

# Provider Notice

**To:** All CCP Providers  
**Subject:** Identifying Member ID Cards and Current Contracted Lines of Business  
**Notice Date:** January, 2026

Dear Provider,

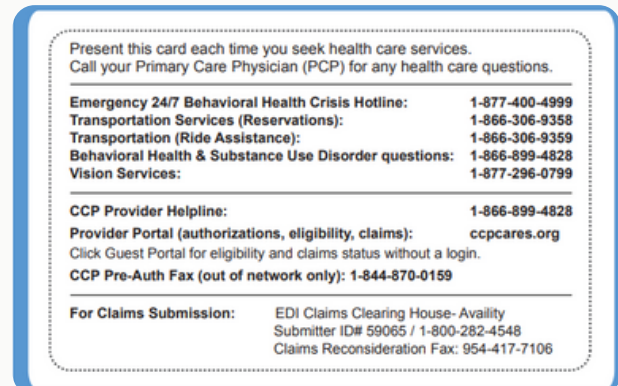
At Community Care Plan (CCP), we are committed to ensuring that our members receive seamless access to healthcare services. To enhance this experience, we would like to clarify some information that applies to all of our lines of business.

## Important Reminder

Your practice is contracted to accept patients from our lines of business included in this memo. To avoid confusion:

- **Ensure** all front desk and billing staff are aware that all of our lines of business are accepted at your practice
- **Review and display the enclosed member ID** card samples so your staff can easily identify our 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](mailto: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.



**CCP FHK:** Florida Healthy Kids plan covering children 5 - 18 years in the following counties: Indian River, Okeechobee, St. Lucie, Martin, Palm Beach, Broward, Monroe, and Miami-Dade.




NAME: John Q. Sample      EFFECTIVE DATE: XX/XX/XXXX  
 ID #: 9999999999      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 1-855-655-5303)  
 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.**

<b>Emergency 24/7 Behavioral Health Crisis Hotline:</b>	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.

**Community Care Employee HSA Narrow**



**Group ID:**  
 Member ID: SMPLO001  
**Liviniti Issuer:**  
 (80840) 9151014609

**Members:**  
 00 JOHN SAMLE  
 JANE SAMPLE  
 JIMMY SAMPLE


**Pharmacy Benefit Provider**  
 Prescription Drug Benefits Administered by Liviniti  
 Live Pharmacy Help Desk: 1-833-682-4251  
[www.liviniti.com](http://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 \$1,650 / 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  
 Teladoc (Telehealth): No Charge

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



  
**CCP Network is primary, Aetna network access available for ER care or with prior authorization.**

**Mental Health**  
**All Mental Health and Substance Abuse Services:**  
 Evernorth 800-251-4366

**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.

**Community Care Employee EPO**



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**Members:**  
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RXBIN: 015433  
 RXPCN: SSN  
 RXGRP:

**Copays**  
**Primary Care Office Visit:** \$20 per visit  
**Specialty Physician Visit:** \$50 per visit  
**Preventive Care Visits:** No Charge  
**Teladoc (Telehealth):** No Charge  
**Deductible:** Individual \$500 / Family \$1,000  
**Max OOP:** Individual \$6,000 / Family \$12,000

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**22 Health:** ACA Marketplace plan for individuals and families in Broward County.



Each ID card has clear distinctions, and the back of the card has additional plan-specific information. Please refer to the enclosed samples for details.

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@ccpcares.org](mailto:CCP.Provider@ccpcares.org).

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