

FLORIDA HEALTH CARE PLANS NEWSLETTER



**Florida
Health Care
Plans®**



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New Year Benefit Changes



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From Dave Schandel, CEO

2020 has been a year like no other. The COVID-19 pandemic continues to produce uncertainty and stress in our communities. By now, we have all been impacted by this virus in some way. Despite the challenges we are facing, this is also a time that is bringing out the best in many—from the healthcare staff and first responders fighting on the front-lines, to the essential workers providing food, products and services. On behalf of everyone at Florida Health Care Plans, we are incredibly appreciative of all of you who help provide healthcare for those in need. We are proud to play a critical role in this fight by partnering with you and by supporting you.

Thank you for all that you do!

Dave Schandel, CEO

New Year

Benefit Changes

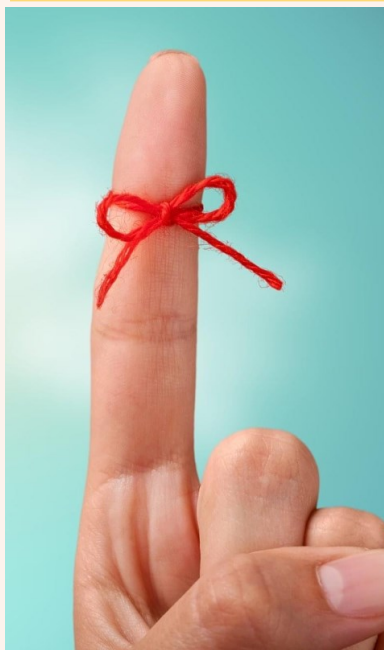
Just a friendly reminder that effective January 1, 2021, many patients change benefit plans/products and even insurance companies. Therefore, we highly encourage providers and their staff to check eligibility and benefits prior to rendering services to ensure accurate insurance information is on file 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/for-providers/>

We are looking forward to working with you in 2021 to keep our members happy and healthy in the New Year!



FHCP will be closed on:



- ◇ Thursday, November 26th through Friday, November 27th
- ◇ Thursday, December 24th through Friday, December 25th
- ◇ Friday, January 1st 2021

Not All SUPERHEROES Wear Capes



Flu Season is Upon US!



Protect Yourself and Others

Your Flu Vaccine Protects Me—My Flu Vaccine Protects You

Flu Shots will be available during business hours at all FHCP locations at all Pharmacy locations starting September 1st

No Appointment Necessary

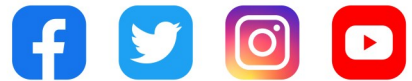
STAY CONNECTED...



There are many outlets to stay connected with FHCP! We encourage Provider engagement as FHCP utilizes multiple social media platforms to reach its audience.

So, STAY connected!

- ◇ [Facebook](#)
- ◇ [Twitter](#)
- ◇ [YouTube](#)
- ◇ [Instagram](#)



For more information please call (386) 615-4022 or visit www.fhcp.com



From The Director's Corner

Quality Update



This year is one of the most notable years in the history of modern medicine and our society. 2020 will likely be remembered for the abrupt and dramatic change that everyone in the world experienced in a very compressed period of time. Although the COVID-19 pandemic has affected each individual differently, it has affected everyone's life in multifaceted ways. We have changed the way we work, the way we travel and play, how we interact with our friends and family, our finances and security, and the way we think about healthcare. Much has been written about the pandemic, but viewing this experience through the lens of a local managed healthcare organization, there are aspects of this shared experience that receive less attention. Quality in healthcare is frequently confused with measurable outcomes and metrics. Practicing physicians and nurses understand, and frequently point out, that measures and metrics are artificial, prone to statistical oddities, vulnerable to the validity of the data that goes into them. Metrics do not directly correlate with what a professional would consider "quality" care. Quality is more nebulous. What an experienced well-respected professional would consider high quality is often difficult to measure. During this pandemic there are areas that we, as healthcare providers, should consider when striving to deliver "high quality" healthcare.

