

# Provider Transition Quick Reference Guide





## HAP CareSource™ MI Health Link (Medicare-Medicaid Plan) Coming January 1!

In October, we announced HAP and CareSource, an Ohio-based nonprofit managed care health plan, received regulatory approval to move forward with their joint venture after a comprehensive review by state and federal regulatory agencies.

By joining the strengths of the two nonprofit organizations, HAP and CareSource are extending and enhancing a mission-based legacy of offering comprehensive health coverage, providing access to the best physicians, and delivering compassion and care through a combined Medicaid offering and planned re-entry to the Health Care Marketplace.

On Oct. 1, 2023, HAP Empowered Medicaid plans became HAP CareSource plans. This includes members in Medicaid, MICHild, Healthy Michigan Plan, and Children's Special Healthcare Services plans. Members received new ID cards and there is a dedicated website.

On Jan. 1, 2024: HAP Empowered MI Health Link will become HAP CareSource MI Health Link plan.

This document contains important information you need to know for:

- Medicaid business prior to Oct. 1, 2023 and after
- HAP CareSource MI Health Link prior to Jan. 1, 2024 and after

### Important Contacts

Email [providernetwork@hap.org](mailto:providernetwork@hap.org) for:

- Access to online applications
- Contract questions
- Credentialing status
- Provider office education and training

### Contracting and Credentialing

Your HAP Empowered contract will not change. Your Medicaid patients will be known as HAP CareSource members as of October 1 or HAP CareSource MI Health Link for Medicare-Medicaid members as of January 1. The same contract terms will apply to HAP CareSource and HAP CareSource MI Health Link members.

## Resources for Providers

<b>Medicaid Date of Service (DOS) prior to Oct. 1, 2023</b>  <b>MI Health Link DOS prior to Jan. 1, 2024</b>	<b>HAP CareSource Medicaid DOS Oct. 1, 2023 and forward</b>	<b>HAP CareSource MI Health Link DOS Jan. 1, 2024 and forward</b>
For the provider manual and newsroom, visit: <b>hap.org</b>	The HAP CareSource Provider Manual, Updates and Announcements (equivalent to HAP Newsroom), Provider Policies and Procedures, and more can be found at: <b>HAPCareSource.com</b>	

## Accessing Secure Provider Portals

We have made it easy; providers will only need to remember one username and password to access the provider portal(s).

<b>Medicaid DOS prior to Oct. 1, 2023</b>  <b>MI Health Link DOS prior to Jan. 1, 2024</b>	<b>HAP CareSource Medicaid DOS Oct. 1, 2023 and forward</b>	<b>HAP CareSource MI Health Link DOS Jan. 1, 2024 and forward</b>
Refer to the HAP Provider Portal: <b>hap.org</b>	Refer to the HAP CareSource Provider Portal: <b>CareSource.com/mi/providers/provider-portal</b>	
Log in: <b>hap.org</b>	<b>If you are currently an active user of the HAP Provider Portal:</b>	
	<ul style="list-style-type: none"> <li>Visit <b>CareSource.com/mi/providers/provider-portal/medicaid</b></li> </ul>	<ul style="list-style-type: none"> <li>Visit <b>CareSource.com/mi/providers/provider-portal/mihealthlink</b></li> </ul>
	<ul style="list-style-type: none"> <li>Log in to the HAP Provider Portal with your HAP username and password</li> <li>Once logged in, you can link directly to the HAP CareSource Provider Portal</li> <li>The first time you access the HAP CareSource Provider Portal, you will need to set up the <b>Multifactor Authentication</b> method you would like to use when signing in</li> <li>Locate your verification code and <b>enter the code</b></li> </ul> <p>*If you are not registered for the HAP Provider Portal, please <b>self-register</b> and then follow the instructions above.</p>	

# ID Cards

<b>HAP CareSource Member ID Card</b>	<b>Medicaid ID Card</b>
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Members will receive a HAP CareSource ID card but should continue to carry their Michigan Medicaid ID card as well. Below are samples of both cards.

