

Important Provider Notice

Date: 04/04/2025
To: All Participating CCP Providers
Subject: Identifying Member ID Cards and Current Contracted Lines of Business

Dear Valued Provider,

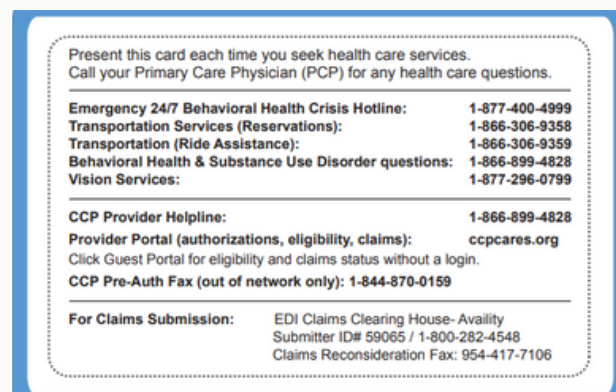
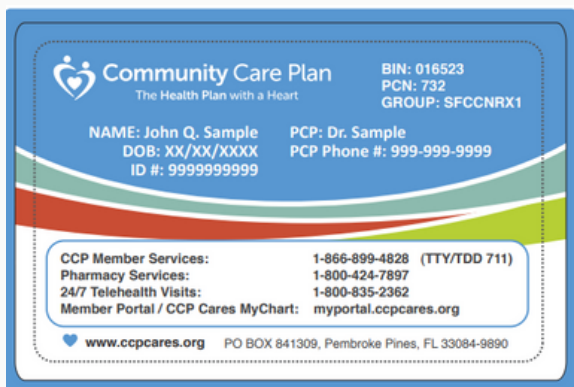
At Community Care Plan (CCP), we are committed to ensuring that our members receive seamless access to healthcare services. To enhance this experience, we would like to provide clarification regarding all lines of business.

Important Reminder

Your practice is contracted to accept patients from all of the listed CCP lines of business. To avoid confusion:

- **Ensure** all front desk and billing staff are aware of the CCP lines of business accepted at your practice.
- **Review and display the enclosed ID** card samples so staff can easily identify CCP plans.
- **Contact** Provider Operations for assistance if there is any uncertainty in verifying contract status. You can reach us via email at CCP.Provider@ccpcares.org
- **Member eligibility** can be verified via the [PlanLink Provider Portal](#) or the IVR phone system.
- Electronic member ID card can be viewed at any time in the [PlanLink Provider Portal](#)

CCP MMA/SMI: Medicaid plan covering AHCA Regions E,F,G, H and I as an MMA Plan effective February 1, 2025.





Community Care Plan

The Health Plan with a Heart

CCP FHK: This is our Florida Healthy Kids plan which covers members 5-18 years. Includes the following counties: Indian River, Okeechobee, St. Lucie, Martin, Palm Beach, Broward, Monroe, and Dade Counties.

Community Care Plan
The Health Plan with a Heart

Florida KidCare

NAME: John Q. Sample EFFECTIVE DATE: XX/XX/XXXX
ID #: 999999999999 DOB: XX/XX/XXXX
PCP: Dr. Sample PCP Phone #: 999-999-9999
Copays PCP: \$0 Spec: \$5 ER: \$10 UC: \$10
RxBIN: 016523 RxGRP: CCPFHK1 RxPCN: 22796

Community Care Plan - Florida Healthy Kids
Member Services: 1-866-930-0944 (TDD/TTY 1-855-855-5303)
Rx Member Services: 1-800-424-7906
Teladoc 24/7 Telehealth Visits: 1-800-835-2362
Member Portal / MyChart: <http://myportal.ccpcares.org>

Present this card each time you seek healthcare services.
Call your Primary Care Physician (PCP) for any health care questions.

Emergency 24/7 Behavioral Health Crisis Hotline: 1-877-400-4999
Transportation Services (Reservations & Ride Assistance): 1-866-430-0570
Behavioral Health & Substance Use Disorder questions: 1-866-930-0944
Vision Services: 1-877-296-1299
CCP Provider Hotline: 1-855-819-9506

Provider Portal for eligibility, auth, and claims: PlanLink:
<http://planlink.ccpcares.org>
CCP FHK Pre-Auth Fax (out of network only): 1-866-930-0969

For Claims Submission: EDI Claims Clearing House - Availity
Submitter ID# FHKC1 / 1-800-282-4548
CCP-FHK Paper Claims to:
PO Box 841209
Pembroke Pines, FL 33084

CCP Employee: Commercial plan for CCP Employees and dependents.

