

MANAGED CARE PLAN MEMBERSHIP

Benefits and Services




CareSource[®]

Your Medicaid. Your Choice.

Choose the Plan Ohio Trusts

WHY CARESOURCE?

With over 30 years of service, CareSource is a leading nonprofit health insurance company located in your community. Our mission is to make a lasting difference in our members lives by improving their health and well-being.

We care about you 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. Usted también puede recibir esta información de forma gratuita en otros formatos, como letra grande, braille o audio. 以其他语言提供的信息为免费。您还可以免费获得这些信息的其他形式版本 (如大字体版、盲文版或音频版)。

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 health care. 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?

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 of CareSource is voluntary. It is your choice.

If you are an Ohio resident, you are 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.

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 health care 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 check-ups, teeth cleanings and a large selection of eyeglasses. CareSource also provides a \$100 allowance for contact lenses and lens fittings.*

CareSource Life Services® provides one-on-one coaching for up to 24 months. We can connect you to community resources such as housing, food access, and legal assistance. The Life Coach also provides employment assistance and helps with meeting your educational goals.



Easy Access to Care

Transportation to and from doctors appointments, food pantries, pharmacies, WIC and County Department of Job and Family Services (CDJFS) appointments

CareSource24® Nurse Advice Line provides members 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 community resources such as utility assistance, 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 lifestyle 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 participating in the Babies First®, Kids First, and MyHealth rewards programs. Learn more about each program below.

Babies First® – Pregnant moms and babies through 17 months old can earn up to \$415. Simply see your doctor regularly while you are pregnant. See your doctor for a follow-up exam after your baby is born. And, make sure your child goes to all their well-child visits with the doctor.

Kids First – Kids ages 18 months through 17 years old can earn up to \$210 for a variety of routine exams and screenings. Rewards may vary based on the health and wellness needs of your child.

MyHealth – Adults age 18 through 64 years old can earn up to \$395 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 hypertension

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

Choosing a Primary Care Provider

You must choose a primary care provider (PCP) from CareSource's provider network. Your PCP is your personal doctor and will direct most of your health care 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 Hotline at **1-800-324-8680 (TTY: 1-800-292-3572)** or visit the Medicaid Hotline website at www.ohiomh.com.

You can change your PCP to another CareSource 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/
Rural Health Clinics

Certified nurse midwives or certified nurse
practitioners

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



What is OhioRISE?

OhioRISE (Resilience through Integrated Systems and Excellence) is a specialized Medicaid managed care program that focuses on children and youth who have complex behavioral health and multisystem needs. OhioRISE services became available on July 1, 2022. Eligible children and youth receive their behavioral health benefits through Aetna Better Health of Ohio, the OhioRISE plan.

Who may benefit from OhioRISE?

Child and youth with multisystem needs often require help and services from community systems that may include juvenile justice, child protection, developmental disabilities, schools, mental health and addiction, and others.

Children and youth who may benefit from OhioRISE:

Have multiple needs that result from behavioral health challenges,

Have multisystem needs or are at risk for deeper system involvement, and/or

Are at risk of out-of-home placement or are returning to their families from out-of-home placement.

Where can I find more information on OhioRISE?

Visit managedcare.medicaid.ohio.gov/OhioRISE for more information on OhioRISE. On or after June 1, 2022, you can call OhioRISE Member Services at **1-833-711-0773 (TTY: 711)** for more information on the program. On or after July 1, 2022, you can also visit AetnaBetterHealth.com/OhioRISE for assistance.



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 Hotline at **1-800-324-8680 (TTY: 1-800-292-3572)**. You can also 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.

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.

To learn more about CareSource

CALL 1-800-488-0134 (TTY: 711)
7 a.m. to 7 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.

ENGLISH

ATTENTION: If you speak English, language assistance services, free of charge, are available to you.

Call: 1-800-488-0134
(TTY: 1-800-750-0750 or 711).

SPANISH

ATENCIÓN: Si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-800-488-0134 (TTY: 1-800-750-0750 o 711).

NEPALI

ध्यान दिनुहोस्, तपाईं नेपाली भाषा बोल्नुहुन्छ भने तपाईंका लागि निःशुल्क भाषा सहायता सेवा उपलब्ध छ । 1-800-488-0134 (TTY: 1-800-750-0750 वा 711) मा कल गर्नुहोस् ।

ARABIC

انتبه: إذا كنت تتحدث العربية، فإن خدمات المساعدة اللغوية متاحة لك مجانًا. اتصل على الرقم 1-800-488-0134 (الهاتف النصي: 1-800-750-0750 أو 711).

