



24 Hour Nurse Hotline



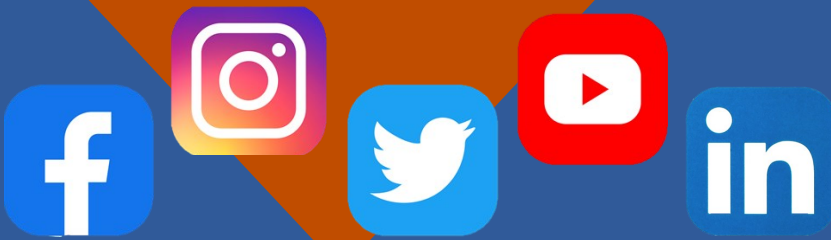
We are Growing!



Discrimination is Against the Law



*We Are Social...*




**FLORIDA  
HEALTH  
CARE  
PLANS**

# NEWS LETTER





### FHCP Pharmacy News

- News/Updates
- New Medical Supplies our FHCP Pharmacies now stock

### Inside This Issue



### We are Listening

In 2022, we surveyed 1002 Providers. A total of 245 Providers completed and returned the survey. See page 10 for more details!

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## New Year Benefit Changes

Just a friendly reminder that effective January 1, 2023, many patients change benefit plans/products and even insurance companies. Therefore, we highly encourage providers and their staff to check eligibility and benefits prior to rendering services to ensure accurate insurance information is on file and correct member payment responsibilities are collected. You may check eligibility and benefits at no charge via the FHCP Provider Portal.

<https://www.fhcp.com/provider-login/>

We are looking forward to working with you in 2023 to keep our members happy and healthy in the New Year!



**FHCP WILL BE  
CLOSED:**



## Member Rights and Responsibilities

FHCP’s Member Rights and Responsibilities are available for review on our website. Go to: <https://www.fhcp.com/about-your-care/your-rights-privacy-and-protection/> and click “Your Rights, Privacy, and Protection.” Hard copies are available upon request by contacting Roberta Hemphill at (386) 615-5018.



# FHCP Member Portal

Members can use the portal to:

- Print their ID card
- Change their PCP
- View progress towards meeting deductibles or out-of-pocket maximums
- Request Rx Refill
- View their claims
- Look at their Benefit Plan book
- Review their enrollment information
- And much more!

## New FHCP Care Center in St. Johns County!

Florida Health Care Plans announces the opening of our new Care Center in St. Johns County. Located adjacent to the FHCP St. Augustine Pharmacy and Sales Office, the new Care Center will now offer Primary Care and Laboratory Services.

### FHCP St. Augustine

200 Southpark Boulevard, Suites 206/208  
St. Augustine, FL 32086



### PRIMARY CARE SERVICES

*Levonne Mitchell-Samon*  
Accepting new patients 18 and up  
Monday—Friday  
8AM—5PM  
(904) 295-3682

### LAB SERVICES

Monday—Friday  
8AM—4:30PM  
Saturday—Closed  
(904) 295-3683

### PHARMACY SERVICES

Monday—Friday  
8AM—6M  
Saturday—9AM—1PM  
(904) 295-3677



## For More Information:

Member Services  
(877) 615-4022 or (386) 615-4022  
TRS Relay 711/TTY (800) 955-8770



**Florida Health Care Plans**



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# 24 Hour Nurse Hotline!

FHCP contracts with Carenet Healthcare Services to provide a nurse advice line 24 hours a day, 365 days a year. Members can call a toll-free number (1-866-548-0727) to speak with an experienced, bilingual Registered nurse.

Using evidence-based guidelines, the nurses provide triage for current symptoms, assist members to better understand diagnoses and prescribed medications, and advise them where and when to go for more help.

If you are a staff PCP, a triage report of your member's call to the Nurse Line will be sent to your task list. The report will also be placed in the patient information section of the EHR. Network contracted providers will receive a triage report via fax. FHCP's Health Promotion & Wellness team also monitors the daily call records for any opportunities for better member education about where they can go for care.