**Member Name:**  
<FirstName> <LastName> <MI>

**Member ID #:** <12345678900>

**Medicaid ID#:** <12345678900>

**Health Plan:** <XXXX>

**RxBIN** - <003858>

**RxPCN** - <MA>

**RxGRP** - <CSHAPMI>

**RxID** - <XXXXXXXXXXXXXXXXXX>

**Primary Care Provider (PCP) Name:**  
<PCP Name>

**PCP Phone:** <1-XXX-XXX-XXXX>

<HAPCareSource.com>

This card does not guarantee coverage. To verify benefits, view claims, get transportation, or find a provider, visit the website or call:

**Member Services:** <1-833-230-2053 (TTY: 711)>

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**24-Hour Nurse Advice Line:** <1-833-687-7370 (833-NURSE-70)>

<b>Hearing:</b> (NationsHearing): <1-877-484-2688>	<b>Providers:</b> <1-833-230-2102>
<b>Dental:</b> (Delta): <1-866-558-0280>	<b>Medical Claims:</b>
<b>Pharmacist:</b> <1-800-922-1557>	<HAP CareSource P.O. Box 1186 Dayton, OH 45401-1186>

Please contact Member Services for transportation benefit. MI-MED-M-2143202

**Michigan Medicaid ID card**  
This card indicates the member is enrolled in Michigan Medicaid.



## HAP CareSource MI Health Link card

Members will receive a HAP CareSource MI Health Link card. This is the only card they need to carry.

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**Member Name:**  
<FirstName> <LastName> <MI>

**Member ID #:** <12345678900>

**Medicaid ID#:** <12345678900>

**Health Plan:** <XXXX>

**RxBIN** - <610014>

**RxPCN** - <MEDDPRIME>

**RxGRP** - <CSMIMMP>

**RxID** - <XXXXXXXXXXXXXXXXXX>

**Primary Care Provider (PCP) Name:** <PCP Name>

**PCP Phone:** <1-XXX-XXX-XXXX>

**MEMBER CANNOT BE CHARGED Copays: \$0** H9712\_MI-MMP-M-2409950

**IN AN EMERGENCY, CALL 9-1-1 OR GO TO THE NEAREST EMERGENCY ROOM (ER) OR OTHER APPROPRIATE SETTING.** If you are not sure if you need to go to the ER, call your PCP or the 24-Hour Nurse Advice line.

**Member Services:** 1-833-230-2057 (TTY: 1-833-711-4711 or 711)

**<Dental (Delta):** 1-800-838-8957>

**<Hearing & OTC (NationsBenefits):** 1-877-269-9234>

**<Vision (Superior Vision):** 1-888-575-0203>

**Care Management:** <1-833-230-2057>

**Pharmacy Help Desk:** <1-800-922-1557>

**Claims Inquiry:** <1-833-230-2159>

**Provider Questions:** <1-833-230-2159>

**PIHP General Information Line:**  
<Macomb: 1-855-996-2264 | Wayne: 1-800-241-4949>

**24/7 Behavioral Health Crisis Line:**  
<Macomb: 1-855-927-4747 | Wayne: 1-800-241-4949>

**24-Hour Nurse Advice:**  
1-866-206-7861

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**Send Medical claims to:**  
<HAP CareSource  
ATTN: Claims  
P.O. Box 1186  
Dayton, OH 45401-1186>

**Send Pharmacy claims to:**  
Express Scripts  
ATTN: Medicare Part D  
P.O. Box 14718  
Lexington, KY 40512-4718

**Website:** HAPCareSource.com

## Electronic Data Interchange (EDI) Information

HAP CareSource Medicaid DOS Oct. 1, 2023 and forward

HAP CareSource MI Health Link DOS Jan. 1, 2024 and forward

Avility will serve as the exclusive EDI gateway service for HAP CareSource and HAP CareSource MI Health Link members. Please use the Payer ID – MIMCDCS1 for Medicaid or MIMCRCS1 for MI Health Link – for the following HIPAA transactions:

- 270/271 Eligibility and Benefits
- 837 I, P Claim Submission
- 276/277 Claim Status

