2025 Dental Presentation

2025 IHCP Works Annual Seminar

Health Care with Heart

MISSION-FOCUSED Comprehensive, member-centric health, and life services

EXPERIENCED With over 30 years of service, CareSource is a leading non-profit health insurance company

DEDICATED We serve over 2 million members through our programs

Agenda

Oral Health Strategy

Working with CareSource

Working with SkyGen

2025 Dental Manual

Resources

Oral Health Strategy

CareSource Oral Health Strategy

Member Initiatives

- CareSource Dental Home
- Enhanced Dental Benefits
- Dental Weeks

Provider Initiatives

- Dental Attribution
- Engagement by Dental Director and Health Partner Specialists

Community Initiatives

- Population Health Analytics
- Health Fairs
- Community Partnerships

Performance Evaluation

- Tracking and trending of quality metrics
- Member, provider, and community feedback

Welcome Dental Home

Dental Home Primary Dental Provider (PDP) Assignment

Providers Gain Access to Member Panels/Members Receive Assignment

Member Lists Shared with Providers (Dental Weeks, Outreach, and Gap Closures)

Working with CareSource

CareSource is an Open Dental Network

CareSource has been and is currently an open network for both the Hoosier Healthwise and Healthy Indiana Plans.
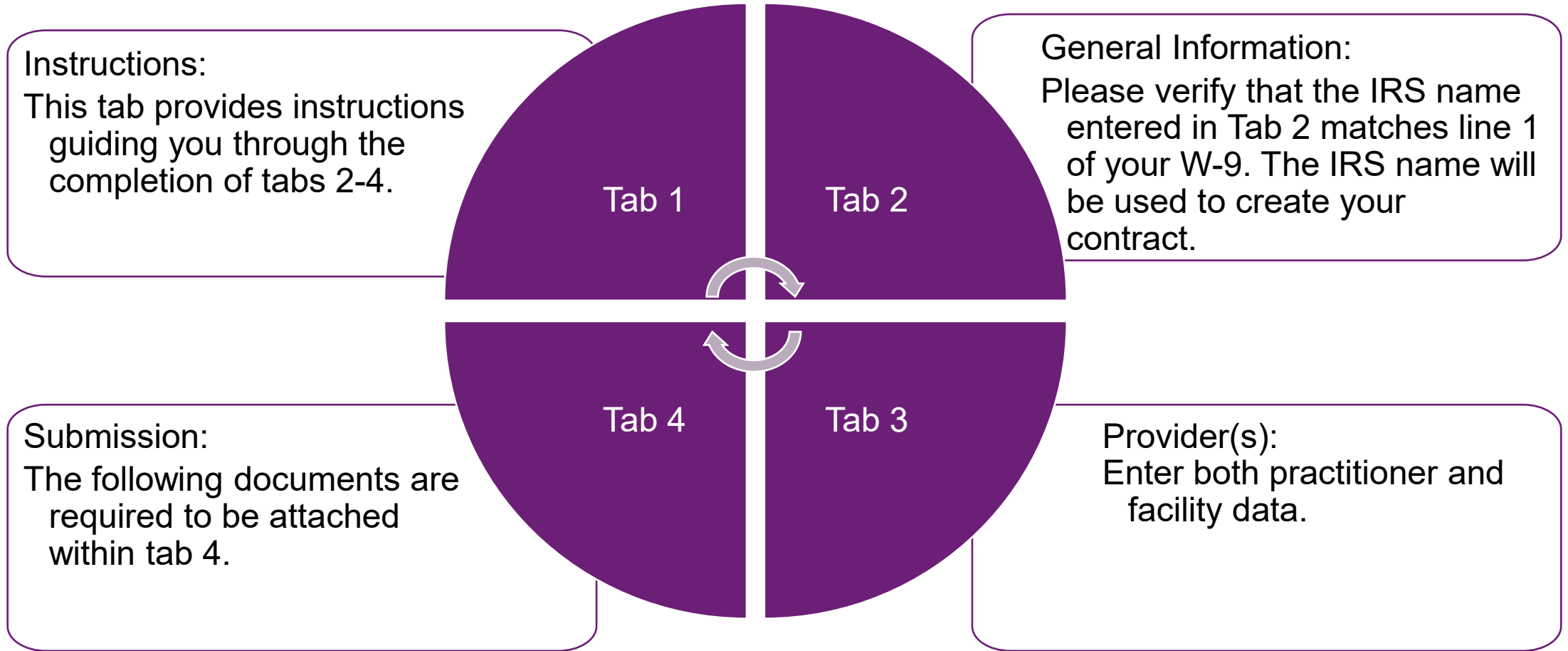
This means:

- If the individual seen has active benefits at the time of service through either plan.

- And the rendering provider is active with Indiana Medicaid.

- And the Provider is registered with the State for the location.

- And the Service does not require Prior Authorization.

Then:

- The provider may bill and be reimbursed as in network.

- Providers are allowed to see any member, and members may see any provider who is a part of the Indiana Health Coverage Programs (IHCP) for services.