COVID-19 overwhelmed our healthcare organizations and professionals. Even in areas that were not severely affected, many man-hours and thought have been spent by individuals working on this problem. Due to the severity, and gravity of the situation, anxiety permeated through healthcare systems and individuals. Anxiety and stress influence behavior, and there can be a tendency for individuals to focus exclusively on one problem and block out other considerations and data that would lead to more appropriate executive functioning and clinical decision making. I have labeled this "COVID tunnel vision." Depending on the setting, and the individual practitioner, there can develop a sudden loss of clinical decision making skills and the use of differential diagnosis skills. Unfortunately this can have severe and lasting ill-effects on patients. Patients who present with shortness of breath have a differential that is much broader than COVID or not COVID. The temptation to make that decision the focal point of a clinical encounter must be resisted for the well-being of our patients.

There is mounting evidence that patients are increasingly falling behind screenings and routine care, like vaccinations and cancer screenings. There is also evidence, both peer reviewed and anecdotal, of medically necessary testing and treatments being delayed or cancelled. I am concerned that our patients will suffer the very real ill-effects of this phenomenon for long after the pandemic has passed.

Continued on next page.

How will the woman who presents with a stage III breast cancer next year, that didn't complete her mammogram this year, be counted in our COVID statistics moving forward? Will the patient who didn't receive a catheterization for chest pain in the summer of 2020, because of the inability to schedule a non-emergent catheterization, or because they didn't present for an evaluation, and experiences sudden cardiac death later in 2020 be counted as a victim of COVID?

The pandemic has demonstrated in many ways the resiliency and adaptability of society. But society is made of up of individuals and our adaptability and resiliency, especially under new, and varying degrees of stress, is unequally distributed. Both the relative degree of stress individuals have had to deal with and ability each individual possess to cope with those strains are variable and along a continuum. Rapid community change causes strains like school-closure, business closures, and deficient distribution of needed protective equipment. Community strain is intrinsically linked to the individual experience; unemployment and financial insecurity, confusion, stigma, and isolation. Mental health in our society, and for our individual patients, has been affected. Depression, anxiety, and increased substance use are real and objective likely consequences of the pandemic. After the last great recession, the country experienced wide-spread unemployment and social dislocation which has been cited as contributor unhealthy behaviors and outcomes such as the subsequent opioid epidemic, and for the first time in United States history, a decrease in life-expectancy. The Washington Post published a great series of articles exploring this phenomenon - <https://www.washingtonpost.com/unnatural-causes>.

Lastly, due to the pandemic we have seen the rapid adoption of telemedicine in a myriad of settings. Regulatory and payer policy changes, the necessity of fee-for-service based practices to continue to produce revenue, and most importantly the need for continued medical care for our patients in the face of the pandemic has enabled this change. Thousands of practitioners, and millions of patients, engaged to telehealth encounters for the first time in the last 6 months. Security requirements and careful planned implementation of virtual capability for visits were waived and forgone in order to expeditiously meet patient, and physician, need for medical care. Telemedicine is a valuable and useful tool available to physicians and patients. I was the physician champion for telemedicine at FHCP, but in the rush to meet the demands of the moment, it is possible, across our community, the limitations and potential vulnerabilities of telemedicine and specific platforms are not fully appreciated. Telemedicine is a complement to the traditional practice of medicine; the practice of telemedicine does not represent a replacement of a physician and a patient together, in a room. Security concerns still exist and will likely have consequences in the future. Most importantly there is concerning research regarding diagnostic error and telemedicine.

2020 has been a very eventful year for everyone in healthcare. Hopefully as we move into 2021 we will have continued positive news and we will begin to be able to put the experience of this pandemic in the rear-view mirror. I suspect though that we will continue to experience, with our patients, the effects of this time for years to come.

Stephen Keen, M.D.