We encourage you to let our members know about this valuable service. For questions about the Nurse line, email Catie Rosekelly at [crosekelly@fhcp.com](mailto:crosekelly@fhcp.com).



Florida  
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## FHCP

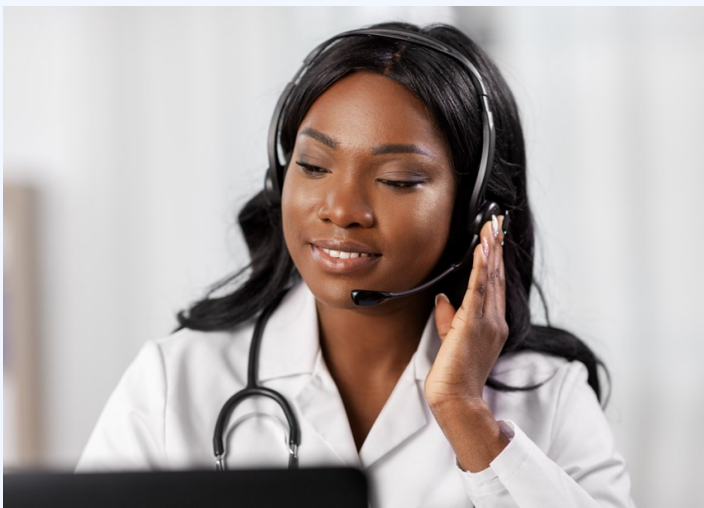
## Provider Portal

We highly recommend registering for the FHCP Provider Portal

<https://www.fhcp.com/provider-login/>

In order to gain access to vital information such as:

- Patient Demographics
- Real time Eligibility & Benefits with accumulation
- Claims Status & Details
- Authorization Status
- Formularies
- RX History
- PCP Panel Reports
- Commonly used forms



# Pharmacy News/ Updates



## Our FHCP Pharmacies now stock:

Peak Flow Meters \$15  
Z STAT with Flowsignal \$10  
Z STAT with Mask \$20

## Benefits of using a Z STAT MDI spacer

- Helps overcome poor inhaler technique
- Reduces drug deposition to mouth and throat
- Assures consistent dose of medication
- Whistle alerts member to improper use



The Z STAT Holding Chamber is designed as an aerosol medication delivery device. It has an anti-static valved chamber that ensures consistent medication delivery and does not allow the medication to stick on the sides to prevent medication wastage. The low-volume inhalation valve makes it easier for the user to inhale the medicine. It is ideal for users who face difficulty in deep breathing. It is small and portable and can be carried along anywhere.

The Physician Drug Guide and Formulary is available on the Provider Portal. The most current FHCP formularies including tiers, prior authorization, and any other limits that apply are available online at [www.fhcp.com](http://www.fhcp.com) and can be printed upon request from FHCP Provider Services at (386) 615-5096.

## Genetic Testing

Effective immediately, prior authorization will no longer be necessary for the following genetic tests as long as the results are processed by Quest Diagnostic Laboratories.

Patients may have the labs drawn at a Florida Health Care Plans Clinic or at a Quest Patient Care Center.

**QUAD Screen**  
Quest Number 30294

**QNatal**  
Quest Test Number 92777

**Prenatal Carrier Screen (CF, Fragile X, SMA)**  
Quest Test Number 90949

All of other genetic testing will still require prior authorization.

If there are questions or concerns regarding the above change, please call the FHCP Central Referral Department at (386) 238-3230.

# News From Quality Management

HEDIS® (Healthcare Effectiveness Data and Information Set) is a performance measurement tool developed by the National Committee for Quality Assurance (NCQA). HEDIS consists of nationally recognized clinical quality measures, and is an important factor in our accreditation. The Quality Management Department at FHCP works with the entire health plan to increase our rates in quality measures in order to promote excellent health outcomes for our members.