Contracting

Tab 1

Tab 2

Tab 4

Tab 3

Instructions:
This tab provides instructions guiding you through the completion of tabs 2-4.

General Information:
Please verify that the IRS name entered in Tab 2 matches line 1 of your W-9. The IRS name will be used to create your contract.

Submission:
The following documents are required to be attached within tab 4.

Provider(s):
Enter both practitioner and facility data.

To initiate contracting, please complete the **New Health Partner Contracting Form**.
This form consists of four tabs that will need to be completed.
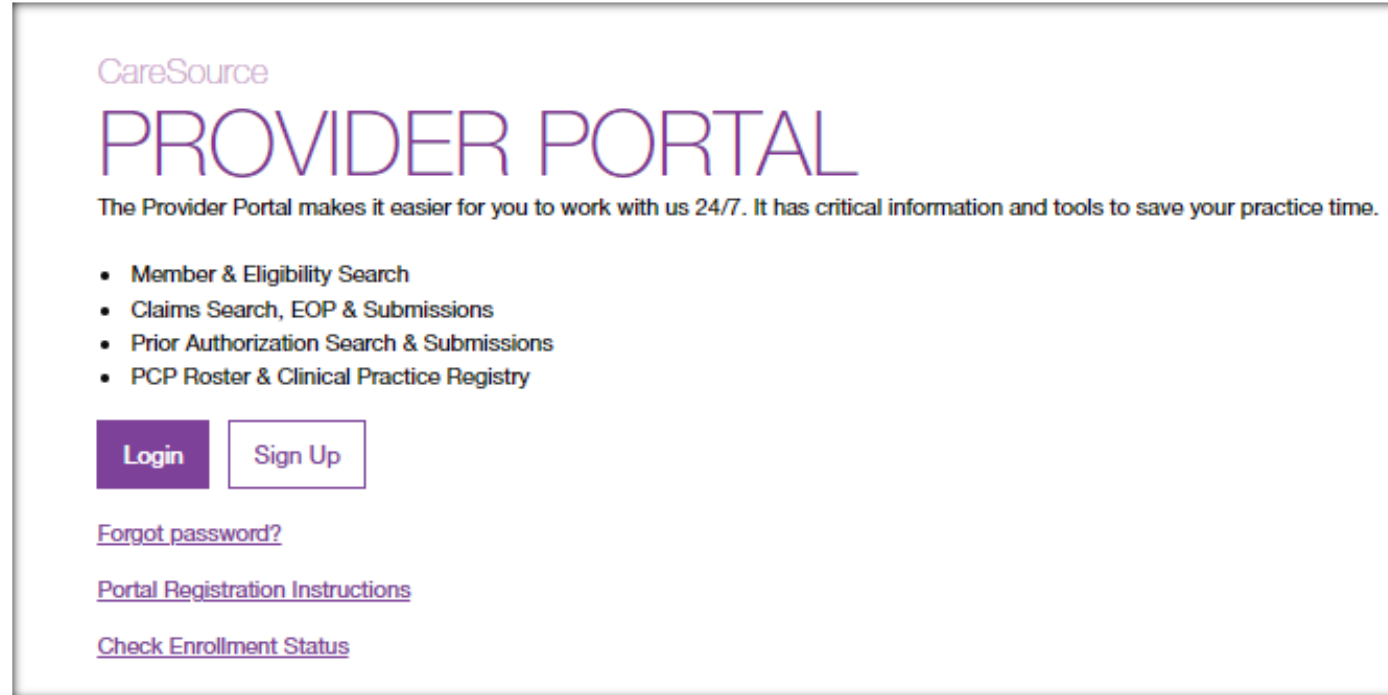
Provider Portal Registration

Go to CareSource.com. Click Provider from the Log-in drop-down.

Select **Indiana.**

Click Register For an Account under **Provider Portal Login.**

Enter your information, including your CareSource Provider Number (located in your welcome letter).

Follow remaining steps to register.

CareSource

PROVIDER PORTAL

The Provider Portal makes it easier for you to work with us 24/7. It has critical information and tools to save your practice time.

- Member & Eligibility Search
- Claims Search, EOP & Submissions
- Prior Authorization Search & Submissions
- PCP Roster & Clinical Practice Registry

Login   Sign Up

Forgot password?

Portal Registration Instructions

Check Enrollment Status

For issues with the Provider Portal contact CareSource Provider Services: **1-844-607-2831**
Avaliable Monday to Friday 8 a.m. to 8 p.m. (EST)

Eligibility Verification

Offers ability to search by member information:
first name, last name, and date of birth.

Member Eligibility

Recipient Id	CareSource Id	Member Info	Multiple Recipient Ids	Multiple CareSource Ids

Recipient Id:

Member is eligible for service on the specified date

Date of Service   6/25/2024

Use Recipient ID tab to search by
the member's Medicaid number.

Search

Contained demographic details on the searched member.