## Member Eligibility and Benefits

### Verifying Eligibility and Benefits

<p>Medicaid DOS prior to Oct. 1, 2023</p> <p>MI Health Link DOS prior to Jan. 1, 2024</p>	<p>HAP CareSource Medicaid DOS Oct. 1, 2023 and forward</p>	<p>HAP CareSource MI Health Link DOS Jan. 1, 2024 and forward</p>
<p>You can verify eligibility and benefits by one of these methods:</p> <ul style="list-style-type: none"> <li>• Log in at <b>hap.org</b> and select <i>Member Eligibility</i></li> <li>• Call: Provider Inquiry at <b>1-866-766-4661</b></li> <li>• Visit CHAMPS web portal: <b>milogintp.michigan.gov</b></li> <li>• Call CHAMPS provider support at <b>1-800-292-2550</b>; choose option 5, then 2</li> </ul>	<p>You can verify eligibility and benefits by one of these methods:</p>	
	<ul style="list-style-type: none"> <li>• Log in to the Provider Portal at <b>CareSource.com/mi/providers/provider-portal/medicaid</b> with your HAP username and password; select <i>Member Eligibility</i> under <i>Member Search</i> on the left navigation menu</li> </ul>	<ul style="list-style-type: none"> <li>• Log in to the Provider Portal at <b>CareSource.com/mi/providers/provider-portal/mihealthlink</b> with your HAP username and password; select <i>Member Eligibility</i> under <i>Member Search</i> on the left navigation menu</li> </ul>
	<ul style="list-style-type: none"> <li>• Call: Provider Services at <b>1-833-230-2102</b></li> </ul>	<ul style="list-style-type: none"> <li>• Call: Provider Services at <b>1-833-230-2159</b></li> </ul>
<ul style="list-style-type: none"> <li>• Visit CHAMPS web portal: <b>milogintp.michigan.gov</b></li> <li>• Call CHAMPS provider support at <b>1-800-292-2550</b>; choose option 5, then 2</li> </ul>		

## Eligibility List (for PCPs only)

<p>Medicaid DOS prior to Oct. 1, 2023</p> <p>MI Health Link DOS prior to Jan. 1, 2024</p>	<p>HAP CareSource Medicaid DOS Oct. 1, 2023 and forward</p>	<p>HAP CareSource MI Health Link DOS Jan. 1, 2024 and forward</p>
<p>Log in at <b>hap.org</b>; select <i>Member Eligibility</i>; Click to view <i>Member Roster</i> (under <i>Date of Service</i> field)</p>	<p>Log in to the Provider Portal at <b>CareSource.com/mi/providers/provider-portal/medicaid</b> with your HAP username and password; select <i>Provider Membership List</i> under <i>Member Reports</i></p>	<p>Log in to the Provider Portal at <b>CareSource.com/mi/providers/provider-portal/mihealthlink</b> with your HAP username and password; select <i>Provider Membership List</i> under <i>Member Reports</i></p>





## Prior Authorizations and Referrals

### Authorization Requirements

Medicaid DOS prior to Oct. 1, 2023  MI Health Link DOS prior to Jan. 1, 2024	HAP CareSource Medicaid DOS Oct. 1, 2023 and forward	HAP CareSource MI Health Link DOS Jan. 1, 2024 and forward
Log in at <b>hap.org</b> ; select <i>Procedure Reference Lists</i> under <i>Quick Links</i>	Visit <b>procedurelookup.CareSource.com</b> <ul style="list-style-type: none"> <li>• No login required</li> </ul> Use dropdown and select Michigan and appropriate line of business	

## Submitting Prior Authorization Requests and Checking Status

<b>Medicaid DOS prior to Oct. 1, 2023</b>  <b>MI Health Link DOS prior to Jan. 1, 2024</b>	<b>HAP CareSource Medicaid DOS Oct. 1, 2023 and forward</b>	<b>HAP CareSource MI Health Link DOS Jan. 1, 2024 and forward</b>
<p>For services and procedures that require prior authorization, submit requests by one of these methods:</p> <ul style="list-style-type: none"> <li>• Log in at <b>hap.org</b> and select <i>Authorizations</i></li> <li>• Phone: Call the HAP Referral Management team at <b>1-313-664-8950</b></li> <li>• Fax: <b>313-664-5916</b></li> </ul> <p>To check the status of a prior authorization request, log in at <b>hap.org</b>; select <i>Authorizations</i></p>	<p>For services and procedures that require prior authorization, submit requests by one of these methods:</p>	
	<ul style="list-style-type: none"> <li>• Preferred method. Log in at HAP CareSource Provider Portal <b>CareSource.com/mi/providers/provider-portal/medicaid</b> with your HAP username and password; select <i>Prior Authorizations</i></li> </ul>	<ul style="list-style-type: none"> <li>• Preferred method. Log in at HAP CareSource Provider <b>CareSource.com/mi/providers/provider-portal/mihealthlink</b> with your HAP username and password; select <i>Prior Authorizations</i></li> </ul>
	<ul style="list-style-type: none"> <li>• Fax: toll free <b>844-432-8931</b>/ local <b>937-396-3539</b></li> </ul>	<ul style="list-style-type: none"> <li>• Fax: <b>844-633-0399</b></li> </ul>
	<ul style="list-style-type: none"> <li>• Mail: CareSource P.O. Box 1307 Dayton, OH 45401-1307</li> </ul>	
	<ul style="list-style-type: none"> <li>• Phone: Call Provider Services at <b>1-833-230-2102</b></li> </ul>	<ul style="list-style-type: none"> <li>• Phone: Call Provider Services at <b>1-833-230-2159</b></li> </ul>
	<p>To check the status of a prior authorization request, log in to HAP CareSource Provider Portal at:</p>	
	<p><b>CareSource.com/mi/providers/provider-portal/medicaid</b> and select <i>Status</i></p>	<p><b>CareSource.com/mi/providers/provider-portal/mihealthlink</b> and select <i>Status</i></p>