Medical Director of Quality, Utilization, and Case Management

HEDIS®/ STAR PROVIDER GUIDE

AVAILABLE ONLINE AT FHCP.COM



One of the initiatives Quality Management has in place consists of quarterly staff PCP office visits. This year, Amber Thompson and Stacy Eason, employees in the FHCP Quality Management department, conducted visits via Zoom with our staff providers. They were joined by their colleague Gina George, LCSW, who focused on behavioral health HEDIS measures. The goal of these visits is to provide a summary of data regarding HEDIS measures and to serve as an opportunity to answer questions or provide assistance with meeting 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 found the visits helpful and informative.

Some Helpful Tips:

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. The gap report is a daily, monthly, or quarterly report that identifies care gaps to provide quality healthcare, increase patient engagement, and improve provider and patient experience. This tool enables providers to treat patients based on their complete health profile.

Metrics are derived from HEDIS measures. Each

report lists member demographic information and identifies each care gap to be addressed. Gaps can be addressed during a patient visit or office outreach. If the patient gap 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.

The HEDIS/Star Provider Guide is another reference source for HEDIS and Star measures and can be found at [fhcp.com](https://www.fhcp.com), under "For Providers" then "Resources and Support". The link is: <https://www.fhcp.com/documents/HEDIS.Star-Provider-Guide.pdf>. Clicking on your quality measure of interest in the Table of Contents will take you directly to a concise definition, information, and tips for that measure.

If you have any questions concerning the gap report please contact Quality Management / Performance Improvement (386) 676-7100, Ext. 4185.



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

FHCP's Case Management Coordination of Care Department

Case Management Program targets members at risk for disease progression or health complications that may require an extensive use of resources. Case management assists members with acute or chronic disease(s) including but not limited to asthma, 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.

A complete listing of Case Management Coordination of Care Programs can be found in the FHCP Provider Resource Guide. Go to <https://www.fhcp.com/for-providers/>, where you will find the latest Guide under the Provider Education section. You can also find information in our Referral Guidelines, under the Referrals, Prior Authorizations, and Orders section.



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

Referral form available through the Provider Resource Guide

Fax: (386) 238-3271

Website: www.fhcp.com

Email: cmanagement@fhcp.com

Internal: E.H.R. Task

Monday - Friday 08:00 AM to 5:00 PM

CRITERIA FOR CONSIDERATION TO 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 determinants of health
- ◇ Assistance with behavioral health needs
- ◇ Interactive Remote patient monitoring
- ◇ 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**



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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 (formerly known as Milliman CareGuide), CMS Guidelines, and Blue Cross Blue Shield of Florida Medical Policy Guidelines to assure the consistency with which medical necessity decisions are made.

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.

Concurrent Care (inpatient hospital, skilled nursing facility or home health care) are managed by the Case Management Utilization Review Department. A Referring Provider may discuss a request with a Utilization Management Physician or request guidelines utilized to make a decision by calling: Case Management Department at (386) 676-7187 or (866) 676-7187.

All Member's or Referring Provider requests for

appeals for pre-service, are processed by the FHCP Member Services Department. Initial Member or Provider Appeals 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 appeal, then said appeals are also processed by 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

All UM decision making is based only on appropriate care and coverage. FHCP does not reward staff for making adverse determinations, and they do not use financial incentives that reward underutilization.

For more information about the Referral Process, Claims or Utilization Management Process, go to the FHCP Website, www.fhcp.com, and click on the Providers tab, then click on Provider Education to view the FHCP Provider Resource Guide. Provider Referral Guides and other pertinent documents are also available under the Referrals, Prior Authorizations and Orders section .





How we support patients through the Bariatric surgery program

East Coast Bariatrics (ECB) *utilizes a multidisciplinary team to help patients set SMART goals. SMART goals are specific, measurable, attainable, realistic, and time bound. Patients can receive direction on identifying motivation that will help them achieve long-term habits.*

Mental Health

ECB provides all patients with a bariatric counselor. The licensed mental health counselor will work with patients throughout their journey on setting goals. The SMART goals patients set with the bariatric counselor lead to behavior modifications to establish healthy habits that last. Patients will understand their intrinsic and extrinsic motivation for lifestyle changes.