Member Information

Eligibility Response will be blue (see above) if member is eligible. If member is not eligible the red box below will display.

Member is not eligible for service on the specified date

Find a Doctor
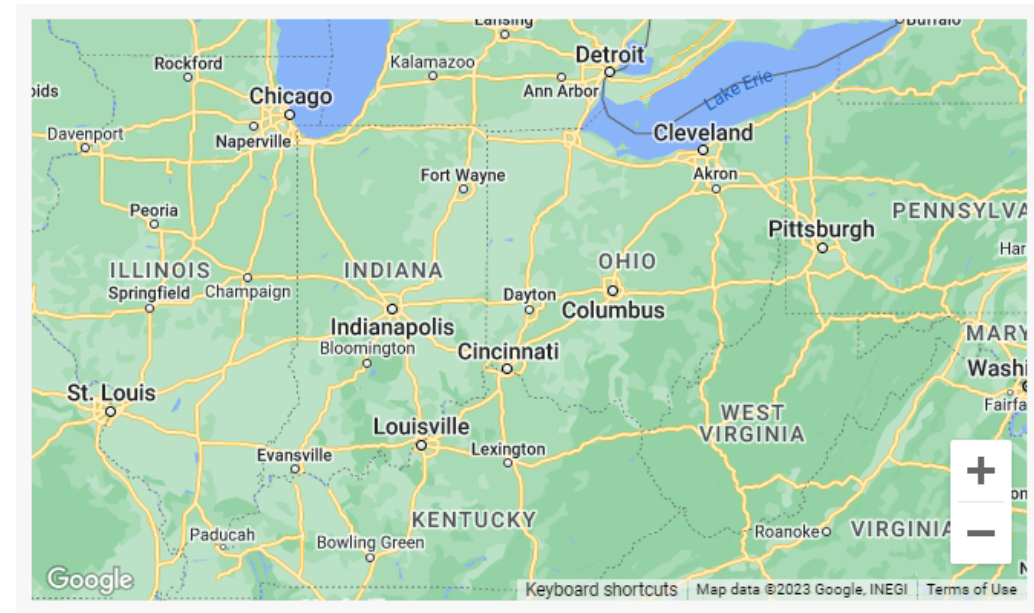
Working with SkyGen

CareSource and SkyGen Dental

CareSource partners with SkyGen Dental to enhance efficiency and consistency of our Dental Management Services.

SkyGen manages

- Claims payment
- Prior Authorization
- Electronic Funds Transfer (EFT)
- Portal issues

CareSource manages

- Member-related concerns such as claim issues, covered services, and patient eligibility
- Contracting with dental providers

SkyGen Dental Provider Portal

To access the Skygen Dental Portal:

Log in to the CareSource Provider Portal, click on the "Dental Provider Login" link under the "Providers" heading, and register, or

Access the Scion portal directly at https://pwp.sciondental.com/PWP/Landing

SkyGen Dental Provider Portal Login

USERS

Username *

Password *

LOGIN

Forgot your user name or password?

NEW USER?

REGISTER NOW

Logging In

Please click on the register now tab under new user when logging in for the first time.

You will need to have your SkyGen ID to create a log in. You can get this from SkyGen directly, or through CareSource Provider Services at 1-844-607-2831.

Types of Registration

Register as a provider

Register as a **provider** if you work with only your own patients. As a provider, you will have access to your own information.

Register as a location

Register as a **location** if you are administrative staff for an office or clinic location. As a location, you will have access to information for all the providers associated with your physical location.

Register as a payee

Register as a **payee** if you receive payment for adjudicated claims on behalf of one or more providers and/or locations. As a payee, you will have access to information for all your associated providers and locations.

Time-Saving Functions of Portal

View CareSource member service history, covered benefits, and fee schedules

Create a member eligibility calendar and view real-time eligibility for multiple members

View authorization guidelines and required documentation prior to submitting authorizations