## Historical Authorizations

<b>Medicaid DOS prior to Oct. 1, 2023</b>  <b>MI Health Link DOS prior to Jan. 1, 2024</b>
<ul style="list-style-type: none"> <li>• Log in at <b>hap.org</b> select <i>Authorizations</i>.</li> <li>• Phone: Call the HAP Referral Management team at <b>1-313-664-8950</b></li> </ul>





## Claims

### Electronic Funds Transfer (EFT)

Medicaid DOS prior to Oct. 1, 2023 MI Health Link DOS prior to Jan. 1, 2024	HAP CareSource Medicaid DOS Oct. 1, 2023 and forward	HAP CareSource MI Health Link DOS Jan. 1, 2024 and forward
<p>If you're currently set up for EFT with HAP, there is nothing you need to do.</p>	<p>If you <b>are NOT</b> set up for EFT with HAP, please review the information below.</p> <p>HAP CareSource and HAP CareSource MI Health Link partner with ECHO Health, Inc. to deliver provider payments. ECHO offers three payment options:</p> <ul style="list-style-type: none"> <li>• Electronic Fund transfer (EFT) - preferred</li> <li>• Virtual Card Payment (QuicRemit) - Standard bank and card issuer fees apply*</li> <li>• Paper checks</li> </ul> <p><i>*Payment processing fees are what you pay your bank and credit card processor for use of payment via credit card.</i></p> <p><u>Enrollment Instructions:</u></p> <p><b>Enroll</b> with ECHO for payment and choose EFT as your payment preference for HAP CareSource or HAP CareSource MI Health Link.</p>	
<p><b>** Notice of Change:</b> Email notifications are not sent when a deposit/payment is made. Deposits/payments are made weekly.</p>		

## Submitting Claims

<b>Medicaid DOS prior to Oct. 1, 2023</b> <b>MI Health Link DOS prior to Jan. 1, 2024</b>	<b>HAP CareSource Medicaid DOS Oct. 1, 2023 and forward</b>	<b>HAP CareSource MI Health Link DOS Jan. 1, 2024 and forward</b>
<p><b>Electronic</b></p> <p>Use Change Healthcare clearinghouse HAP Payer ID: 38224</p> <p><b>Paper</b></p> <p>Send to: HAP Empowered Claims P.O. Box 2578 Detroit, MI 48202</p>	<p><b>Electronic</b></p> <p>Use Availity clearinghouse or the HAP CareSource Provider Portal at <b>CareSource.com/mi/providers/provider-portal/medicaid</b> HAP Payer ID: MIMCDCS1</p> <p><b>Paper</b></p> <p>Send to: HAP CareSource P.O. Box 1186 Dayton, OH 45401</p>	<p><b>Electronic</b></p> <p>Use Availity clearinghouse or the HAP CareSource Provider Portal at <b>CareSource.com/mi/providers/provider-portal/mihealthlink</b> HAP Payer ID: MIMCRCS1</p>