Nutrition

ECB has a full-time Registered Dietitian (RD) on staff. The RD will work with patients on sustainable nutrition changes. The RD helps patients set SMART goals that establish lifestyle change instead of temporary diets. Patients will understand the importance nutrition plays in improved quality of life.

Physical Health

ECB has a fitness expert on staff. The fitness expert will work with patients to make sustainable changes to their fitness and activity. The fitness expert helps patients set SMART goals that increase momentum and build strength over time. Patients will understand that setting small goals early on will lead to accomplishing larger activity goals later.

If you feel your patient would benefit from Bariatric surgery, please have them call 386-238-3205. We will help them through every step of the process.



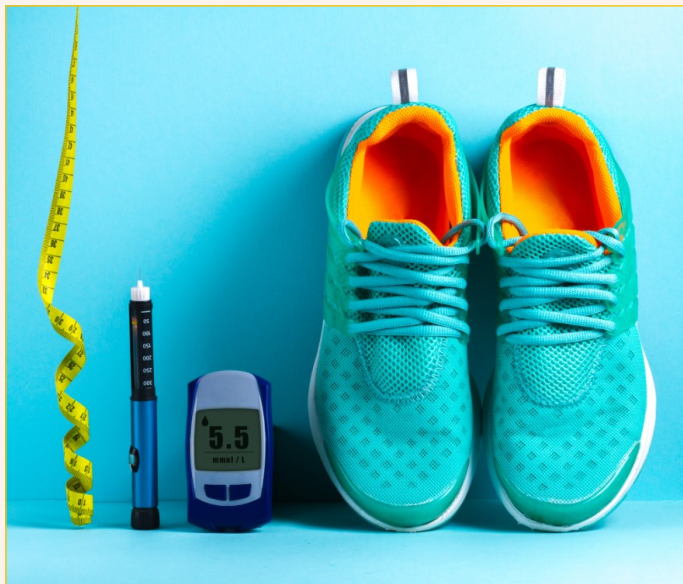
CHECK OUT THE NEW "ONE-STEP" PROCESS!

Now, there is just ONE easy step to refer a member for Bariatric surgery or Medical Weight Management! Just have your patient call us at (386) 238-3205 and we'll take care of the rest!



November is National Diabetes Month

At FHCP, we are all about wellness and prevention. To truly practice in today's healthcare environment, providers must be proactive and put prevention in the forefront. This is an extremely important point in the area of diabetes and pre-diabetes.



It has been shown that if a person with pre-diabetes treats it aggressively, they can delay or prevent the conversion to diabetes. The simple at-risk assessment for prediabetes has been updated and is available online at DolHavePrediabetes.org.

One of the best ways to assist our members is through education and vigilant monitoring. The Diabetes Education Department at Florida Health Care Plans offers education at many levels. Members can attend group classes and meet with Registered Dietitians and Certified Diabetes Educators individually, with no cost or co-pay to the member. We offer ZOOM and telephonic

appointments, making it easier for your members to schedule with us.

It is recommended by the American Diabetes Association, 2020 Standards of Care, that all people with diabetes receive diabetes education through a Diabetes Self-Management Education (DSME) program. How many members that you treat have completed diabetes self-management education and come back for follow-up education and support?

At each visit, BP, weight and visual foot exams should be completed. A1c, Lipids, and assessment of other cardiovascular risk factors should be done every 3-6 months, depending on the control the member has. Annually, the provider should ensure a comprehensive foot exam, a dilated eye exam and urine microalbumin be completed.

The member needs to be reminded of their responsibilities, such as home blood glucose monitoring, healthy eating and being active.

We can help! Send over your referrals. National Diabetes Month is November, but we educate and support your members all year long. Together, we, as a team can accomplish great things for our members and make a difference in their quality of life.