Submit authorizations with attachments for faster determinations

Submit and track claims

View current and past remittance advice

Register for EFT
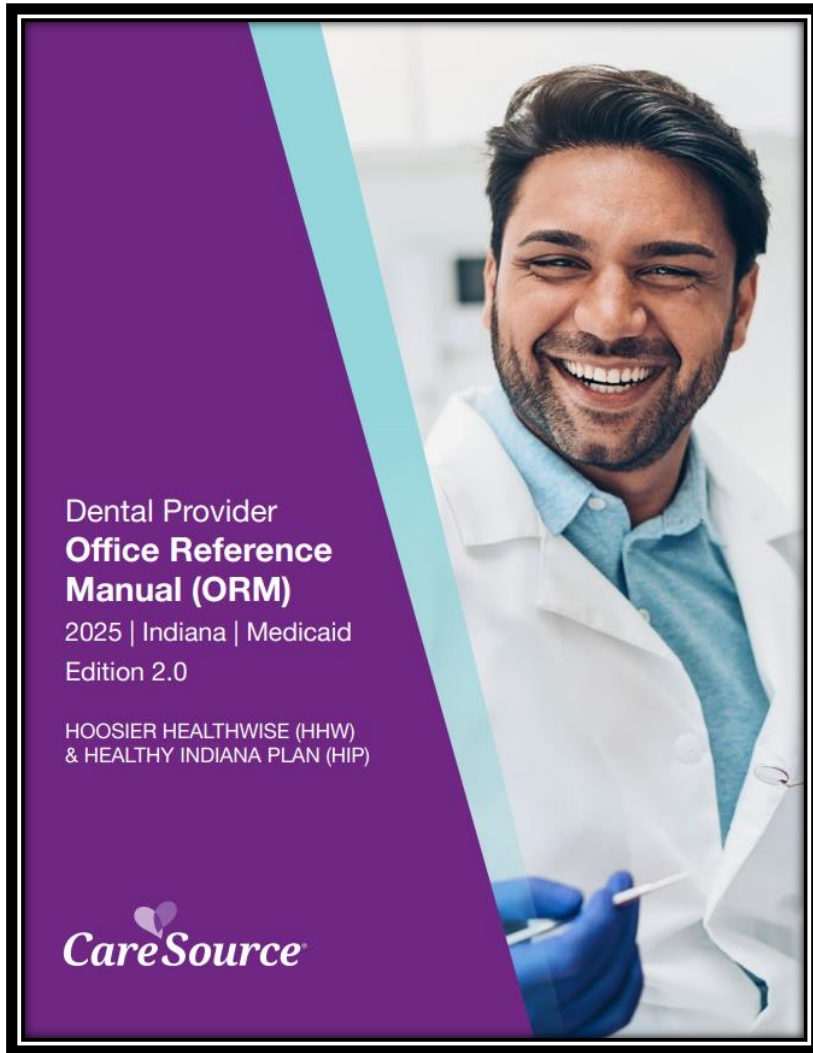
SkyGen Dental Portal Questions

Contact the web portal team at ProviderPortal@scion.com for issues related to Portal access.

2025 Dental Manual

Dental Manual

The Dental Provider Office Reference Manual (ORM) is a comprehensive resource for our dental providers and serves as a link between your office and CareSource. It includes important information on topics such as covered services, services that require prior authorization, claim submission, and much more.

Dental Services That Require Prior Authorization (PA)

Periodontal Surgery and some Endodontic Surgery	Space maintenance for children under 3 years of age or if permanent teeth are missing	Dentures (complete and partial)	Sleep Apnea Appliances
Some Frenectomy and Corticotomy Procedures	General anesthesia and sedation ≥ Age 21	Repairs and relines of dentures (complete and partial) for members ≥ Age 21	Orthodontics

Prior Authorization Helpful Information

Some dental services may require PA for specific age groups. Some services may require post treatment/prepayment review. Any unspecified services by report require prior authorization. The Dental Office Reference Manual (ORM) should be consulted for specific prior authorization requirements.

Enhanced Benefits

CareSource offers some Enhanced Dental Benefits for HIP and HHW Members. See Benefit Coverage for details. The specific enhancements are noted in the Dental Manual.

Value-added services are services that are not offered in the standard State Medicaid benefit coverage and are voluntarily provided by CareSource to improve health outcomes.

Dental Provider Office Reference Manual (ORM)

Enhanced Benefits Example

One example of an enhanced benefit is code D1206. This is illustrated on page 82 of the Dental Manual.

Code	Service Description	Benefit Limitations/Frequency
D1206	Topical Application of Fluoride Varnish	One of (D1206, D1208) per 6 Month(s). Age 0 – 20

Enhanced Benefit *One (**D1206**) per 6 month(s) (Reimbursable for **Age ≥ 21** with documented high caries risk or medical condition increasing susceptibility to caries)* |
| D1208 | Topical Fluoride Application-Excluding Varnish | |

Dental Claim Submission

Online: https://pwp.sciondental.com/PWP/Landing

Electronic Data Interchange (EDI) Payer ID: INCS1
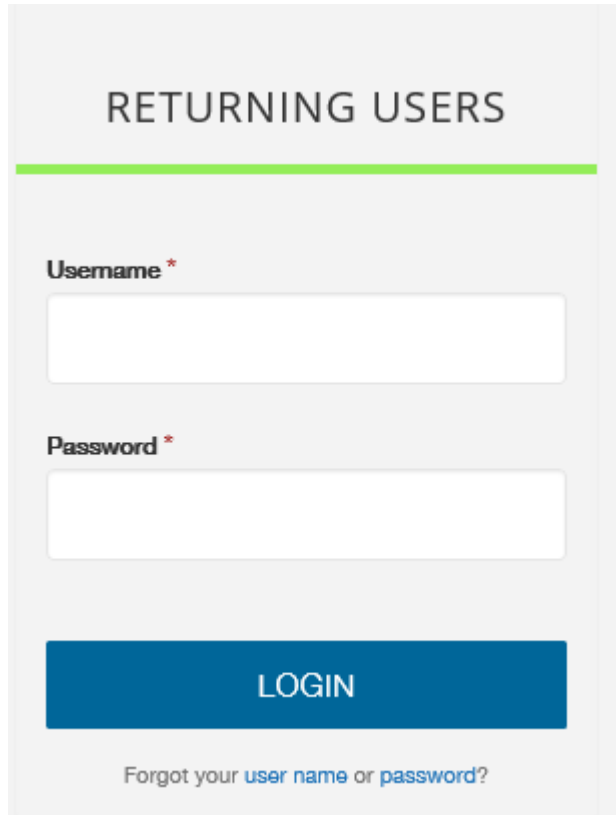
Paper:
CareSource
Attn: Claims Department
P.O. Box 3607
Dayton, OH 45401-3607

