Звоните по номеру **1-800-488-0134** (Для лиц с нарушениями слуха TTY: 711).

Swahili: Pata msaada wa bure katika lugha yako pamoja na wakalimani na maandishi mengine. Pata usaidizi na msaada bila malipo kama una ulemavu. Piga simu **1-800-488-0134** (TTY: 711).

French: Obtenez gratuitement de l'aide dans votre langue au moyen d'interprètes et de documentation écrite. Obtenez des aides et un soutien gratuits si vous avez un handicap. Appelez le **1-800-488-0134** (ATS : 711).

Kinyarwanda: Habwa ubufasha mu rurimi rwawe kubantu ubifashijwemo n'abasemuzi hamwe n'inyandiko. Habwa ubufasha n'inkunga ku buntu nimba ufite ubumuga. Call **1-800-488-0134** (TTY: 711).

Uzbek: Og'zaki tarjimonlar va boshqa yozma materiallar orqali o'z ona tilingizda bepul yordam oling. Agar nogironligingiz bo'lsa, bepul yordam va ko'mak oling. **1-800-488-0134** (TTY: 711) raqamiga qo'ng'iroq qiling.

Pashtu: د شفاهي ژباړونکو او نورو ليکل شويو موادو له لاري په خپله ژبه کي وړيا مرسته ترلاسه کړئ. وړيا مرستې او ملاتړ ترلاسه کړئ که تاسو معلوليت لرئ. **1-800-488-0134** (TTY: 711) ته زنگ ووهئ.

Vietnamese: Nhận trợ giúp miễn phí bằng ngôn ngữ của quý vị qua thông dịch viên và các tài liệu dạng văn bản khác. Nhận hỗ trợ và trợ giúp miễn phí nếu quý vị là người khuyết tật. Gọi số **1-800-488-0134** (TTY: 711).

Tigrinya: ብ ተርጉምቲን ክልኡት ናይ ጽሑፍ ናውቲታትን ኣቢልኩ/ኪ ብቋንቋኻ/ኺ ካብ ክፍሊት ናጻ ሓገዝ ርኽብ/ቢ። እንተደኣ ኣካላዊ ስንክልና ዘለኩ/ኪ ከይኑ ካብ ክፍሊት ናጻ ደገፋትን ሓገዝን ርኽብ/ቢ። ናብ **1-800-488-0134** (TTY: 711) ደውል/ለ።

Dari: برای دریافت کمک رایگان به زبان خود با مترجمان و دیگر مواد کتبی تماس بگیرید. برای دریافت کمکها و حمایت رایگان در صورت داشتن معلولیت اقدام کنید. به این شماره ها تماس بگیرید **1-800-488-0134** (تلفن ارتباط برای ناشنویان: 711).

OH-MED-M-3287029

ODM Approved: 11/26/2024



Non-Discrimination Notice

We follow all state and federal civil rights laws. We do not discriminate, exclude, or treat people differently based on race, color, national origin, disability, age, religion, sex (which includes pregnancy, gender, gender identity, sexual preference, and sexual orientation), or based on marital, health, or public assistance status. We want all people to have a fair and just chance to be as healthy as they can be.

We offer free aids, services, and reasonable modifications if you have a disability. We can get a sign language interpreter. This helps you talk with us or to your providers. Get your printed materials in large print, audio, or braille at no cost. We can also help if you speak a language other than English. We can get an interpreter who speaks your language. Or get printed materials in your language. You can get this all at no cost to you.

Call **1-800-488-0134** (TTY: 711) if you need any of this help. We are open Monday through Friday, 7 a.m. to 8 p.m. We are here for you.

You may file a grievance if we did not provide these services to you or if you think we discriminated in any other way.

Mail: CareSource
Attn: Civil Rights Coordinator
P.O. Box 1947
Dayton, OH 45401
Phone: 1-844-539-1732 (TTY: 711)
Fax: 1-844-417-6254
Email: CivilRightsCoordinator@CareSource.com

You may also file a complaint with the U.S. Department of Health and Human Services Office for Civil Rights.

Mail: U.S. Department of Health and Human Services
200 Independence Ave., S.W.
Room 509F, HHH Building
Washington, D.C. 20201
Mail the complaint form found at
www.hhs.gov/sites/default/files/ocr-cr-complaint-form-package.pdf.
Phone: 1-800-368-1019 (TTY: 1-800-537-7697)
Online: ocrportal.hhs.gov

You can find this notice at **CareSource.com**.

OH-MED-M-3314793

ODM Approved: 11/8/2024