## Claims Status

<b>Medicaid DOS prior to Oct. 1, 2023</b> <b>MI Health Link DOS prior to Jan. 1, 2024</b>	<b>HAP CareSource Medicaid DOS Oct. 1, 2023 and forward</b>	<b>HAP CareSource MI Health Link DOS Jan. 1, 2024 and forward</b>
<ul style="list-style-type: none"> <li>Log in at <b>hap.org</b>; select <i>Claims</i></li> <li>Call <b>1-866-766-4661</b></li> </ul>	<ul style="list-style-type: none"> <li>Log in to the Provider Portal at <b>CareSource.com/mi/providers/provider-portal/medicaid</b> with your HAP username and password; select <i>Claims, then Claims information and attachment</i></li> <li>Call <b>1-833-230-2102</b></li> </ul>	<ul style="list-style-type: none"> <li>Log in to the Provider Portal at <b>CareSource.com/mi/providers/provider-portal/mihealthlink</b> with your HAP username and password; select <i>Claims, then Claims information and attachment</i></li> <li>Call <b>1-833-230-2159</b></li> </ul>

**\*\*Notice:** HAP will reject/deny Medicaid claims with Date of Service (DOS) Oct. 1, 2023 and after, and MI Health Link claims with DOS Jan. 1, 2024 and after, with denial reason 1067. Please redirect these claims to HAP CareSource.

## Claims Appeals

Medicaid DOS prior to Oct. 1, 2023 MI Health Link DOS prior to Jan. 1, 2024	HAP CareSource Medicaid DOS Oct. 1, 2023 and forward	HAP CareSource MI Health Link DOS Jan. 1, 2024 and forward
Refer to the HAP Empowered Provider Manual at: <a href="http://hap.org/empoweredproviders">hap.org/empoweredproviders</a>	Providers can submit appeals via mail, fax or the HAP CareSource Provider Portal. The Provider Portal is preferred.	
	Provider Portal: Log in at <a href="http://CareSource.com/mi/providers/provider-portal/medicaid">CareSource.com/mi/providers/provider-portal/medicaid</a> with your HAP username and password; <i>select Claims</i> , then <i>Appeals</i>	Provider Portal: Log in at <a href="http://CareSource.com/mi/providers/provider-portal/mihealthlink">CareSource.com/mi/providers/provider-portal/mihealthlink</a> with your HAP username and password; <i>select Claims</i> , then <i>Appeals</i>
	Additional guidance can be found in the HAP CareSource and HAP CareSource MI Health Link Provider Manual located at <a href="http://CareSource.com/mi/providers/tools-resources/provider-manual">CareSource.com/mi/providers/tools-resources/provider-manual</a>	

## Companion Guides

Medicaid DOS prior to Oct. 1, 2023 MI Health Link DOS prior to Jan. 1, 2024	HAP CareSource Medicaid DOS Oct. 1, 2023 and forward	HAP CareSource MI Health Link DOS Jan. 1, 2024 and forward
Log in at <a href="http://hap.org">hap.org</a> with your HAP username and password, <i>select Claims; Related Links and Companion Guides</i> .	Visit Michigan Department of Health and Human Services (MDHHS) at <a href="http://www.michigan.gov/mdhhs/doing-business/providers/hipaa/hipaa-companion-guides">www.michigan.gov/mdhhs/doing-business/providers/hipaa/hipaa-companion-guides</a>	





## Remittance Advice

### Obtaining a Remittance Advice

<b>Medicaid DOS prior to Oct. 1, 2023</b> <b>MI Health Link DOS prior to Jan. 1, 2024</b>	<b>HAP CareSource Medicaid DOS Oct. 1, 2023 and forward</b>	<b>HAP CareSource MI Health Link DOS Jan. 1, 2024 and forward</b>
Log in at <b>hap.org</b> with your HAP username and password; select <i>Remittance Advice</i> .	Log in to the Provider Portal at <b>CareSource.com/mi/providers/provider-portal/medicaid</b> with your HAP username and password; select <i>Claims, Claim Information and Attachment, Claim Summary, Explanation of Payment (EOP)</i>	Log in to the Provider Portal at <b>CareSource.com/mi/providers/provider-portal/mihealthlink</b> with your HAP username and password; select <i>Claims, Claim Information and Attachment, Claim Summary, Explanation of Payment (EOP)</i>

### Obtaining an 835 File

<b>Medicaid DOS prior to Oct. 1, 2023</b> <b>MI Health Link DOS prior to Jan. 1, 2024</b>	<b>HAP CareSource Medicaid DOS Oct. 1, 2023 and forward</b>	<b>HAP CareSource MI Health Link DOS Jan. 1, 2024 and forward</b>
Log in at <b>hap.org</b> with your HAP username and password; select <i>Remittance Advice</i> .	Log in with ECHO at <b>www.providerpayments.com</b>	