The filing limit for participating providers is 90 calendar days, and non-participating providers is 180 calendar days.

How to Submit a Prior Authorization

Online

Dental health partners may submit prior authorizations online at Landing (sciondental.com).

Paper

CareSource IN: Authorizations

P.O. Box 745

Milwaukee, WI, 53201

Contact CareSource Health Partner Services at **1-844-607-2831** (Monday to Friday 8 a.m. to 8 p.m. (EST)) for any questions regarding prior authorizations.

Corrected Claims

In the event that incomplete, incorrect, or unclear information was originally submitted on a claim; corrected claims should be submitted within 60 calendar days from the date of the explanation of payment (EOP).

Examples include missing tooth number or surface, the date of service, procedure/ diagnosis code, incorrect unit count, and/or modifier, provider, place of service, wrong provider NPI or facility location.

Resubmit the entire claim with updated information as a "Corrected Claim." You do not need to file an appeal.

Submitting a Corrected Claim

Identify the claim as "corrected" by boldly and clearly marking the claim as "Corrected Claim" across the top of a paper claim form.

Identify the original Claim/Encounter Number by writing it in the Remarks section (Box 35) on a paper American Dental Association form.

Attach any supporting documentation and send documentation in the same package with the paper claim form.

Send paper forms and documents to:
    CareSource
    ATTN: Corrected Claims Dept.
    P.O. Box 3607
    Dayton, OH 45401

Definition of a Claims Dispute

A dispute is the **first** formal review of the processing of a claim by CareSource (excluding denials based on medical necessity) and is submitted prior to submitting a claim appeal.

You can submit a claim payment dispute when you disagree with payment and any other post-service claim denial.

Dental Claim Disputes

A claim dispute can be filed using the claim dispute [form](#).

Adjustments to any overpayments will be made on subsequent reimbursements to the Health Partner/Provider or the Provider can issue refund checks to CareSource for any overpayments.

Mail

CareSource

Coordinator Attn: Health Partner

Claims Disputes - Indiana

P.O. Box 2008

Dayton, OH 45401-2008

Fax

Provider Claims Disputes Fax Number:
937-531-2398

Dental Claim Appeals

Health partners may only submit appeals <u>after</u> completing the claim dispute process as previously outlined.

Appeals must be submitted within **60 calendar days** of the dispute decision.

CareSource must issue a written decision within **30-calendar days** of receipt of the written request for appeal.

If the appeal is not resolved within the **30-calendar day** timeframe, the appeal will be determined as an approval.

Appeal requests must be submitted using either the provider portal or by paper.

Provider Portal:

https://providerportal.caresource.com/IN/User/Login.aspx.

Click the "Claim Appeals" link on the left

Paper:

Use the Claim Appeal form in the Dental Health Partner manual.

Please include: member's name and member ID number (MID), health partner's name and ID number, codes and reasons the determination should be reconsidered, and any additional available medical information that supports your request to reverse the determination or that supports medical necessity.

Electronic Funds Transfer and Electronic Remittance Advice

How do I register for ePayment Center?

Visit https://skygen.epayment.center/Registration and follow the instructions to obtain a registration code. Your registration will be reviewed by a customer service representative, and a link will be sent to your email once confirmed.

- Follow the link to complete your registration and setup your account.
  1) Log into the portal
  2) Enter your bank account information
  3) Select remittance data delivery options
  4) Review and accept ACH Agreement and click "submit"

What do I need to register for the ePayment Center?

- 9-digit Federal Tax Identification Number (TIN) or Employer Identification Number (EIN)

- Practice's corporate name and principal information

- Bank account routing transit number (RTN) or ABA Routing Number

Where can I find more information/assistance on the registration process?

Additional enrollment instructions and a detailed question and answer guide are available for download at https://skygen.epayment.center/Registration. Need additional help? Call 855-774-4392 or email help@epayment.center.

If providers would prefer to use the Zelis Electronic Options (ACH or Virtual Card Payment) or prefer to receive paper checks, please know these options still exist.

Member Billing

Not permitted:

- Balance billing a member for a Medicaid-covered service.
- Billing a member in emergent situations.