**Quarterly Office Visits:** One of the initiatives Quality Management has in place consists of quarterly staff PCP office visits. This year, staff from Quality Management conducted visits via Zoom with our staff providers. The goal of these visits is to serve as an opportunity to answer questions and provide assistance with meeting quality measure goals. We would like to extend a special “Thank

You” to all the physicians and staff for taking part in this important initiative. We hope that you find the visits helpful and informative.

**Gap Report:** FHCP’s goal is to achieve the highest NCQA standing and 5-Star rating, and to provide the highest quality of health care. One of the resources that FHCP has in place to achieve these goals is the Gap Report. This report is produced daily, monthly, or quarterly and identifies “care gaps” for patients with upcoming visits. Gaps can be addressed during a patient visit or office outreach. If the need has already been addressed, the FHCP Quality Management Department should be notified. The result, screening, or in some cases the office note, can be sent to close the gap.

If you have any questions concerning the Gap Report please contact Quality Management at (386) 676-7100, Ext. 4185.



## **HEDIS®/Star Provider Guide:**

The 2022 version is now available at [www.fhcp.com/documents/content/resources-education/2022-HEDIS-Provider-Guide.pdf](http://www.fhcp.com/documents/content/resources-education/2022-HEDIS-Provider-Guide.pdf)

This summary guide is a handy reference source for HEDIS and Star quality measures. Included are our NCQA sensitive quality measures, concise definitions, and tips for improving compliance.



## Use of Provider Performance Data

FHCP is committed to supplying members with data to facilitate their ability to make informed decisions regarding use of practitioners, providers and services covered by FHCP. Therefore, it is important that providers be aware and supportive of this initiative for transparency in health care. Please be advised that FHCP may make the following practitioners/provider performance data available:

- Quality improvement activities
- Public reporting to consumers
- Preferred status designation in the network (tiering) for narrow networks
- Cost sharing for using preferred providers

# Utilization Management Reminders

All initial requests and referrals that require prior authorization are managed by the Central Referrals Department or Case Management Utilization Review Department. Initial requests for services, prior authorization, medications, and items are reviewed utilizing available pertinent documentation. Determinations are based on evidence based medical necessity criteria and member benefits. FHCP uses MCG guidelines, CMS (LCD and NCD) Guidelines, and Blue Cross Blue Shield of Florida Medical Policy Guidelines to assure the consistency with which medical necessity decisions are made.

**PRE-SERVICE AUTHORIZATION Requests:** Please Fax requests for inpatient notification of admissions to the FHCP Utilization Review Department at (386) 238-3253. Please allow up to 14 days for your

request to be reviewed and returned with a decision. A Referring Provider may discuss a request with a Utilization Management Physician or request guidelines utilized to make the decision by calling: Central Referrals Department (386) 238-3230 or (800) 352-9824 and ask for extension 3230.

**INPATIENT Requests:** Please Fax requests for inpatient notification of admissions to the FHCP Utilization Review Department at (386) 615-4058. Concurrent Care (inpatient hospital, skilled nursing facility or home health care) are managed by the Utilization Review Department. A Referring provider may discuss a request with a Utilization Management Physician or request a copy of the guidelines utilized to make the decision by calling: The Utilization Management department at (386) 676-7187 or (866) 676-7187.

## APPEALS:

- **Pre-service** (time frames differ dependent on plan type and/or service)
- **Standard appeals:** Please Fax requests for Standard Appeals to the FHCP Member Services Department at (386) 676-7149. All Standard appeals must be written.
- **Expedited appeals:** (time frames differ dependent on plan type and/or service) Please call **and** fax FHCP Member Services Department (386) 615-4022 or (866) 615-4022. The fax number is (386) 676-7149.



**Post service:** Member or Provider reconsideration request of post-service claims are processed by the FHCP Medical Claims Department. If the Claims Department cannot fully find in favor of the Provider or Member's reconsideration request, the member or provider will be notified. If you or the member disagree with the determination, you may exercise your right to an appeal. Appeals requests are processed through the FHCP Member Services Department. If necessary, a like Specialist Review is provided to make medical necessity decisions. The telephone number for the FHCP Member Services Department is (386) 615-4022 or (866) 615-4022. The fax number is (386) 676-7149.

