



Happy  St. Patrick's Day

Welcome to all New Providers!

Carlos A. Liotta, MD, Family Medicine and Sports Medicine All FHCP Facilities
 Anthony Capozzi, MD, Psychiatry- FHCP Behavioral Health Dept., Holly Hill
 (Michael) Shane Carter, D.C. Chiropractic-Carlisi Chiropractic Center, Bunnell
 Albert Ho, MD, Child Neurology-Child Neurology Center of Orlando
 Kottapurath K. Kunjumoideen, MD, Hematology-Advanced Hem/Onc. Centers, OC
 Dorna Broome Webster, MD, Internal Medicine, Orange City **(EPN Only)**
 Steven M. Gallas, DO, Family Medicine-Debary **(EPN Only)**
 Eric A. Gershman, MD, Hematology and Oncology, Deland

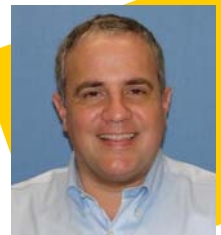
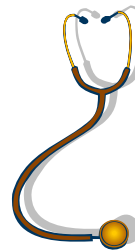
Mid Florida Hematology and Oncology Centers, Orange City

Maneesh Gossain, MD, Radiation Oncology
 Steven Lester, MD, Radiation Oncology
 John D. Looper, MD, Radiation Oncology
 Ajay K. Verma, MD, Radiation Oncology

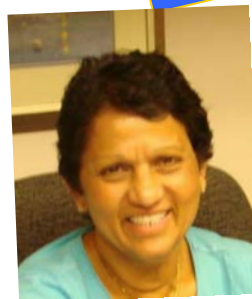
Please notify
ebruner@fhcp.com
 of your new
 email address,
 to insure your
 uninterrupted
 service of the
 Provider
 Newsletter

Let's Celebrate National Doctors Day March 30, 2011

THANK YOU!



Caring



Appreciation





Holly Hill Lab and the Member Services Department are now located in the SW corner of the Holly Hill Facility.



Announcing the new Holly Hill FHCP EKG Clinic

Effective Monday, February 14, 2011, Holly Hill FHCP EKG Clinic is now open, seeing eligible FHCP members by appointment only. The new clinic hours are: Monday through Friday from 1:00 pm to 3:00 pm and is located in the FHCP Holly Hill Facility Lab. The lab has now moved from the front of the building to the back, where the old Ophthalmology department was formerly located. For more information contact: Trudy Tucker 615-4019.

Holly Hill FHCP Facility Lab And EKG Clinic
1340 Ridgewood Avenue
Holly Hill, FL 32117
Telephone: 386-676-7136
Fax: 386-676-7181



***CONGRATULATIONS TO THE FHCP
DIABETES EDUCATION TEAM!***



*The American Diabetes Association Recognizes this education service as meeting the National Standards for Diabetes Self-Management Education.

THE AMERICAN DIABETES ASSOCIATION, DIABETES EDUCATION PROGRAM MERITS ADA RECOGNITION

The **Florida Health Care Plans** diabetes self-management education program in *Orange City, Port Orange, Daytona Beach and Palm Coast* has been awarded continued Recognition from the American Diabetes Association. The program was originally Recognized in *March, 2004*. This program offers high-quality education services to the patients it serves.

Dangers of Electronic Cigarettes!



For the current schedule of QuitSmart smoking cessation classes, members can call the Marketing Department at 676-7110. Classes are \$20 for FHCP members. Other smoking cessation opportunities are listed on our website under Health and Wellness.

By now most medical professionals have heard about the electronic cigarette craze that smokers are in love with. Some of your patients have probably asked you about or extolled to you the virtues of this allegedly safe alternative to smoking. Unfortunately, it is neither.

E-cigarettes have a battery and a chamber containing a liquid. The liquid is vaporized and inhaled. This product is not FDA approved but sold everywhere from flea markets to malls and even at health fairs. The FDA considers it an unapproved new medical device and drug. Content testing of what is inhaled revealed the labeled information to be inaccurate and misleading. The devices consistently fail to deliver the amount of nicotine advertised. In fact, the “nicotine free” cartridge contained low levels of nicotine. The assortment of “flavors” such as cherry, bubble gum, grape, etc, tells me that these devices are being marketed to kids. Even more worrisome is the inclusion of prescription drugs in the nicotine cartridges. One manufacturer markets tadalafil and rimonabant in liquid form that the end user puts in the nicotine cartridge. Inhalation of erectile dysfunction and diet drugs is obviously not FDA approved. At the very least, all e-cigarettes contain unknown quantities of nicotine, diethylene glycol and cancer causing nitrosamines. The health claims of the manufacturer are all false. We already have an FDA approved nicotine inhaler for use in smoking cessation.

Bottom line: E-cigarettes are not a safe alternative to smoking. They get unreliable levels of nicotine, certain prescription drugs, and contain known toxins and carcinogens. Sadly, they will be on the market for awhile as the manufacturers thus far have stonewalled the FDA's authority and refuse to enter the new device approval process.