Please feel free to contact Diabetes/Health Education Department for more details regarding dates, times, and locations or to schedule classes for your members at (386) 676-7133 or toll free 1-877-229-4518. Fax (386) 238-3228. The hearing impaired may call TTY/TDD Florida Relay 711.

www.fhcp.com

Member Rights and Responsibilities

FHCP's Member Rights and Responsibilities are available for review on our website. Go to:

<https://www.fhcp.com/for-members/about-your-care/>

and click "Your Rights, Privacy, and Protection." Hard copies are available upon request by contacting Carol Cooper at (386) 615-4001.



FHCP Partners with Virta to help control Diabetes

FHCP has partnered with a vendor called Virta (<https://www.virtahealth.com/>) to offer an interactive telemedicine based intervention to help patients with Type II Diabetes achieve control or even remission.

What is Virta?

- A company dedicated to helping patients with T2 Diabetes achieve their goals through diet and lifestyle interventions
- Program is supported by a randomized clinical trial and multiple peer reviewed published papers
- Program is medically supervised by Virta physicians and Endocrinologists
- Program works through telephonic engagement and coaching of patients (Avg. x5 contacts daily) via a smartphone app and personalized Medical Nutrition Therapy (MNT)



Why is FHCP using Virta?

- Virta adds another tool to portfolio of interventions FHCP offers for T2 Diabetes
- Virta's compensation is tied to meaningful changes in outcomes
- Pilot results were promising, and FHCP is expanding the program

How will Virta impact my practice?

- Virta will contact you if your patient authorizes contact
- Virta provides progress notes and updates on deprescribing events
- Virta will supplement the care you already provide

How can I refer Patients into the Virta Program?

- Members qualify for participation in Virta if all the following criteria has been met
 - ◇ Patient has Type II Diabetes
 - ◇ Patient must have a smart device to use the Virta App
 - ◇ Hemoglobin A1C (HbA1c) greater than 8
 - ◇ Body Mass Index (BMI) greater than 30
 - ◇ Between the ages of 18 and 79
- FHCP Staff Providers may refer using the EHR system
- Contracted Provider may send referral to Central Referrals Department requesting Virta along with clinical documentation



Please direct any questions to Product Manager, Ron Barnard, Director of Analytics at rbarnard@fhcp.com

Click the link below to read a member's testimonial:

<https://www.virtahealth.com/blog/florida-health-care-plans-virta-reverse-diabetes-abbie-story>



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

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:

Continued on next page.

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>

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.

We encourage you to let our members know about this valuable service. For questions concerning this service, email Quality Management at QualityManagement@fhcp.com.



**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!

Florida Health Care Plans

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Hello,

Messages

Home Support

LOG OUT

MY QUICK LINKS

MY BENEFIT PLAN

MY PHARMACY

MY HEALTH

Good Afternoon,
How can we help you?

- [View My Benefit Coverage Details](#)
- [View My Medical Claims / EOBs](#)
- [View My Pharmacy Claims](#)
- [Request a Prescription Refill](#)
- [Request / Print My ID Card](#)
- [Welcome to Wellness](#)
- [FollowMyHealth® - Patient Portal](#)
- [Contact Us](#)

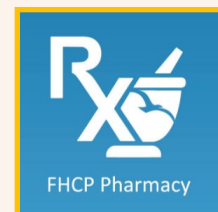
**WELCOME TO THE
FHCP MEMBER PORTAL**

Pharmacy News/Updates

The FHCP Pharmacy and Therapeutic Committee reviewed the following therapeutic classes of drugs at its last meeting held June 2nd 2020: analgesic & antipyretics, NSAID's, category 1-IV & chronic pain agents, opiate antagonists, anti-Convulsants, tricyclic & misc. antidepressants, MAOI's & OC agents, SSRI's & SNRI's, tranquilizers, ADD agents, benzodiazepines, misc. anxiolytics, misc. hypnotics, anti-manic agents, diabetic supplies, acidifying & alkalinizing agents, replacement solutions, diuretics, anti-gout agents, narcotic & non-narcotic antitussives and mucolytic agents. Listed below are the Additions and Deletions made to the FHCP Drug Formulary as a result of the P & T Committee.

