



# *Florida Community Care Participating Providers' Newsletter*

**SPRING 2022**

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**Florida Community Care (FCC) is proud to announce and share its inaugural Provider Newsletter! As a new communication tool to our provider network, we have prepared this newsletter for you to find important information on a variety of health plan and wellness topics.**

**As a valued member of our FCC network, we work closely with our providers to offer:**

- Efficient processes that enhance the service delivery and quality of care
- Plan benefits aimed at improving member health and their quality of life
- Service levels that deliver high rates of both member and provider satisfaction
- Our network is made up of top-tier providers like you who bring patient-centered care management to the forefront, giving our members the services they want and need. We hope
- you find this information beneficial.

Wishing you good health,  
**Florida Community Care**





## Introducing Florida Complete Care Our New Medicare Plan

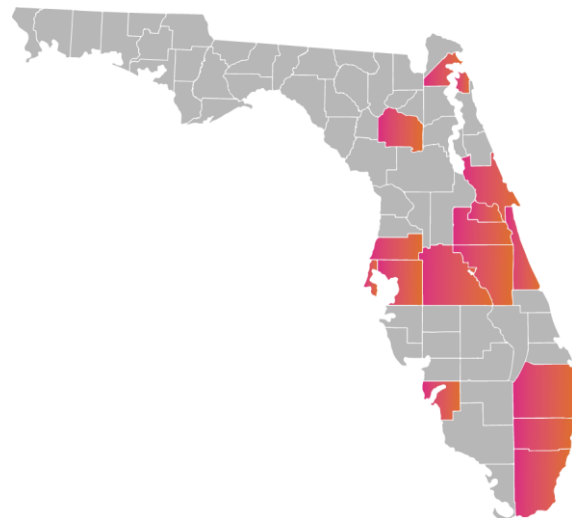
We are excited to announce that our sister Medicare plan, Florida Complete Care (FC2), went live on January 1, 2022, and operates in 15 Florida counties (listed below). FC2 is a different type of Medicare plan: a Medicare Advantage Institutional and Institutional-Equivalent Special Needs Plan.

FC2 serves Medicare beneficiaries who live in institutions or need an institutional level of care, just like FCC members. FC2 builds off FCC's strong care management model and seamlessly integrates a member's Medicare and Medicaid benefits.

A majority of FC2's Medicare members are also FCC Medicaid members. As an existing FCC provider, you may be treating patients already enrolled in FC2. However, if you are not yet contracted with FC2 and are interested in joining the FC2 provider network, please contact our provider relations team by phone at 1-866-962-6186 or by emailing [ProviderRelations@ilshealth.com](mailto:ProviderRelations@ilshealth.com).

### FC2 Counties

- Alachua
- Brevard
- Broward
- Duval
- Hillsborough
- Lee
- Miami-Dade
- Palm Beach
- Pasco
- Pinellas
- Polk
- Orange
- Osceola
- Seminole
- Volusia



## Integrating Physical and Mental Health through Whole Person Care

Since January 2021, Florida Community Care (“FCC”) partnered with the Behavioral Services Network (“BSN”) to provide FCC members with a comprehensive network of mental health and substance abuse providers that include more than 3,800 providers consisting of nearly 1,900 psychiatrists and 700 psychologists. FCC members are in each of the state’s 11 regions.

Therefore, BSN was custom designed to serve individuals throughout Florida.

Working together, FCC and BSN seek to innovate new models of care that further integrate clinical and mental health/substance abuse treatment to deliver “whole person care”.

We know that whole person care is the preferred model of care with the greatest opportunity for sustainable and improved outcomes and patient well-being.

To support whole person care quickly and easily for members, many of BSN’s providers now offer telepsychiatry and telepsychology support services. Telehealth is viewed as an additional, not exclusive, access method. FCC Care Managers are available to assist members identify and obtain referrals to BSN providers for both in-person as well as telehealth visits.

FCC encourages collaboration and care coordination amongst our providers to bridge any integration gaps that may exist between physical and mental health. True integration is a journey that starts with recognition of the value that integration brings to the member. Please ask yourself:

- **Does our office have a system to systematically probe for mental illness and substance abuse?**
- **Do we regularly connect FCC members with other service providers to close the loop on care and contribute to a comprehensive treatment plan?**

FCC and BSN can help with tools and practice support to improve the delivery of integrated care. We are here to help to advance integration and whole person care that will result in better outcomes for member. Contact your FCC Provider Relations Representative for more information.



## **Commitment to Quality Measurement & Improvement: HEDIS®**

At Florida Community Care (FCC), we have a commitment to guarantee quality in the services and care offered to our members. A key part of our monitoring process is the capture and reporting of the Healthcare Effectiveness Data and Information Set (HEDIS®). By measuring outcomes, we can strategize to improve our members' access to and experience of care, therefore improving their quality of life.

Did you know that more than 90% of measures in HEDIS® (excluding CAHPS and descriptive measures) allow at least one telehealth modality instead of an in-person visit? Did you know that physicians and practitioners have direct impact on over 80% of these quality measures? You can help us to continually improve patient outcomes and our HEDIS® rates by ensuring your patients receive preventive care and monitoring according to our adopted clinical practice guidelines and prevailing medical best practices. FCC's clinical practice guidelines may be found by visiting [www.fcchealthplan.com](http://www.fcchealthplan.com), click "FOR PROVIDERS" on the menu, and then click "Provider Handbook" from the list of drop-down options. In the Provider Handbook, FCC's clinical practice guidelines may be found on page 81.