SOMALI

DIGTOONI: Haddii aad ku hadasho Af Soomaali, adeegyada caawimada luqada, oo lacag la'aan ah, ayaa lagu heli karaa adiga. Wac 1-800-488-0134 (TTY: 1-800-750-0750 or 711).

RUSSIAN

ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните 1-800-488-0134 (телетайп: 1-800-750-0750 or 711).

FRENCH

ATTENTION : Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le 1-800-488-0134 (ATS :1-800-750-0750 or 711).

VIETNAMESE

CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số 1-800-488-0134 (1-800-750-0750 or 711).

SWAHILI

ZINGATIA: Ikiwa unazungumza Kiswahili, unaweza kupata huduma za usaidizi wa lugha, bila malipo. Piga simu kwa 1-800-488-0134 (TTY: 1-800-750-0750 au 711).

UKRAINIAN

УВАГА! Якщо ви розмовляєте українською мовою, ви можете звернутися до безкоштовної служби мовної підтримки. Телефонуйте за номером 1-800-488-0134 (телетайп: 1-800-750-0750 або 711).

TRADITIONAL CHINESE

注意：如果您使用繁體中文，您可以免費獲得語言援助服務。請致電 1-800-488-0134 (聽障電話：1-800-750-0750 或 711)。

KINYARWANDA

ICYITONDERWA: Niba uvuga Ikinyarwanda, ushobora guhabwa serivisi z'ubufasha bujyanye n'indimi ku buntu. Hamagara kuri 1-800-488-0134 (TTY: 1-800-750-0750 cyangwa 711).

SIMPLIFIED CHINESE

注意：如果您使用繁體中文，您可以免費獲得語言援助服務。請致電 1-800-488-0134 (TTY: 1-800-750-0750 or 711)。

DARI

توجه: اگر انگلیسی صحبت میکنید، خدمات حمایتی لسانی، بطور رایگان در دسترس شما قرار دارد. 1-800-488-0134 (TTY: 1-800-750-0750 or 711) تماس بگیرید.

AMHARIC

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GUJARATI -

ધ્યાન આપો: જો તમે ગુજરાતી બોલો છો, તો ભાષા સહાય સેવાઓ, તમારા માટે નિ:શુલ્ક ઉપલબ્ધ છે. 1-800-488-0134 (TTY: 1-800-750-0750 અથવા 711) પર કોલ કરો.

Notice of Non-Discrimination

CareSource complies with applicable state and federal civil rights laws and does not discriminate on the basis of age, gender, gender identity, color, race, disability, national origin, marital status, sexual preference, religious affiliation, health status, or public assistance status. CareSource does not exclude people or treat them differently because of age, gender, gender identity, color, race, disability, national origin, ethnicity, marital status, sexual preference, sexual orientation, religious affiliation, health status, or public assistance status.

CareSource provides free aids and services to people with disabilities to communicate effectively with us, such as: (1) qualified sign language interpreters, and (2) written information in other formats (large print, audio, accessible electronic formats, other formats). In addition, CareSource provides free language services to people whose primary language is not English, such as: (1) qualified interpreters, and (2) information written in other languages. If you need these services, please call 1-800-488-0134 (TTY: 1-800-750-0750 or 711).

If you believe that CareSource has failed to provide the above mentioned services to you or discriminated in another way on the basis of age, gender, gender identity, color, race, disability, national origin, marital status, sexual preference, religious affiliation, health status, or public assistance status, you may file a grievance, with:

CareSource
Attn: Civil Rights Coordinator
P.O. Box 1947, Dayton, Ohio 45401
1-800-488-0134 (TTY: 1-800-750-0750 or 711)
Fax: 1-844-417-6254

CivilRightsCoordinator@CareSource.com

You can file a grievance by mail, fax, or email. If you need help filing a grievance, the Civil Rights Coordinator is available to help you.

You may also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, electronically through the Office of Civil Rights Complaint Portal, available at <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>, or by mail or phone at:

U.S. Department of Health and Human Services
200 Independence Avenue, SW Room 509F
HHH Building Washington, D.C. 20201
1-800-368-1019, 800-537-7697 (TDD)

Complaint forms are available at <http://www.hhs.gov/ocr/office/file/index.html>.