Formulary Additions

Retevmo™ (selpercatinib) Medicare Part D formulary Tier 5 with a PA
Qinlock™ (riporetinib) Medicare Part D formulary Tier 5 with a PA
Koselugo (selumetinib) Medicare Part D formulary Tier 5 with a PA
Pemazyre™ (pemigatinib) Medicare Part D formulary Tier 5 with a PA
Trodelvy™ (sacituzumab govitecan-hziy) Medicare Part D formulary Tier 5 with a PA
Tukysa™ (tucatinib) Medicare Part D formulary Tier 5 with a PA
Jelmyto™ (mitomycin) Medicare Part D formulary Tier 5 with a PA
MenQuadfi™ (meningococcal [Groups A, C, Y, W] vaccine) – Medicare Part D formulary Tier 3
Tabrecta™ (capmatinib) Medicare Part D formulary Tier 5 with a PA

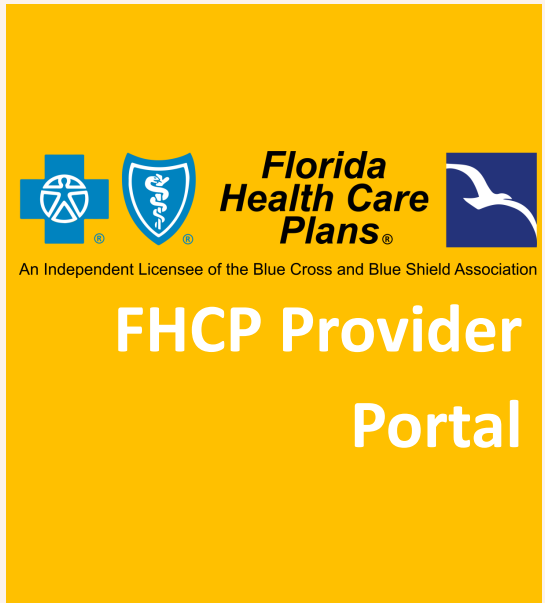
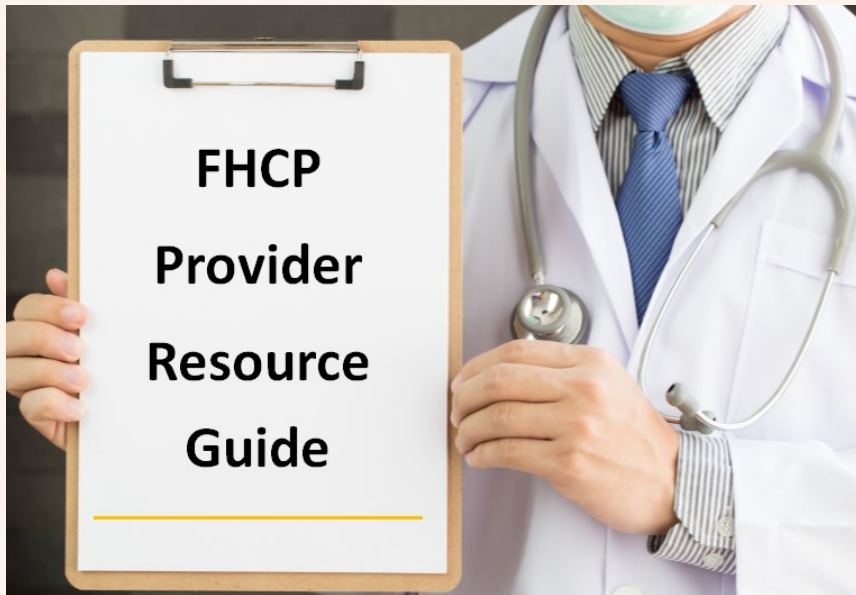


Ranitidine is removed from the US Market

An independent lab study reported to the FDA that ranitidine may be unstable and form levels of NDMA(N-nitrosodimethylamine) above the FDA daily intake limit of 96ng/day when it is exposed to higher temperatures (150F - 160F which can occur during transit/storage) or stored for prolonged periods of time. As a precautionary measure the FDA requested that all ranitidine be removed from market (including brand Zantac). Formulary alternatives include famotidine, lansoprazole, omeprazole, pantoprazole.