We appreciate your partnership in delivering high quality health care to our members, your patients.



## Provider Complaints, Appeals, and Dispute Resolution

Florida Community Care (“FCC”) maintains effective and proven procedures for handling provider inquiries, complaints, and disputes, including receipt and tracking methods of escalation processes, resolution timeframe requirements, and follow-up responsibilities.

Our Provider Call Center team offers a high level of service for our network providers. Providers can call a toll-free number (1-833-FCC-PLAN, Option 2) to interact with a Provider Services Representative, who can immediately assist with inquiries related to claims payment and other issues. Florida Community Care’s goal is first- call resolution for all provider inquiries.

### Provider Complaints

#### Non-Claims Related Complaints

Providers submitting complaints concerning non-claim issues shall have 45 days to file their complaint. These include any complaint, including clinical issues, except for filing a clinical appeal as the provider or on behalf of the member. FCC will notify providers, either verbally or in writing, within three days of filing a complaint that the complaint has been received and we will provide an expected date of resolution. Written complaints can be filed by USPS letter, email, or fax. FCC will provide a written notice of complaint status every 30 days thereafter until the complaint is resolved. FCC will resolve all non-claims provider complaints within 90 days of its documented receipt and will provide written notice of the disposition to the provider within three business days of the resolution date and will include the basis of the resolution.

#### Claims Related Complaints

For provider complaints concerning claims issues, providers shall have ninety 90 days from the date of final determination of the primary payer to file a complaint. FCC will notify providers, either verbally or in writing, within three days of filing a complaint that the complaint has been received and will provide an expected date of resolution. A notice of status will be provided to the provider within 30 days of the claim complaint. For issues that require additional time to research, FCC will submit a written request for an extension if the resolution requires more time. FCC will provide written notice of the status of the complaint to the provider every 30 days thereafter. FCC will resolve all claims-related provider complaints within 60 days of receiving the complaint and will provide written notice of the disposition and the basis of the resolution within three business days of resolution.



Providers can contact FCC using any of the methods below:

- In person through your Provider Relations Representative
- Via phone call to the Provider Call Center: 1-833-FCC-PLAN, Option 2
- Email through our provider self-service website:
- [www.fcchealthplan.com](http://www.fcchealthplan.com)
- In writing via U.S. mail to:  
Florida Community Care  
Attn: Provider Complaints  
PO Box 211322  
Eagan, MN 55121

## Provider Claims Disputes

Providers may request reconsideration of how a claim processed, paid, or denied. These requests are referred to as disputes. FCC has a defined Provider Dispute Resolution process for use by providers who are dissatisfied with how a claim processed, paid, or denied.

If a provider would like FCC to reconsider a claim adjudication decision, providers may submit reconsiderations for a variety of reasons (e.g., claim allowance, coordination of benefits, provider contract issue, etc.). When submitting a claim reconsideration, provide a written statement of the dispute, along with the following information:

- The completed Provider Dispute Form
- A written explanation supporting the claims appealed
- A copy of the remittance advice attached
- The necessary medical documentation (e.g., operative report, physician orders, history, and physical) as indicated by the reason for the reduction or the denial on the remittance advice
- Documentation from a recognized authoritative source that supports your position on the procedure codes submitted (optional)

### Send Dispute to:

Florida Community Care  
Attn: Provider Disputes  
PO Box 261060  
Miami, FL 33126

For more information on  
Provider Dispute Resolutions,  
please contact your Provider  
Relations Representative.



## AHCA Dispute Resolution Program

received by letter, the provider can access AHCA's contracted disputed resolution program. AHCA has contracted with MAXIMUS, an independent dispute resolution organization, to help health care providers and health plans resolve claim disputes.

MAXIMUS has been accepting claim disputes for Florida's managed care lines of business since May 1, 2001. Application forms and instructions on how to file claims disputes can be obtained directly from MAXIMUS by calling 1-866-763-6395 (select 1 for English or 2 for Spanish), and then select Option 2 - Ask for Florida Provider Appeals Process.

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### Non-Discrimination Notice.

Florida Community Care believes in equal opportunity and affirmative action. We comply with all applicable Federal civil rights laws. We do not discriminate because of age, race, ethnicity, religion, mental or physical disability, national origin, marital status, sexual orientation, sex, genetic information, gender, gender identity, health status, claims experience, medical history, or source of payment. We do not discriminate in the enrollment of members, the delivery of covered services or items, or the credentialing or contracting of providers. FCC will not tolerate employees or providers that discriminate. For more information or if you have concerns about discrimination or unfair treatment, call the Department of Health and Human Services' Office for Civil Rights at 1-800-368-1019 (TTY 1-800-537-7687) or our local Office for Civil Rights. If you have a disability and need help with access to care, call Member Services at 1-833-FCC-PLAN. If you use TTY, call 711, Monday-Friday, 8 a.m.-8 p.m. Eastern Time. If you have a concern, such as a problem with wheelchair access, Member Services can help. \*The benefit information provided is a brief summary, not a complete description of benefits. Limitations, co-payments, and restrictions may apply.

Benefits may change.

For more information, contact Florida Community Care at 1-833-FCC-PLAN (TTY 711 or 1-866-467-4970). This information is available for free in other languages. Please contact our customer service number at 1-833-FCC-PLAN or TTY 711, Monday to Friday 8am to 8pm.

Esta informacion esta disponible gratis en otros idiomas. Por favor, pongase encontacto con nuestro numero de Servicios para Miembros a 1-833-FCC-PLAN o TTY

711, de lunes a Viernes de 8 a.m. a 8 p.m.