Front

Back

Member

Community Care Employee HSA Extended

Community Care Employee HSA Extended

Group ID: SMPL0001
Member ID: JANE0001
Liviniti Issuer: (80840) 9151014609
Members:
00 JOHN SAMLE
JANE SAMPLE
JIMMY SAMPLE

Pharmacy Benefit Provider

LIVINITI

Prescription Drug Benefits Administered by Liviniti
Live Pharmacy Help Desk: 1-833-682-4251
www.liviniti.com

RXBIN: 015433
RXPCN: SSN
RXGRP:

Copays

Primary Care and Specialty Office Visit:
In Network: 20% after deductible
Out of Network: 50% after deductible
In Network Deductible: Individual \$3,300 / Family \$6,600
Out of Network Deductible: Individual \$6,400 / Family \$12,800
In Network Max OOP: Individual \$8,050 / Family \$16,100
Out of Network Max OOP: Individual \$16,100 / Family \$32,200
Preventive Care Visits: No Charge
Teladoc (Telehealth): No Charge

Medical Claims Submission

SUBMIT MEDICAL CLAIMS TO:
Availity EDI Payor ID 59064 CCP
Employee Plan PO Box 849029
Pembroke Pines, FL 33084

Members

Access to MyChart at:
<https://mychart.mhs.net/MyChartCCP>
Emergency Services: All emergency services care must be reported to Primary Care Physician and Community Care Plan within 24 hours.

Providers

Provider portal for Authorizations, Eligibility, Claims: <http://planlink.ccpcares.org/>
Click Guest Portal for Eligibility and Claim Status without a log in To contact Customer Experience: 954.622.3499

Utilization

The plan requires prior authorization of all hospitalizations, select surgical procedures and select diagnostic studies.

Member

Community Care Employee HSA Narrow

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In Network Deductible: Individual \$3,650 / Family \$3,300
Out of Network Deductible: Individual \$3,000 / Family \$6,000
In Network Max OOP: Individual \$6,000 / Family \$12,000
Out of Network Max OOP: Individual \$7,500 / Family \$15,000
Preventive Care Visits: No Charge
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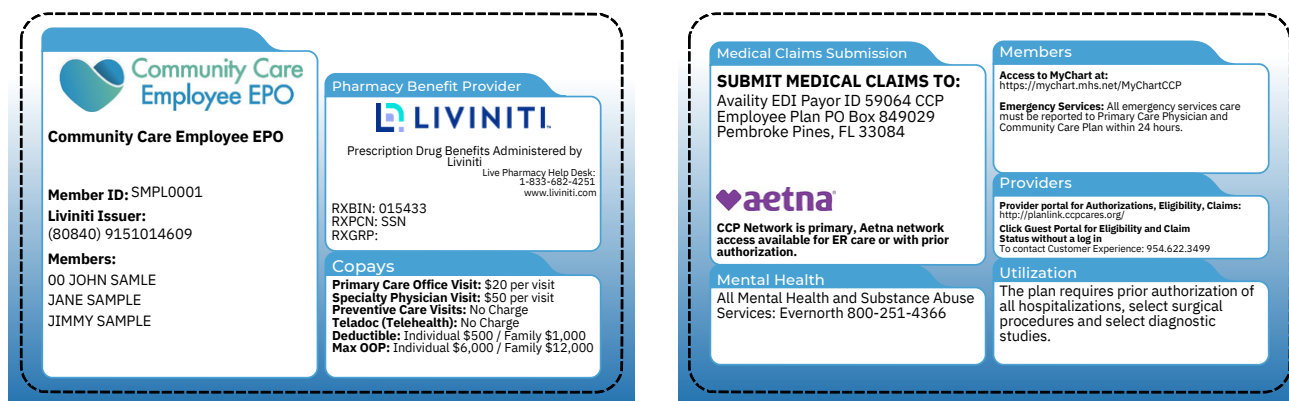
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Each ID card has clear distinctions; please refer to the enclosed samples for details. The back of the card contains additional plan-specific information.

If you have any questions, please contact your assigned Provider Operations Representative, call our Provider Operations Hotline at **1 (855) 819-9506**, or email us at CCP.PROVIDER@ccpcare.org.

Thank you for your continued partnership and dedication to quality care. We appreciate your cooperation in ensuring members receive the best care experience.

Sincerely,

The Community Care Plan Team