The Physician Drug Guide and Formulary is available on the Provider Portal. The most current FHCP formularies are available online at www.fhcp.com and can be printed upon request to FHCP Pharmacy Services, (386) 676-7173.



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 "Provider Education"

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

We highly recommend registering for the

FHCP Provider Portal

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



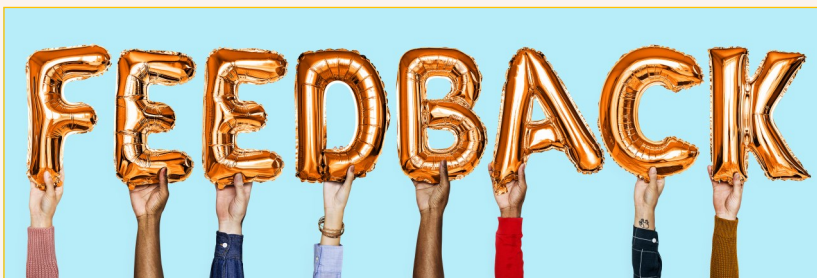
We Are Listening!



Each year, FHCP surveys its providers in an effort to gain insight as to how FHCP is performing from the provider perspective. In 2020, we surveyed 1692 Providers. A total of 399 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 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 2020 Provider Survey Executive Summary, supporting charts and data tables and can be reviewed by accessing the FHCP Provider Portal and on our website.



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PROVIDER SURVEYS AND PRACTICE CHANGES

The Center for Medicare Services (CMS) requires health plans to maintain accurate provider directories for their members. If health plans do not comply, they risk regulatory fines. Given these requirements from CMS and everyone's desire to increase overall customer satisfaction, FHCP has sent out a quarterly request asking practitioners to verify their current directory information and to notify us if there has been any change in your practice. We appreciate you taking the time to respond to the survey and ask that you contact us whenever you have a change related to practitioners, address, telephone numbers, panel status, or services offered. You can let us know by faxing us any such changes to (386) 481-5202 or via email at FHCPProviderRelations5@fhcp.com



Announcing Expansions & Changes of our New FHCP Facilities

FHCP Palm Bay Clinic

5151 Babcock Street NE, Palm Bay, FL 32905

Phone: 321-567-7760

Fax: 321-567-7761

Lab Fax: 321-567-7762



This facility will be a major hub consisting of the following services. Lab, Radiology, Ultrasound, PCP, Infusion, Sales and Pharmacy. The project will be completed the end of the 3rd quarter. Our newest facility is slated to open on December 1, 2020, providing “one-stop shopping” for our members.

FHCP Daytona Beach Behavioral Health

330 N. Clyde Morris Blvd., Daytona Beach, FL

This is the last project of the Behavior Health expansion. The offices will be in Suite 10 (previously occupied by Orthopedics/Sports Medicine). Construction is nearing completion, with an expected occupancy scheduled mid- 4th quarter. The finishes are soothing, and the furniture has been carefully selected to compliment the finishes creating a calming environment.

FHCP Titusville

1021 S. Washington, Titusville, 32796

****Phone & Fax have not yet been established for this PCP office**

This will be a mini-hub, consisting of a PCP practice that share the same building with the Titusville Pharmacy, providing added convenience for our members. The project is expected to get underway in the next few weeks and will be completed late 4th quarter.

COVID–19 Resources/Updates

For the most reliable and current information available, use the links for key updates from the CDC and Florida Department of Health:

- [CDC COVID-19 homepage](#)
- [CDC Information for healthcare professionals](#)
- [CDC Testing](#)
- [CDC Resources for healthcare facilities](#)
- [Florida Department of Health Guidance for Health Care Providers](#)



Happy Holidays

*AND A
Joyful New
Year!*



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