



**Florida
Health Care
Plans**



An Independent Licensee of the Blue Cross and Blue Shield Association

Provider Networks

Florida Health Care Plans (FHCP) provider networks include hospitals, primary care physicians, specialists, urgent care centers, imaging centers, laboratories, home health agencies, pharmacies, and many other services and health care providers. Our directories, both online and paper, are important resources to help you find any type of health care provider who participates in your specific health insurance plan.

FHCP considers a number of factors when selecting providers to participate in our provider networks:

Availability of Provider

FHCP works to ensure we have the right number of network health care providers in the right locations for our members. At least once per year we review our networks by looking at the location of our network health care providers compared to where our members live. We also look at the number of health care providers compared to the number of members to ensure we have enough providers available. Primary care physicians, hospitals, urgent care centers, and the most commonly used specialists, including behavioral health specialists, are included in this review.

Access to Provider

FHCP also considers standards for access to care such as guidelines issued by the Center for Medicare and Medicaid Service (CMS) and any state regulations related to health care provider networks related to timeliness of appointment and other factors. In addition to monitoring member complaints regarding access to providers, FHCP also reviews access to primary care physicians and behavioral health specialists on an annual basis. If we determine that members do not have appropriate access to health care providers to meet our members' needs in a timely manner, we work to add more providers to the network. Doctors and other health care practitioners selected for FHCP's network go through a thorough credentialing process. The credentialing process is a way to verify the qualifications of doctors and other health care providers. The process includes checking education and training, licensure, board certification, malpractice claims history, and other background information that applies to the provider's specialty. Doctors are reevaluated at least every three years. Providers in our Medicare Directory must also be participating in good standing with Medicare.

Quality

FHCP considers other efficiency, effectiveness, and outcomes measurements when enough information is available about a doctor. For example, how primary care physicians perform on nationally recognized measurements such as Healthcare Effectiveness Data Information Set (HEDIS) and whether patients receive appropriate health screenings for breast cancer, colorectal cancer, cervical cancer, etc.

FHCP currently does not utilize any specific quality measures other than credentialing standards to evaluate doctors and hospitals participating in our networks.

Cost

In order to participate in FHCP's network, health care providers and hospitals must be willing to agree to a negotiated rate. These negotiated rates are one advantage of having health insurance because you usually pay less for the services you receive when you visit a health care provider in FHCP's network. In some cases, FHCP looks for health care providers who are willing to agree to reimbursement arrangements that reward them for meeting certain performance standards or outcome metrics for their patients.

FHCP currently does not utilize any other cost measures to evaluate doctors or hospitals participating in our networks.

Patient Experience

FHCP makes a priority of contracting with doctors who have admitting privileges at our participating network hospitals. This means the doctor has a relationship with the hospital and is allowed to admit patients there. This helps members go to a hospital that is in their network when hospitalization is needed. If you use a hospital for non-emergency care that is not in FHCP's network, FHCP may pay less or may not pay for the services you receive. FHCP also considers member complaints received about specific doctors, hospitals, and other health care providers when deciding whether to continue a provider's contract with our network. FHCP regularly conducts surveys regarding patient experience with primary care and specialty doctors who participate in our network.

FHCP currently does not utilize any other patient experience measures to evaluate doctors or hospitals participating in our networks.