To charge a member for non-covered services, health partners <u>must</u> disclose in writing:

- Service to be rendered is not covered by Medicaid.
- Whether procedures or treatments that **are** covered by Medicaid are available in lieu of non-covered service.
- The health partner must offer, on a disclosure form, the member's willingness to accept the financial responsibility of the non-covered service, the amount to be charged for the non-covered service, and the specific date the service is to be performed.
- ***<u>Documentation must be signed by member prior to rendering the specific non-covered service</u>***.

Note: Medicaid covered services **<u>cannot</u>** be billed to the member. <u>Here</u> you will find the policy pertaining to member billing exceptions.

Resources

Updates and Announcements

Visit the **Updates and Announcements page** located on CareSource.com website for frequent network notifications.

Updates may include:

Medical, pharmacy and reimbursement policies

Authorization requirements

Provider Communications Sign Up Form

The **sign-up** form:
https://secureforms.caresource.com/ProviderCommunicationSignup

The **unsubscribe** function at
https://secureforms.caresource.com/ProviderCommunicationSignup/unsubscribe

Quarterly Friday Forums

- A Save the Date will be published on the <u>Updates & Announcements page</u>.

- Revenue cycle, contracting, credentialing, clinical operations, quality, or administrative staff are welcome to attend.

- Brief presentation covering updates.

- Live question and answer follows presentation.

Please reach out to your Health Partner Engagement Specialist for any topics you want to hear about.

How to Contact CareSource

Communicating with CareSource

Provider Services		
Medicaid	1-844-607-2831	Monday to Friday 8 a.m. to 8 p.m. (EST)

| Member Services		
Medicaid	1-844-607-2829	Monday to Friday 8 a.m. to 8 p.m. (EST)

Health Partner Engagement Representatives – Regional Specialist

Tammy Garrett
219-221-7065
Tammy.Garrett@CareSource.com
Franciscan Alliance, Fresenius (Statewide)

Amy Dagon
317-417-9652
Amy.Dagon@CareSource.com
Community Health Network, Union Hospital, American Health Network

Paula Egan
812-447-6661
Paula.Egan@CareSource.com
Deaconess, Ascension – St. Vincent Health
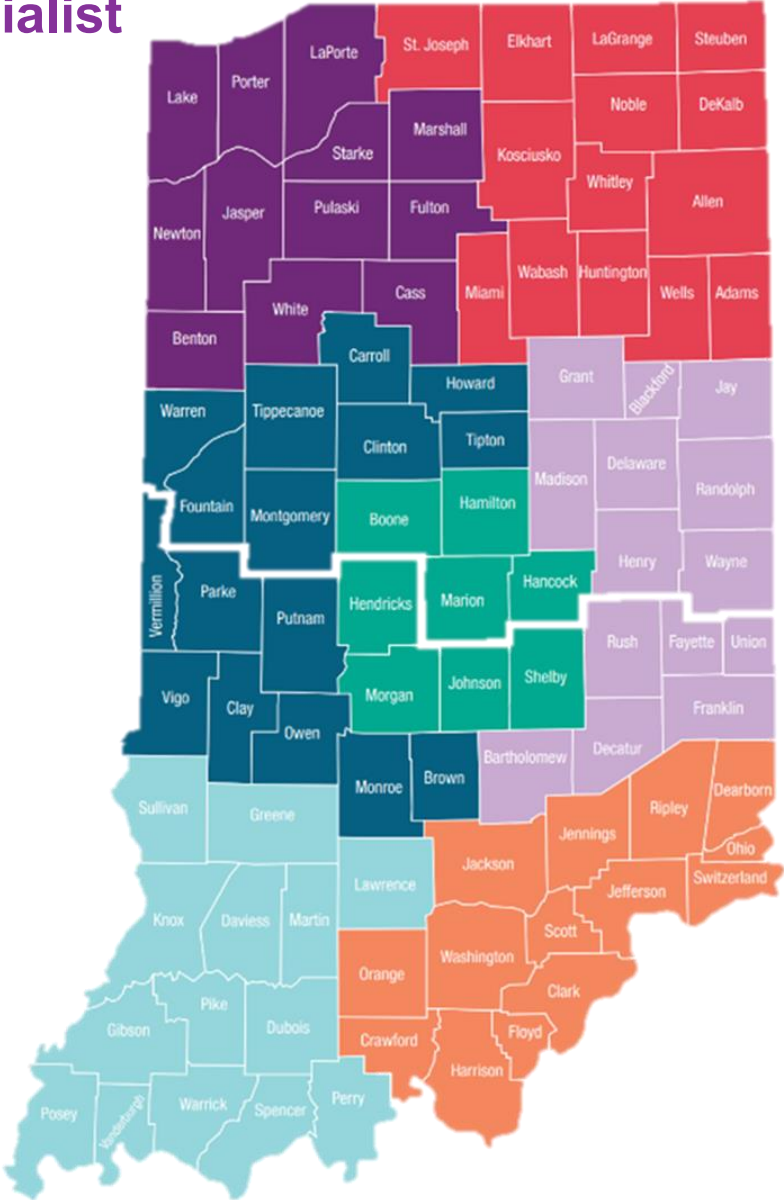
Leigh Hoover
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Leigh.Hoover@CareSource.com
Parkview, Lutheran, St. Joseph Regional Medical Center, Beacon