Utilization management uses evidenced-based guidelines to render medical necessity determinations. All UM decision making is based only on appropriate care and coverage. FHCP does not reward or incentivize staff for making adverse determinations or underutilization of services.

For more information about FHCP's referrals, claims, or utilization management processes, go to [www.fhcp.com](http://www.fhcp.com), and click on the "For Providers" tab, here you can access the Provider Referral Guide and other pertinent information and documents pertaining to Utilization Management at FHCP.



# Case Management Coordination of Care



The CM Coordination of Care services are designed to address the needs of plan members requiring high intensity services through interventions in the following programs: Chronic Complex Care, Transplant Case Management, Case Management Services that include Transition of Care, In-Home Provider Programs, and the Community Resource Program. Behavioral Health Complex Care is performed by FHCP Behavioral Health Department. Case Managers collaborate extensively with the member's physicians and their health care team to assist with acute crisis or chronic conditions (s) including but not limited to coronary artery disease (CAD), congestive heart failure (CHF), stroke, chronic kidney disease (CKD), chronic obstructive pulmonary disease (COPD), diabetes, depression (or other behavioral health diagnosis), and organ transplants.

The Case Management services are of no cost to members. CM AIMS to optimize health, stabilize and/or prevent progression of chronic illness, while encouraging self-awareness and self-management of health conditions. The Programs promote early evaluation of healthcare risks to avoid poor health outcomes, return to stabilized health states or the maximum potential, and improve quality of life in accordance with their medical conditions. Plans of care are designed for the individual needs of the member and includes end of life planning and compassion for those with limited life expectancy.

For additional Information about CMCOC Programs, please visit

<https://www.fhcp.com/for-providers/>

Provider Resource Guide or section for Referrals, Authorizations, and Orders.

**There are various methods to refer a member to the Case Management Coordination of Care or Community Resources services:**

Telephone Contact: Toll Free (855) 205 -7293 or (386) 238 -3284

Fax: (386) 238-3271

Website: [www.fhcp.com](http://www.fhcp.com) > For Providers

Internal: E.H.R. Task or Referral form; available through the Provider Resource Guide

Monday - Friday 8:00 AM to 5:00 PM

**Criteria for Consideration for this program may include members who require any of the following:**

- Healthcare related advocacy across the continuum
- Member education
- Assistance with monitoring and treatment
- Assistance with obtaining needed community resources
- Assistance with barriers related to social determinations of health
- Assistance with behavioral health needs
- Assistance with an in-home provider service for members with difficulty leaving the home to prevent gaps in care or assist with transition of care from inpatient setting to home
- Any clinical situation requiring care coordination to enhance continuity of care and quality of life

**Members can be referred by:**

- Practitioners
- Member or Caregiver
- Discharge Planners
- Medical Management Programs
- Proactive Data Claims Review

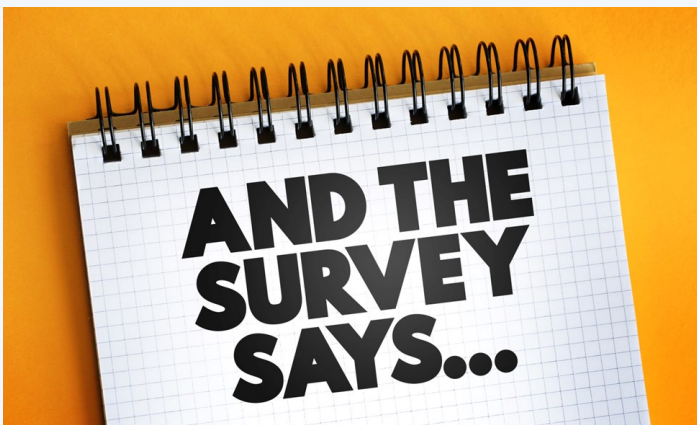


## We Are Listening!

Each year, FHCP surveys its providers in an effort to gain insight as to how FHCP is performing from the provider perspective. In 2022, we surveyed 1002 Providers. A total of 245 Providers completed and returned the survey. Brevard, Seminole, Volusia, Flagler and St. John's Counties were represented.

