Community Care Plan

The Health Plan with a Heart

Provider Responsibilities and AHCA Contract Requirements

Training **Topics**

1. Overview
2. Responsibilities of Providers and Practitioners Participating in Community Care Plan (CCP)
3. Primary Care Physicians (PCPs) in the CCP Network Responsibilities
4. Provider Access and Availability
5. Access Guidelines

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Overview

Providers participating in Community Care Plan (CCP) shall deliver medical care to CCP enrollees in compliance with applicable laws and regulations, including the Florida Medicaid Program, Medicaid Coverage and Limitation Handbook, and the CCP Provider Manual. They are responsible for managing healthcare services for members according to medical necessity criteria.

Responsibilities of Providers and Practitioners Participating in Community Care Plan (CCP)

- **Notifying CCP in Writing of Any Changes:** Within 10 business days (per contract) unless otherwise specified. This includes updates related to practice ownership, name, address, contact information, NPI, tax ID, physician additions/departures, license issues, bankruptcy, legal sanctions, or closing/limiting patient intake.
- **No Billing or Balance Billing:** Providers must not bill Medicaid members for covered services or missed appointments, regardless of CCP reimbursement.
- **24/7 Coverage:** Providers must ensure access to medical services around the clock, including having a call service for clinical decisions.

Responsibilities of Providers and Practitioners Participating in Community Care Plan (CCP)

- **Advance Directives:** Providers must inform members about their right to an advance directive and document discussions.
- **Medical Records Maintenance:** Providers must maintain complete and secure medical records in compliance with regulations.
- **Providing Care:** Care must meet CCP's standards for access, quality, and cultural competence, with translation services arranged when needed.
- **Participating in Quality Improvement:** Providers are required to engage in CCP's quality improvement activities.

Responsibilities of Providers and Practitioners Participating in Community Care Plan (CCP)

- **Non-Discrimination:** Providers must deliver care without discrimination based on demographic or health-related factors.
- **Providing Accurate Information:** Providers must give members complete information on diagnoses, treatments, and costs for non-covered services.
- **Maintaining Confidentiality:** Providers must protect members' health information in line with HIPAA, reporting any violations to CCP.
- **Submitting Claims:** Claims must be accurate, timely, and follow Medicaid guidelines.

Responsibilities of Providers and Practitioners Participating in Community Care Plan (CCP)

- **Participating in Utilization Management:** Providers must follow CCP's referral and prior authorization processes.
- **Continuity of Care Post-Termination:** Providers must continue care for 90 days after ending their CCP affiliation to ensure a smooth transition for members.
- **Reporting Incidents:** Providers must report any critical incidents, including abuse, neglect, exploitation, or major health issues, to CCP and appropriate authorities.
- **Training:** Providers must participate in required training programs mandated by CCP or regulatory bodies.

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Reporting Enrollee Injuries

An enrollee injury must be reported if it

- Is linked to service provision rather than the patient's original condition and is not an expected outcome
- Occurs without the patient's informed consent
- Results from the actions or inactions of provider staff

Types of Reportable Incidents Include

- Enrollee death, brain or spinal damage
- Permanent disfigurement
- Bone fractures or joint dislocations
- Conditions requiring specialized medical attention or surgical intervention
- Conditions requiring transfer to a higher level of care within or outside the facility

Reporting Requirements

- Providers must report within 48 hours, except for HMOs, hospitals, and nursing facilities, which follow licensure-specific reporting requirements
- Complete a **Potential Quality Issue Referral Form (PQI)**

Responsibilities of Providers and Practitioners Participating in Community Care Plan (CCP)

Additional Requirements

- Provider is required to offer hours of operation that are no less than the hours of operation offered to commercial Managed Care Plan enrollees or comparable Medicaid fee-for-service enrollees if Provider serves only Medicaid enrollees. 42 C.F.R. §§ 438.206(c)(1); 457.1230(a).

- Provider is required to immediately notify CCP of an enrollee's pregnancy, via email to ccp.pregnancy.notification@ccpcares.org, and advise whether the pregnancy was identified through medical history, examination, testing, claims, or otherwise.

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Primary Care Physicians (PCPs) in the CCP Network Responsibilities:

- **24/7 Coverage:** Primary Care Providers (PCPs) must ensure 24/7 coverage for services, consultations, or referral approvals, provided by Medicaid-enrolled PCPs.
- **After-hours coverage:** should be accessible via the office's daytime phone number and include an answering service, call forwarding, or provider call coverage. The method must connect the caller to someone who can make a clinical decision or reach the PCP for such a decision.
- **Supervising, Coordinating, and Providing Primary Care:** Deliver comprehensive primary care services, such as annual physicals, well-woman exams, preventive care, and immunizations for assigned members.

Primary Care Physicians (PCPs) in the CCP Network Responsibilities:

- **Arranging for Covered Services:** Coordinate care with other participating physicians to ensure members receive all covered services, maintaining clear communication with treating providers.
- **Adhering to Standards of Practice:** Provide services in accordance with clinical, legal, and ethical standards, based on the PCP's qualifications and recognized medical community practices.
- **Educating Members:** Offer education to members on healthy living and illness prevention.

Primary Care Physicians (PCPs) in the CCP Network Responsibilities:

- **Providing Preventive and Chronic Care Screenings:** Conduct regular screenings for well-care and chronic conditions, referring members to community health resources as required

- **Screening for Substance Use Disorders:** Evaluate members for alcohol or substance use disorders during routine exams, initial contact, prenatal visits, and when emergency room documentation or over-utilization of services indicates a need

- screening to assess each enrollee’s health-related social needs using an Agency-approved screening tool (SDOH)

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Provider Access and Availability

- Standards are set for the number, distribution, and accessibility of providers, considering members' special and cultural needs.
- Provider access is evaluated annually, and appointment wait times for PCPs, specialists, and behavioral health visits are monitored.
- Access issues are addressed quarterly based on complaints and reviews.
- Providers are expected to offer timely care, and primary, specialty, and behavioral health appointment access is monitored annually, with actions taken to improve as needed.

Access Guidelines

Guidelines have been established to ensure timely access to care, in line with state and federal regulations:

Urgent Medical/Behavioral Health Care:

- Without pre-authorization: within 48 hours
- With pre-authorization: within 96 hours

Non-Urgent Care:

- Post-discharge from inpatient behavioral health: within (7 calendar days)
- Initial outpatient behavioral health: within (14 calendar days)
- Ancillary services: within (14 calendar days)
- Primary care appointment: within (30 calendar days)
- Specialist appointment: within (60 calendar days)

Thank You

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