Don Davis, LCSW
Smoking Cessation Consultant

CAHPS Survey

CAHPS Survey - 'tis the season. This annual survey is conducted for both Medicare and Commercial members. It allows a member the opportunity to respond to a confidential survey with their candid opinion about their health care. Please encourage members to complete the survey if they are chosen to participate. Let the members know that we appreciate the time they invest in responding to the survey. If they can't always respond with the best rating, we do review the results every year for areas that we can improve upon to provide the best health care for our valued members.

Caring for Members with COPD

For patient's living with COPD, chronic bronchitis, or emphysema, life can be very challenging at times. Taking their medications as directed, keeping doctor's appointments, exercise, and eating right might sound easy but sometimes it is overwhelming. Helping patient's understand the importance of doing these things and how it helps them manage their disease is very important, even when you and your staff have to reinforce it many times. Once the patient presents to the emergency room or has been admitted to the hospital with a COPD exacerbation, the work increases for patient and physician.



FHCP members are monitored to see if they meet the quality measure for appropriate medication management after discharge. To meet the measure, the patient will have been:

1. Dispensed a systemic corticosteroid within 14 days of the event **and**
2. Dispensed a bronchodilator within 30 days of the event.

We need your assistance in managing these medications in patients with a diagnosis of COPD after discharge from the hospital or the ED. Please ensure that your patients' have been started on a systemic corticosteroid or that they have a follow up visit scheduled with your office **within 14 days** for re-evaluation and continued medication management.

There are many tools and information available for your patients on the FHCP website, from their Case Manager if they already have one working with them, and from Disease and Quality Management.

To view the COPD Clinical Practice Guidelines go to:

http://www.fhcp.com/providers/policies/clinical_practice_guidelines.htm

For more information you can contact us at dunger@fhcp.com or dbates@fhcp.com.



ATLANTIC INSTITUTE OF CLINICAL RESEARCH

IS CURRENTLY ENROLLING THE FOLLOWING CLINICAL TRIALS:

OSTEOARTHRITIS or RHEUMATOID ARTHRITIS

OVERACTIVE BLADDER
(for people 65 or older)

SHOULDER TENDONITIS or BURSITIS
pain onset between 5 to 21 days ago

TYPE 2 DIABETES

POST HERPETIC NEURALGIA
post-shingles pain present for 9 months or longer

FHCP membership NOT required to participate in these studies. No insurance is necessary. No cost to participate. You may be paid for time and travel.

For more information please call 386-238-3220.



COMMUNICATION TOOLS FACILITATE ACCESS FOR YOU AND YOUR PATIENTS!



Go to
FHCP.COM
and check us
out.



1. **FHCP's Nurse Advice team** is now available 24/7 to assist our members with their health concerns in both English and Spanish. Through a call center triage module, nurses have access to the most trusted clinical information in the industry, including more than 400 symptom-based triage guidelines specifically written for adult, women's, pediatric, and behavioral health topics. Members can call 1-866-548-0727 for confidential, caring help at any time.
2. **Member Portal** - Florida Health Care Plans is Proud to Announce an innovative new online service exclusively for our members. The Member Portal is where all members can securely view documentation related to their insurance coverage online 24 hours/day, 7 days/week, 365 days/year from any computer anywhere the internet can be accessed! Members can also access the Health Portal and register for "Welcome To Wellness" FHCP's innovative Health Management tool with access to a state of the art Health Risk Assessment and thousands of health related articles in English and Spanish, along with personalized interactive programs to help keep our members healthy. The Member Portal consists of three main sections:
 - a. **Health Portal:** The Health Portal Consists of access to "Welcome To Wellness" FHCP's New Health Management Tool and The Patient Portal where our members with FHCP staff physicians can speak securely, make appointments, and even refill existing prescriptions.
 - b. **Patient Portal:** This portal is also available to FHCP Members who use FHCP staff physicians. Members can
 - i. Send FHCP Staff Physician a secure email;
 - ii. Make an appointment with FHCP Staff Physician
 - iii. Request a prescription renewal;
 - iv. Start or update their personal health record
 - c. **Documents Portal:** Using the Documents Portal, all members have the ability to view their insurance documentation online to verify coverage and see co-pays for each level of service.
 - d. **Member Resources:** Here members have access in one location to common FHCP programs, contacts, resources and common forms.
3. **Provider Handbook Online** – An up to date version of FHCP's Provider Handbook is available via FHCP's Website or PAI. The URL of FHCP's Website is www.fhcp.com. The link to the FHCP Provider Handbook is <http://www.fhcp.com/providers/services/handbook.htm>.
4. **Provider Search** – FHCP's website contains a feature that allows users to search for a FHCP participating provider based on various criteria. The Provider Search feature can be found at <http://www.fhcp.com/physician.do>

FHCP Coverage of Colonoscopies for Medicare Members

Screening Colonoscopy: Members have no out of pocket.