## Pharmacy

### Submitting Pharmacy Claims

(billed by pharmacies through Express Scripts, the Pharmacy Benefit Manager)

Medicaid DOS prior to Oct. 1, 2023 MI Health Link DOS prior to Jan. 1, 2024	HAP CareSource Medicaid DOS Oct. 1, 2023 and forward	HAP CareSource MI Health Link DOS Jan. 1, 2024 and forward
<p><b>Medicaid</b>            RxBIN: 003858            RxPCN: MA            RxGRP: HAPMCD</p> <p><b>MI Health Link</b>            RxBIN: 610014            RxPCH: MEDDPRIME            RxGRP: HAPMMP</p>	<p>RxBIN: 003858 (same)            RxPCN: MA (same)            RxGRP: <b>CSHAPMI</b></p>	<p>RxBIN: 610014 (same)            RxPCN: MEDDPRIME (same)            RxGRP: <b>CSMIMMP</b></p>

## Formulary

Medicaid DOS prior to Oct. 1, 2023 MI Health Link DOS prior to Jan. 1, 2024	HAP CareSource Medicaid DOS Oct. 1, 2023 and forward	HAP CareSource MI Health Link DOS Jan. 1, 2024 and forward
<p>Michigan Medicaid Health Plans follow the Common Drug Formulary/Single Preferred Drug List.</p> <p><a href="http://www.hap.org/medicaidformulary">www.hap.org/medicaidformulary</a></p> <p>The MI Health Link Formulary is managed by the Health Alliance Plan of Michigan. Standard formulary notifications apply.</p> <p><a href="http://www.hap.org/hap-empowered/mi-health-link/prescription/covered-drugs">www.hap.org/hap-empowered/mi-health-link/prescription/covered-drugs</a></p>	<p>All Medicaid health plans in Michigan administer the Michigan Medicaid Health Plan Common Drug Formulary. There should be minimal formulary impact for members who are integrating into HAP CareSource, as the drug formularies are essentially the same.</p>	<p>Check HAP CareSource MI Health Link's up-to-date Formulary (Drug List) online at <a href="http://CareSource.com/mi/providers/tools-resources/drug-formulary/mihealthlink">CareSource.com/mi/providers/tools-resources/drug-formulary/mihealthlink</a>. Changes may occur throughout 2024. Standard formulary notifications apply.</p>

## Pharmacy Benefit Prior Authorization Request

ESI Pharmacy Help Desk: 1-800-922-1557

<b>Medicaid DOS prior to Oct. 1, 2023</b> <b>MI Health Link DOS prior to Jan. 1, 2024</b>	<b>HAP CareSource Medicaid DOS Oct. 1, 2023 and forward</b>	<b>HAP CareSource MI Health Link DOS Jan. 1, 2024 and forward</b>
<b>Medicaid</b> <ul style="list-style-type: none"> <li>• Call: <b>1-833-230-2102</b>, option for Pharmacy</li> <li>• Fax: <b>866-930-0019</b></li> </ul> <b>MI Health Link</b> <ul style="list-style-type: none"> <li>• Call: <b>1-313-664-8940</b>, option 1</li> <li>• Fax: <b>313-664-8045</b></li> </ul>	<ul style="list-style-type: none"> <li>• Fax: <b>866-930-0019</b></li> <li>• Call: <b>1-833-230-2102</b>, option for Pharmacy</li> <li>• <b>secureforms.CareSource.com/en/pharmacyexception</b></li> </ul>	<ul style="list-style-type: none"> <li>• Fax: <b>877-251-5896</b></li> <li>• Call: <b>1-800-935-6103</b> (Express Scripts Coverage Review Department)</li> <li>• <b>www.express-scripts.com/corporate/medicare-coverage-review-information</b></li> </ul>

## Pharmacy Medical Benefit Prior Authorization Request (Medical Drugs)

<b>Medicaid DOS prior to Oct. 1, 2023</b> <b>MI Health Link DOS prior to Jan. 1, 2024</b>	<b>HAP CareSource Medicaid DOS Oct. 1, 2023 and forward</b>	<b>HAP CareSource MI Health Link DOS Jan. 1, 2024 and forward</b>
Fax: <b>313-664-5460</b>	Fax: <b>888-399-0271</b>	Fax: <b>844-633-0399</b>

## Pharmacy Network

There is no change to the Medicaid or MI Health Link pharmacy network. Members can continue to use the same pharmacy to fill their medications. Members can fill prescriptions for covered medications at any pharmacy in the network, including but not limited to, Henry Ford Pharmacy Advantage.

