

# Florida Healthy Kids (FHK) Quick Reference Guide

Servicing Counties: Broward, Indian River, Martin, Miami-Dade, Monroe, Okeechobee, Palm Beach, and St. Lucie.

|                                                 |                                                                                                                                                                                                                                                                                                                                                            |
|-------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>FHK Provider Manual</b>                      | <a href="#">FHK Provider Manual</a>                                                                                                                                                                                                                                                                                                                        |
| <b>Provider Services and Contracting</b>        | For any questions regarding your contract, please contact your assigned Provider Operations Representative or the CCP Provider Operations Hotline at <a href="tel:1-855-819-9506">1-855-819-9506</a> or <a href="mailto:CCP.Provider@ccpcares.org">CCP.Provider@ccpcares.org</a>                                                                           |
| <b>Provider Portal</b>                          | Please visit <a href="https://e-apply.ccpcares.org">e-apply.ccpcares.org</a> to request access to CCP's provider portal, PlanLink.                                                                                                                                                                                                                         |
| <b>Enrollee Eligibility Status Verification</b> | Online verification of enrollee eligibility available: <a href="https://planlink.ccpcares.org">planlink.ccpcares.org</a> or you may also contact <b>Community Care Plan</b> at <a href="tel:1-866-930-0944">1-866-930-0944</a>                                                                                                                             |
| <b>Authorizations</b>                           | Submit online authorization requests: <a href="https://planlink.ccpcares.org">planlink.ccpcares.org</a><br>Updated list of <a href="#">services requiring prior authorization</a><br>Online verification of authorization status: <a href="https://planlink.ccpcares.org">planlink.ccpcares.org</a> or you <a href="tel:1-866-930-0944">1-866-930-0944</a> |

## Claims Information

|                             |                                                                                 |
|-----------------------------|---------------------------------------------------------------------------------|
| <b>Claims Clearinghouse</b> | Availity                                                                        |
| <b>Payer Name</b>           | Community Care Plan (Healthy Kids)                                              |
| <b>Payer ID</b>             | FHKC1                                                                           |
| <b>Claims Registration</b>  | <a href="#">availability</a> or <a href="tel:1-800-282-4548">1-800-282-4548</a> |

|                                                     |                                                                                                                                                |
|-----------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Timely filing</b>                                | 180 days from date of service                                                                                                                  |
| <b>Claims appeals</b>                               | Must be submitted using <a href="#">planLink</a> within 90 days from date of denial or Fax a <a href="#">Claim Appeal Form</a> to 954.417.7106 |
| <b>Electronic Funds Transfer (EFT) Registration</b> | <a href="#">EFT Form</a>                                                                                                                       |
| <b>Electronic Remittance</b>                        | <a href="#">availability</a>                                                                                                                   |
| <b>For claim status</b>                             | <a href="https://planlink.ccpcares.org">planlink.ccpcares.org</a> or <a href="tel:1-866-930-0944">1-866-930-0944</a>                           |

## Vendor Information

|                            |                                                                                             |
|----------------------------|---------------------------------------------------------------------------------------------|
| <b>Home Health and DME</b> | <a href="#">Coastal Care Services</a> <a href="tel:1-833-204-4535">1-833-204-4535</a>       |
| <b>Pharmacy</b>            | <a href="#">Prime</a> <a href="tel:1-800-424-7906">1-800-424-7906</a>                       |
| <b>PT/OT/ST</b>            | <a href="#">Emboss Specialty</a> <a href="tel:1-888-550-8800">1-888-550-8800</a> , option 2 |
| <b>Transportation</b>      | <a href="#">ModivCare</a> <a href="tel:1-866-430-0570">1-866-430-0570</a>                   |
| <b>Vision</b>              | <a href="#">iCare Health Options</a> <a href="tel:1-877-296-1299">1-877-296-1299</a>        |

### Adds/Terms/Changes

Please submit information on newly added or terminated providers and demographic changes to [CCP.Provider@ccpcares.org](mailto:CCP.Provider@ccpcares.org). Please save this email, we use this email address to share important notices, updates, and provider communications.