Francesca Mekos
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Francesca.Mekos@CareSource.com
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Sarah Tinsley
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Sarah.Tinsley@CareSource.com
Indiana University, Suburban Health Organization

Bonnie Waelde
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Bonnie.Waelde@CareSource.com
University of Louisville, Norton, Baptist Health Floyd, ATI Physical Therapy (Statewide)

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Health Partner Engagement Representatives – Behavioral Health

Amanda Denny, Behavioral Health
Resolution Specialist (Northern Territory)
765-620-6722
Amanda.Denny@CareSource.com

Stephanie Gates, Behavioral Health
Resolution Specialist (Southern Territory)
317-501-6380
Stephanie.Gates@CareSource.com

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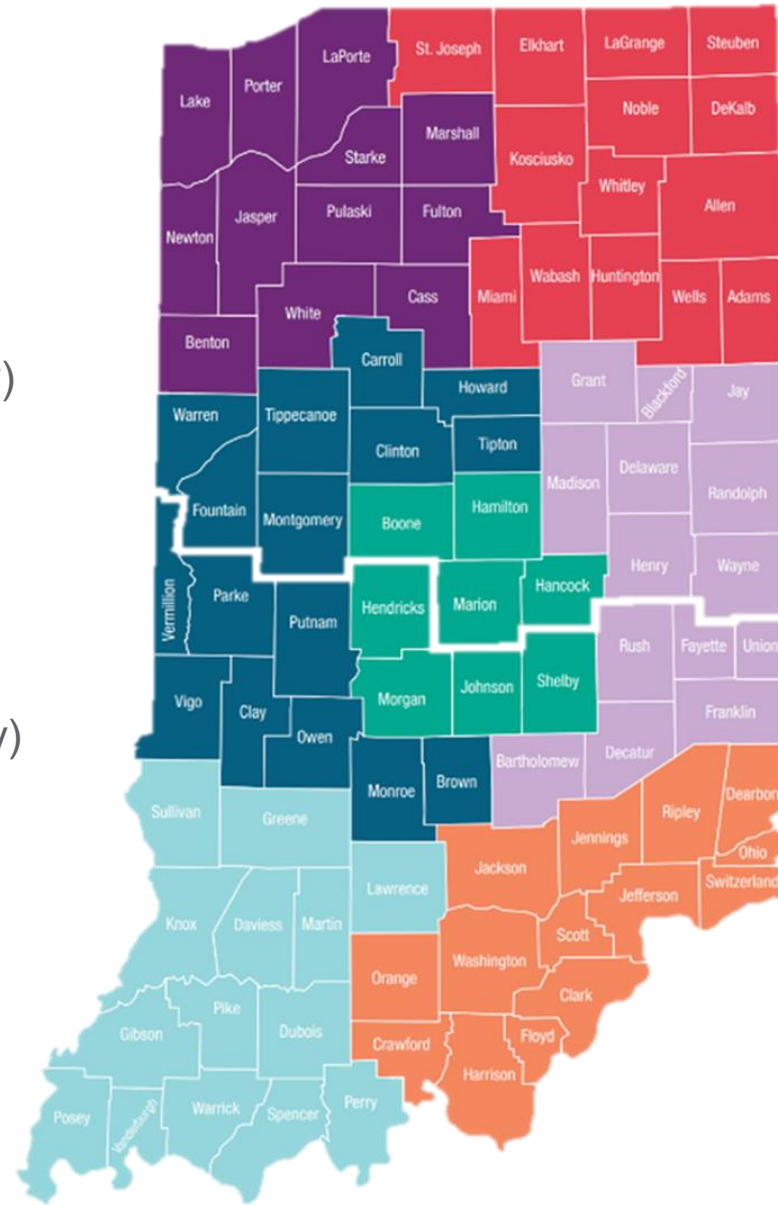
Contracting Managers – Hospitals/Large Health Systems

