

PROVIDER NEWSLETTER

Serving our CCP Provider Community— Winter Edition 2020

Announcements & Reminders

- **COVID-19:** If your office is closed due to COVID-19, please notify your assigned provider operations representative or you may contact the Provider Operations Hotline at 855-819-9506.
- **MMA Prior authorizations waived** for medically necessary physician and hospital services, home health services, and DMEs. CCP is also waiving prior authorization requirements for all services (except pharmacy services) necessary to appropriately evaluate and treat CCP MMA enrollees diagnosed with COVID-19.
- **Telemedicine/telehealth services** that use interactive telecommunication equipment such as, at a minimum, audio and video equipment that permit two-way, real time, interactive communication between the patient and practitioner. CCP will reimburse and claims must include modifier GT and POS 2 on the CMS-1500 claim form.
- **PlanLink Provider Portal:** PlanLink provides real-time web access to see claims, referrals, coverages, and benefits. To set up your PlanLink account, please contact Provider Operations.
- **Provider Absence:** In-Network providers are required to provide alternative coverage for our members by a participating CCP provider.
- Authorization Requests: CCP is no longer accepting authorization requests via fax. Providers must request authorizations via EPIC/PlanLink only.
- **Provider Webinars:** We are currently hosting Provider webinars on various topics. If you would like to receive invitations to participate in upcoming webinars, please speak to your Provider Operations Representative or contact the Provider Operations Hotline. You may also access our previous webinars via our CCP website: www.ccpcares.org Simply select "For Providers" from the top menu and then select "Provider Academy".

Practice Changes

To maintain our Provider Directory and continuity of care for our members, it is essential that you notify Provider Operations of certain changes prior to the effective date of the change for these items:

- Name/Practice Name Address Phone # Tax ID #
- Medicaid # Change Effective Date
- Provider Leaving/Joining Group Practice
- Addition/Deletion of Hospital Privileges

Effective January 1, 2020, New Partners in Care:

CCSI	Home Health,	Phone: 833.204.4535
	Home Infusion,	Authorization Fax: 855.481.0606
	Durable Medical Equipment	Website: www.ccsi.care
HN1	Outpatient Occupational,	Phone: 866-899-4828
	Speech, and	Authorization Fax: 855.410.0121
	Physical Therapy	Website: www.ataflorida.com

Provider Operations Hotline: (855) 819-9506

Member Services Hotline: (866) 899-4828

Website: www.ccpcares.org



Submit all claims electronically to EDI Clearinghouse Availity CCP Medicaid payer ID = **59065** CCP FHK Payer ID = **FHKC1** CCP payer ID for all others = **59064**

Proudly representing our owners:





Important Topics



How to Become a Participating Florida Healthy Kids Provider

If you are interested in becoming a participating provider with Community Care Plan for the Florida Healthy Kids program, please contact our Provider Operations Hotline at (855) 819-9506.

Quality Provider Tips:

- When providing a new ADD/ADHD medication for a patient, schedule the initial follow-up appointment before the patient leaves the office.
- Schedule the follow-up for 2—3 weeks after starting the medication.
- No refills unless the child has the initial follow-up visit.
- After the initial follow-up visit, schedule at least two more visits over the next nine months to check the child's progress.
- Remind patients/parents of their upcoming appointments.
- If a member cancels, reschedule the visit right away.
- Consider extending your office hours into the evening, early morning, or weekend to accommodate working parents.
- Most Electronic Health Records (EHRs) are able to create alerts and flags for required HEDIS[®] services. Be sure to have all of these prompts turned or check with your software vendor to these alerts enabled.
- Encourage parents/caregivers to ask questions about their child's ADHD.
- Code Diagnosis, Procedure Code, and Place of Service correctly. Most measures can be collected through claims when complete and accurate coding is used!
- Submit claims promptly showing members had follow-up visits.
- Discontinue these controlled substances if patients do not keep at least two visits per year to evaluate a child's progress, and to monitor the child growth to make sure they are on the correct dosage.