However, we have reminded members that **IT IS IMPORTANT THAT THEY UNDERSTAND** that if a screening colonoscopy is performed, and during the procedure, their doctor has to take a biopsy or remove a lesion, polyp or other growth, the procedure is at that point considered to be diagnostic, and they will have an out of pocket expense as explained below for the diagnostic colonoscopy. Since there is no way to know in advance if the screening colonoscopy will end up being a diagnostic colonoscopy, they should always be prepared to pay their diagnostic colonoscopy copay to the provider or facility. You should discuss collection policies with your FHCP patient before you schedule their procedure.

Diagnostic Colonoscopy: Members pay

- a \$50.00 copay per visit for a diagnostic colonoscopy at a FHCP in-network GI lab or other non-hospital location; or
- a \$100.00 copay per visit for a diagnostic colonoscopy at an in-network ambulatory surgical center; or
- a \$150.00 copay per visit for a diagnostic colonoscopy at an in-network hospital facility, as an outpatient in a hospital owned facility that generates a hospital claim to FHCP.

ICD-10 Update

A third of 2011 is already gone, leaving only 30 months until ICD-10 is the standard for coding. Even though it is over two years away, a good first step is to look at your records. Have you made any plans to implement an EHR? Also it is important that you contact your practice management/billing vendors to see when their ICD-10 upgrade will be available to your practice.

There are many advantages to look forward to with ICD-10. Increased code specificity, use of combination codes that have the disease and their manifestations built into one code, and some decreased specificity are welcome changes. For example, fracture codes that tell us the status of the fracture and more information about the fracture will be helpful to all.

Remember the GO LIVE date is October 1, 2013.

You will need to have the upgrade available for installation and testing at least six months before 10/1/2013. That means you now have only one year to get ready!

If you have any questions or concerns about ICD-10 or transitioning to an EHR please feel free to contact Carl Costa, CPC at 386-676-7100 Ext 7247 or ccosta@fhcp.com



**March is
Colon Cancer
Awareness Month**



Announcing New Availability Additions

As part of Florida Health Care Plans (FHCP) continuing migration of web based functionality to Availity, please be advised that effective immediately, FHCP now has the capability to deliver electronic remittance advice files and payments (ERA) via the Availity Health Information Network.

Please note the addition of FHCP as a health plan choice on Availity's website for EDI files. You should use the Availity website to register for ERA functionality with FHCP. **If you have any questions about access, please contact Availity Client Support at 800 / AVAILITY (282-4548) or support@availity.com.**



*First Day of
Spring
March 20*



<u>Enhanced</u> Functions through AVAILITY	<u>Continuing</u> FHCP PAI / Provider Portal Functions
Member Eligibility Status – both individual and batch status requests are accepted	LabCorp laboratory results reporting and trending for members
FHCP Benefit Plan/Service Coverage Inquiries (summarized general benefits and specific benefit information) **	History and current status of member prescriptions dispensed through FHCP pharmacies
Real-time member deductible and out-of-pocket balances for the current year **	Status of FHCP Referral Request Authorizations
Provider claims Status Information	Member's current PCP Assignment
Electronic Remittance Advice	PCP panel additions, deletions, detail/summary
Electronic Payments – FFS Payments Only	

If you have any questions in reference to this memo, please contact me at 386 / 615-4001 or ccooper@fhcp.com. Thank you.

** Benefit and deductible information is provided for HMO and Out of Network benefit levels only. Option 2 (EPN) benefit information for EPN providers is currently not available.

SNF Coverage on Weekends

This memo is a reminder to all primary Care Physicians that the skilled nursing home physician will be available from Monday, 8 a.m., through Friday, 5:00 p.m., and when that physician is on call for his/her practice.

Questions/calls/concerns on the weekends and holidays regarding a member in a skilled nursing home setting will be directed to the PCP or the physician covering for the PCP.

If you have any questions in reference to this memo, please contact me.

Joseph Zuckerman, M.D. CMO

386-676-7100 ext 4087

East Coast Bariatrics, located at Halifax Health Medical Center, is a comprehensive surgical weight loss program for patients with clinically severe morbid obesity.



Dr. Joel Sebastien and his multidisciplinary team of professionals include physicians, nurses, dietitians, mental health, exercise physiologists and support counselors. Each member of the bariatric surgery team is dedicated to helping patients improve their medical risk factors and reduce their weight through a comprehensive approach to weight management that includes:

Laparoscopic Roux-en-Y Gastric Bypass
Laparoscopic Adjustable Gastric Banding (Lapband®)
Laparoscopic Vertical Sleeve Gastrectomy (VSG)

The emphasis is to work together with each patient and emphasize that weight loss surgery itself is but one tool in an overall life changing decision towards an improvement in health, which targets the goal of wellness.

Things to know as a Healthcare Provider:

- No referral or physician letter is needed to enter the Bariatric program.
- All you have to do to refer a patient is give them the East Coast Bariatrics phone number (386.238.3205).
- Our Bariatric insurance coordinator will guide your patient through their individual insurance requirements.
- Bariatric in-services and education are available for your staff.

To request written material for your practice please call 386.481.6776 or email: tsalyerds@fhcp.com.

March Is National Nutrition Month



Try Adding More Color To Your Diet!



If we have no winter, the spring would not be so pleasant: if we did not sometimes taste of adversity, prosperity would not be so welcome.

Anne
Bradstreet