Maria Crawford (Northern Territory)
317-416-6854
Maria.Crawford@CareSource.com

Sara Culley (Southern Territory)
765-256-0423
Sara.Culley@CareSource.com

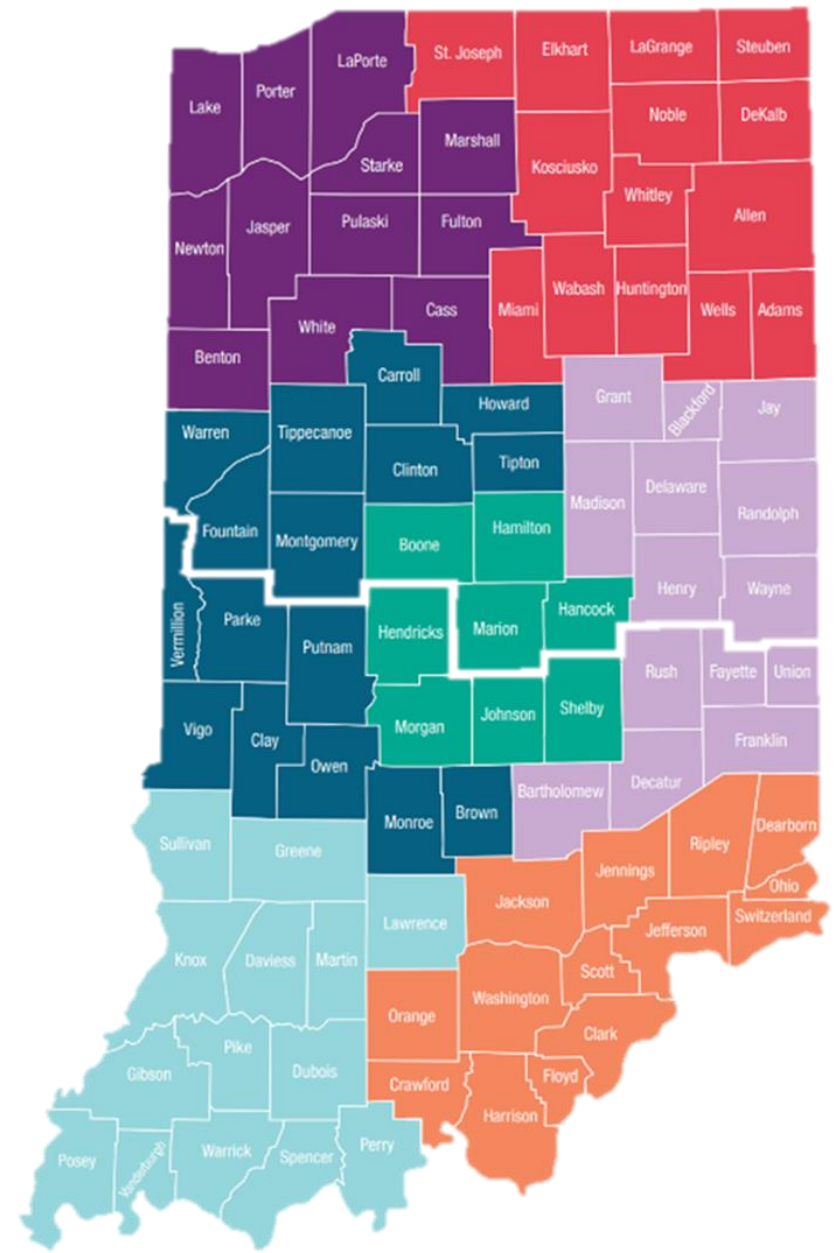**Health Partner Engagement Representatives – Manager**
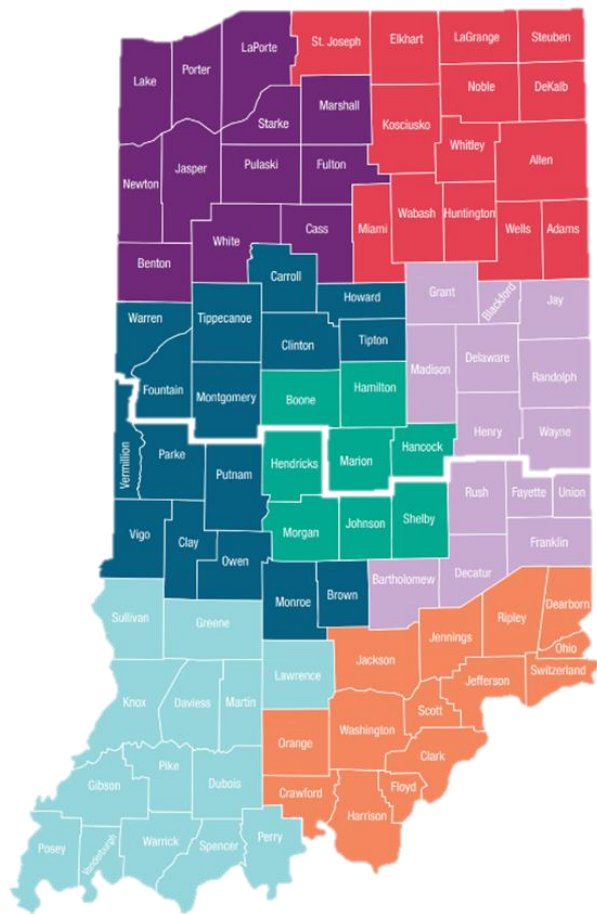
Amy Williams
Manager Health Partnerships
317-741-3347
Amy.Williams@CareSource.com

Contact Us | Indiana – Medicaid | CareSource

SCAN FOR A COPY OF THE HP ENGAGEMENT SPECIALIST MAP

Thank you for attending!

By taking a few moments to complete the event and session evaluations, you help us understand your experience and shape the future of our programs.

TQRCG

gainwell.

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