Reminders

- **PlanLink Provider Portal**: EPIC Care Link 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**: Effective January 1st, 2019, 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.ccppcares.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

Do you know who your CCP MMA Provider Operations Representative is?

To schedule an appointment with your representative, please contact the Provider Hotline at (855) 819-9506.

Provider Operations Hotline: (855) 819-9506

Member Services Hotline: (866) 899-4828

Website: www.ccppcares.org

Submit all claims electronically to EDI Clearinghouse Availity
CCP Medicaid payer ID = 50965
CCP payer ID for all others = 59064

Proudly representing our owners:
The 2019 Community Care Plan Provider Survey was conducted by a third-party consulting group between March 11, 2019 and May 10, 2019. Surveys were completed through Internet and telephone interviews by 114 office administrators from a list of 146 eligible administrators.

- Regarding the likelihood of recommending Community Care Plan to other provider practices, in 2019, 58.9% of administrators were ‘very likely’ to recommend.
- 96.6% of respondents’ perceptions of CCP is ‘much better’ in comparison to all their other contracted health plans.
- Respondents showed overall perception of CCP’s call center in 2019 with a ‘very satisfied’ rating of 97.9%.
- 53.1% of respondents were ‘very satisfied’ with CCP’s utilization and quality management with almost a 15% increase from 2018.

Thank you for your participation and feedback. We are always looking for opportunities to improve and strengthen our relationship with you!
Important Topics

Pharmacy

Referring, Ordering, Prescribing, and Attending (ROPA) Provider Enrollment

The Patient Protection and Affordable Care Act (ACA) requires that all providers who refer, order, prescribe, or attend in conjunction with the provision of services to Florida Medicaid recipients be enrolled in the Florida Medicaid program.

The Agency for Health Care Administration (Agency) and its fiscal agent, DXC Technology (DXC), are commencing with the ROPA provider enrollment initiative to meet these requirements.

Apply online to get your Florida Medicaid ID (MAID) number.

Your MAID number can be obtained through the AHCA website at ahca.myflorida.com/Medicaid/index.shtml. Following the enrollment process, approved providers are issued a nine-digit Medicaid provider number and become eligible to participate in the Florida Medicaid program.

Any person or entity that wants to be paid for rendering medical, medical-related, and waiver-related services to Medicaid recipients must complete this form to obtain their MAID prior to providing services.

- Please type or print in blue or black ink. Do not use red ink.
- You will need to provide your tax ID number, Social Security number, or federal employer identification number (FEIN).
- You will also need to include your license information, NPI number, and Medicare number.

Our Provider Operations department can assist you during the application process. We can also assist you if you have a change of address or change of ownership, or you want to re-enroll as a Medicaid provider. If you need assistance in obtaining your MAID number, please call us at (855) 819-9506 or call the Florida Medicaid Program at 1-800-289-7799, option 4.

Visit our CCP website (For Providers/Providers for MMA/Pharmacy) to view:

- Preferred Drug List (Drug Formulary)
- Formulary Changes Summary Report
- Contact information for our Pharmacy Benefit Manager (PBM), Magellan RX (to submit a Prior Authorization, contact info for Magellan Specialty Pharmacy)
- Pharmacy Locator to find an in-network pharmacy provider
- Opioid Educational Resources for Providers
Did You Know?

**Well Visits**

A well child exam can be documented at any visit (including immunizations and sick visits) with the inclusion of:

1. A Detailed Health History
2. A Physical Development History
3. A Mental/Behavioral Development History
4. A Physical Exam
5. Health Education/Anticipatory Guidance (Specific to Age & Gender)

The codes below can be used to code the Well Child Visit:

- **Z00.129** Encounter for routine child health exam without abnormal findings
- **Z00.121** Encounter for routine child health exam with abnormal findings
- **Z00.00** Encounter for general adult medical exam without abnormal findings
- **Z00.01** Encounter for general adult medical exam with abnormal findings

**Immunizations**

Childhood immunizations must be given prior to a child’s 2\textsuperscript{nd} Birthday. An immunization given after a child’s 2\textsuperscript{nd} birthday does not comply with HEDIS standards.

Adolescent immunizations can be started at age 11 and must be given before the adolescent’s 13\textsuperscript{th} birthday. An immunization given after an adolescent’s 13\textsuperscript{th} birthday does not comply with HEDIS standards.

**Blood Pressure**

The below CPT II codes can be used to bill a blood pressure reading. This coding can be used to show compliance for the Controlling High Blood Pressure (CBP) and the Comprehensive Diabetes Care (CDC) Blood Pressure < 140/90 HEDIS measures.

<table>
<thead>
<tr>
<th>Code</th>
<th>Definition</th>
<th>Code</th>
<th>Definition</th>
</tr>
</thead>
<tbody>
<tr>
<td>3074F</td>
<td>Systolic B/P reading is &lt;130</td>
<td>3078F</td>
<td>Diastolic B/P is &lt;80</td>
</tr>
<tr>
<td>3075F</td>
<td>Systolic B/P reading is 130-139</td>
<td>3079F</td>
<td>Diastolic B/P is 80-89</td>
</tr>
<tr>
<td>3077F</td>
<td>Systolic B/P reading is &gt;140</td>
<td>3080F</td>
<td>Diastolic B/P is &gt;90</td>
</tr>
</tbody>
</table>