Individual Provider comments included on surveys have provided useful insight as to the basis for scores in various areas. Responses and recommendations based upon this input have been incorporated into the Performance Improvement Committee's corrective action plan as needed!

A copy of the 2022 Provider Survey Executive Summary, supporting charts and data tables and can be reviewed by accessing the FHCP Provider Portal and on our website.



## REGULATORY REQUIREMENT: PROVIDER DIRECTORY VALIDATION

Federal legislation (*Consolidated Appropriations Act, 2021 – Title I – No Surprises Act – Section 116*) requires providers and health care facilities to validate and update (if necessary) their information every 90 days to remain in printed and online provider directories of commercial and Affordable Care Act health plans.

FHCP has been surveying your offices to validate your practice information for compliance. Please review your practice's current FHCP Directory Information on the form you receive (d) on the survey form. Please sign and fax your completed survey to 386-676-7167 to FHCP.

If no changes are needed, please indicate N/A (not applicable) for each question.

Any time changes to your practice information are needed, you may notify us by sending an email to Provider Services at:

[fhcpnetworkproviderservices@fhcp.com](mailto:fhcpnetworkproviderservices@fhcp.com).

**Thank you in advance for your prompt response!**

**THIS SURVEY MUST BE COMPLETED EVERY 90  
DAYS TO COMPLY WITH FEDERAL LAW**



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Nearly 30 million Americans suffer from diabetes, another 86 million have prediabetes, and the total national cost of diagnosed diabetes is estimated to be around \$245 billion. These statistics are a good reason to team up with your Diabetes/Health Education department.

National Diabetes Month for 2022 is focusing on gestational diabetes. This occurs to women who develop diabetes during pregnancy. This condition can cause increased risks to the outcome of the pregnancy for the mom and baby. Once a woman is diagnosed with this form of diabetes in pregnancy, she risks developing type 2 diabetes at some point later in her lifetime. We can help these pregnant moms control their blood glucose to assist with a positive outcome. Our registered dietitians will calculate an individualized meal plan for gestational diabetes and our RN CDCES will work with the mom as well. Healthy diet, controlling weight, and exercise helps to reduce the chance of developing diabetes later.

Diabetes comes with many possible complications, such as chronic renal failure and cardiovascular disease (CVD). CVD is the number one cause of death in people living with diabetes, resulting in 2/3 of deaths in people with type 2 diabetes. And on top of that, people with diabetes are twice as likely to have heart disease or a stroke than people

without diabetes. Our educators work to help our members reduce these risk factors.

Anyone with diabetes can take steps to prevent chronic kidney disease (CKD), which is another major potential complication and those who already have CDK can try and slow the process. Factors that can influence kidney disease development include genetics, blood glucose control, and blood pressure. Ealy detection, managing blood glucose levels and blood pressure, living a healthy lifestyle, and health education can help prevent or delay CKD from progressing.

We have registered dietitians who will work with your members to slow down the progression of chronic renal failure. The better a person keeps diabetes and blood pressure under control, the lower the chance of getting kidney disease.



The Diabetes/Health Education department has no copays for visits, and we see members through ZOOM or in person at a variety of FHCP facilities. We have RD and RN educators who work together with your members. Let us support your care of our members with diabetes through education and follow up. For more details or to schedule an appointment, please call (386) 676-7133 or toll free 1-877-229-4518 or email [deducation@fhcp.com](mailto:deducation@fhcp.com)

*Members Can...*



*For Free  
Health Education  
Classes TODAY!*

## **Eat Right Move Right**

Our free Adult Weight Management Program is specifically aimed to help our members better understand, prevent, treat, and improve obesity and obesity related conditions. This program is taught by a registered dietitian and features weekly classes with ongoing follow ups and support!



## **Hypertension Education**

We are pleased to announce the availability of a FREE Hypertension education class for our members. Classes are taught by registered dietitians and offered at various FHCP locations and times.