## Find a Doctor

<b>Medicaid DOS prior to Oct. 1, 2023</b> <b>MI Health Link DOS prior to Jan. 1, 2024</b>	<b>HAP CareSource Medicaid DOS Oct. 1, 2023 and forward</b>	<b>HAP CareSource MI Health Link DOS Jan. 1, 2024 and forward</b>
Visit: <b>hap.org</b> ; select <i>Find a doctor</i>	Visit: <b>findadoctor.CareSource.com</b>	

## Vendor Relationships

<p>Medicaid DOS prior to Oct. 1, 2023</p> <p>MI Health Link DOS prior to Jan. 1, 2024</p>	<p>HAP CareSource Medicaid DOS Oct. 1, 2023 and forward</p>	<p>HAP CareSource MI Health Link DOS Jan. 1, 2024 and forward</p>
<p><b>Dental:</b></p> <p><b>Medicaid</b></p> <ul style="list-style-type: none"> <li>Delta Dental of MI</li> <li><a href="http://deltadentalmi.com/findadentist">deltadentalmi.com/findadentist</a></li> <li>1-866-558-0280 (TTY: 711)</li> </ul> <p><b>MI Health Link</b></p> <ul style="list-style-type: none"> <li>Delta Dental of MI</li> <li><a href="http://search.providers4you.com/advantage">search.providers4you.com/advantage</a></li> <li>1-800-838-8957 (TTY: 711)</li> </ul> <p><b>Vision:</b></p> <ul style="list-style-type: none"> <li>Heritage Vision</li> <li>Directory is at <a href="http://hap.org">hap.org</a>; find a doctor</li> <li>1-800-252-2053</li> </ul> <p><b>Hearing:</b></p> <ul style="list-style-type: none"> <li>NationsHearing</li> <li>Directory is at <a href="http://nationshearing.com/hapempowered">nationshearing.com/hapempowered</a></li> <li>1-800-921-4559</li> </ul> <p><b>NICU/Special Care Nursery &amp; Maternity Management (Medicaid Only):</b></p> <ul style="list-style-type: none"> <li>Progeny Health</li> <li><a href="http://www.progenyhealth.com/who-we-support/providers">www.progenyhealth.com/who-we-support/providers</a></li> <li>1-855-231-4730</li> </ul>	<p><b>Dental:</b></p> <ul style="list-style-type: none"> <li>Delta Dental of MI</li> <li><a href="http://deltadentalmi.com/findadentist">deltadentalmi.com/findadentist</a></li> <li>1-866-558-0280 (TTY: 711)</li> </ul> <p><b>Vision:</b></p> <ul style="list-style-type: none"> <li>Superior Vision, offered by Versant Health Provider Network</li> <li><a href="http://superiorvision.com">superiorvision.com</a></li> <li>1-877-235-5317</li> <li>Additional info - <b>Contact Resource Guide</b></li> </ul> <p><b>Hearing:</b></p> <ul style="list-style-type: none"> <li>NationsHearing</li> <li><a href="http://www.nationshearing.com/HAPCareSource">www.nationshearing.com/HAPCareSource</a></li> <li>1-800-921-4559</li> </ul> <p><b>Maternity Management:</b> (Internal Resource to HAP CareSource – not a vendor)</p> <ul style="list-style-type: none"> <li>HAP CareSource Mom &amp; Baby Beginnings Team</li> <li>1-833-230-2034</li> </ul>	<p><b>Dental:</b></p> <ul style="list-style-type: none"> <li>Delta Dental of MI</li> <li><a href="http://search.providers4you.com/advantage">search.providers4you.com/advantage</a></li> <li>1-800-838-8957</li> </ul> <p><b>Vision:</b></p> <ul style="list-style-type: none"> <li>Superior Vision, offered by Versant Health Provider Network</li> <li><a href="http://superiorvision.com">superiorvision.com</a></li> <li>1-877-235-5317</li> <li>Additional info - <b>Contact Resource Guide</b></li> </ul> <p><b>Hearing:</b></p> <ul style="list-style-type: none"> <li>NationsHearing</li> <li><a href="http://www.nationshearing.com/HAPCareSource">www.nationshearing.com/HAPCareSource</a></li> <li>1-800-921-4559</li> </ul>