## **Optimize Kidney Health Through Nutrition**

Members can optimize their kidney health through nutrition. Good nutrition is an important key for good kidney health. Florida Health Care Plans Registered Dietitian Nutritionist are here to support our members by optimizing their kidney health through individualized nutrition plans.



## **Nutrition For a Healthy Pregnancy**

This is a FREE two hour class for FHCP members taught by a Registered Dietitian that covers the ideal nutritional recommendations for their journey through pregnancy. Classes will be offered each month at various FHCP locations.



## *For Registration Information:*

Please call 1 (386) 676-7133  
TTY 1 (800) 955-8770  
Monday through Friday  
8am-5pm

All of our appointments and classes are given at no charge for our FHCP members. For those who need individualized treatment, we offer appointment options with a registered dietitian or nurse certified diabetes care and education specialist (CDCES). Classes are set up based on the number of referrals sent to the Diabetes/Health Education department.

**ZOOM appointments are also available.**

# RESOURCES

## FHCP Provider Network Availability & Access Standards

Consumers value timely access to medical care. Florida Health Care Plans (FHCP) monitors primary care, and specialty care practitioner geographic availability and member access to routine and urgent appointments as well as after-hours access accessibility against specific standards. Please review the standards available in the Provider Resource Guide so that we can ensure FHCP members are able to respond that they are getting the care expected. Please use this link to the Provider Resource guide. <https://www.fhcp.com/documents/content/FHCP-Provider-Resource-Guide.pdf>  
Your continued support and care of FHCP members is greatly appreciated.

## FHCP Provider Resource Guide

All Providers can access the FHCP Provider Resource Guide at any time via FHCP’s website at the following link:

<https://www.fhcp.com/for-providers/> and select “Medication Education, Resources, & Support”

The Provider Resource Guide is updated monthly, and summaries are sent to notify all FHCP Participating Providers as revisions are made.

The Resource Guide contains both links and content in areas such as:

- Sample Member Cards
- Administrative Staff Directory
- Drug Formulary and Pharmacy Locations
- Admission and Referral forms
- FHCP Policies and Procedures applicable to Provider Practices

We hope the information provided in the Resource Guide will help you better manage your relationship with Florida Health Care Plans and our members.



FHCP’s Case Management Processes	Obtaining FHCP UM Criteria
Member Rights and Responsibilities	FHCP Formulary Information
Preventative Care Initiatives	Provider Survey Results
Contacting FHCP Utilization staff	FHCP Network Access Standards



# Discrimination is Against the Law

Florida Health Care Plans complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. Florida Health Care Plans does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex.

## Florida Health Care Plans:

- **Provides free aids and services to people with disabilities to communicate effectively with us, such as:**
  - ◇ Qualified sign language interpreters
  - ◇ Written information in other formats (large print, audio, accessible electronic formats, other formats)
- **Provides free language services to people whose primary language is not English, such as:**
  - ◇ Qualified Interpreters
  - ◇ Information written in other languages



## If you need these services, contact:

- Florida Health Care Plans: (877) 615-4022

If you believe that Florida Health Care Plans has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, or sex, you can file a grievance with:

**Florida Health Care Plans**  
**Civil Rights Coordinator**  
 PO Box 9910  
 Daytona Beach, FL 32120-0910  
 Phone: (844) 219.6137 TTY: (800) 955 -8770 Fax: (386) 676-7149  
 Email: [rights@fhcp.com](mailto:rights@fhcp.com)

You can file grievance in person or by mail, fax, or email. If you need help filing a grievance, the Civil Rights Coordinator is available to help you.

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, electronically through the Office for Civil Rights Complaint Portal, available at <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>, or by mail or phone at:

**U.S. Department of Health and Human Services**  
 200 Independence Avenue, SW  
 Room 509F, HHH Building  
 Washington, D.C. 20201  
 (800) 368-1019, (800) 537-7697 (TDD)

Complaint forms are available at: <http://www.hhs.gov/ocr/office/file/index.html>