



**December
2009**

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Better Network. Better News.

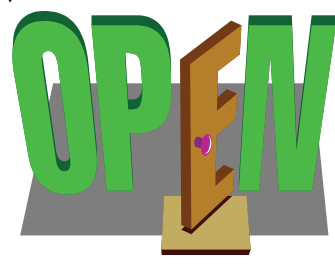
By First Coast Advantage

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UF Radiology at Emerson Now Open to FCA Patients

Effective October 2009, UF Radiology at Emerson Now Open to FCA Patients. The University of Florida and Shands Jacksonville Executive Management has approved referrals of FCA Members to Emerson for Ad-



vanced Breast Imaging services only. The Imaging Team is working on various strategies to build volume at Emerson, and this becomes part of their growth strategy.

Please remember that Advanced Breast Imaging Services is also available at Shands Jacksonville Clinical Center. FCA patients can have services at both locations. For questions, please contact FCA Provider Services at 1-866-270-2468.

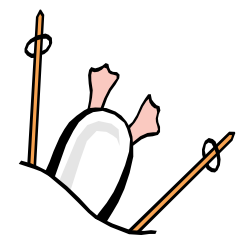


FCA Quick Reference Guide Updated on Website

Effective October 1, 2009 the First Coast Advantage (FCA) Quick Reference Guide has been updated on the FCA website with the Following changes:

- The telephone number for Division of Children and Families (DCF) has been changed to 1-866-762-2237.
- Marketing telephone number and information has been removed from the Quick Reference Guide.
- FCA no longer has a marketing department.

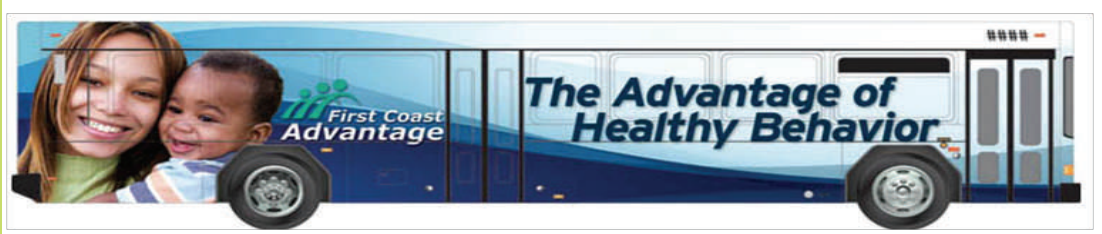
For questions please contact FCA Provider Services at :
1-866-270-2468.



New Non-Emergency Transportation Vendor

Effective November 1, 2009, First Coast Advantage has a New Non-Emergency Transportation Vendor, TMS Management Group. The Transportation telephone number 1-866-294-6611 and services will not change. However, FCA has changed the notification timeframe from 24 hours to 72 hours (3-days notice). FCA covers non-emergency transportation services for medical, vision and dental visits.

For more information on scheduling non-emergency transportation services please contact TMS Management Group at the number listed above.



We're on the WEB!

www.firstcoastadvantage.com

Administrative Office:
904-244-9016
Provider Services:
1-866-270-2468



Vaccine for Children (VFC) link on FCA Website

VFC helps families of children who may not otherwise have access to vaccines by providing free vaccines to doctors who serve them. VFC is administered at the national level by the CDC contracts with vaccine manufacturers to buy vaccines at reduced rates.

For more information on Vaccine for Children Program please click on the following links:

<http://www.immunizeflorida.org/vfc/manual.htm>

<http://www.immunizeflorida.org/index.html>

CMS State Medicaid Letter Regarding H1N1 Vaccine

CMS – Centers for Medicare and Medicaid Services Revised their October 12, 2009, Letter regarding H1N1 Vaccine is now posted on the FCA Website at www.firstcoastadvantage.com.

The revised letter covers the following topics:

- Vaccination Funding and Vaccine Administration
- Presumptive Eligibility
- Beneficiaries with Suspected or Confirmed 2009 H1N1 Influenza
- Provisions for Beneficiaries Receiving Services Through Managed Care Entities
- People Receiving Home and Community-Based Waiver Services and State Plan Services
- Health Care Workforce Planning
- Administrative Funding for Activities Related to Education and Outreach
- Emergency Medical Services Under Section 1903(v) of the Social Security Act

To read the complete letter, go to FCA's website and select Service Alert / Medicaid Policies /10-2009 CMS State Medicaid Letter for H1N1 Vaccine.



(FCA) Lab Draw Station Flyer Updated On Website

First Coast Advantage (FCA) has updated the Lab Draw Station Flyer for provider convenience. FCA has a total of four draw stations in Duval and Clay Counties: Southside, Beaches, Orange Park and Shands Jacksonville.

The flyer has been placed on the FCA website under Provider Information / FCA Lab Draw Station Flyer. If a provider needs their clinic setup for pick ups or lab supplies, you can contact Susan Depalma at 244-5499.

Provider Alert for H1N1 Vaccine

December 2009

Florida Medicaid has sent out a Health Care Alert & Provider Alert Message regarding their H1N1 Vaccine policy. See Florida Medicaid Provider Service Alert on the FCA website under Service Alerts at: www.firstcoastadvantage.com

For questions, please contact FCA Provider Services at 1-866-270-2468.

(AHCA) Announces Policy on H1N1 Vaccinations

The Department of Health and the Agency for Health Care Administration would like to alert all Florida Medicaid providers and recipients that the H1N1 Swine Flu vaccine will be provided free of charge once it becomes available.

Distribution of the vaccine to County Health Departments and providers is expected to start in mid-October and will continue on a weekly basis. Florida will be following CDC guidance by vaccinating our most vulnerable population first.

Florida Medicaid will follow its standard vaccine policy for reimbursing providers who submit claims for the administration of the shot to children under the age of 21. No reimbursement for flu shot administration is payable to providers for Medicaid recipients age 21 and older. Medicaid patients can also receive the H1N1 Swine Flu shot at their County Health Department.



Florida Medicaid Reimbursement of H1N1 Virus

Florida Medicaid is going to reimburse for the administration of the H1N1 vaccine. It will pay at the current Medicaid rates paid for other vaccines provided by the Federal Government that are administered in the physician reimbursement guide (\$8.00 for ARNP and \$10.00 for physician).

For details on this policy, please be on the look-out for the Provider Alert/Bulletin that will be sent out in the near future.



Medicaid Well-Child Visit Collaborative Performance Project - Summer 2009 Bulletin

Medicaid Fiscal Agent (EDS) System Denial for Hospitals/Facilities

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Florida health maintenance organizations and provider service networks have been working together to increase well-child visits for children during the first 15 months of life. The plans are working with Health Service Advisory Group, Inc. (HSAG), Florida's External Quality Review Organization (EQRO) for the Florida Medicaid managed care program.

The collaborative effort began in June 2007, with an agreement to focus efforts on this topic in order to improve quality outcomes. Baseline data was collected for calendar year 2006 for non-reform plans, and calendar year 2007 for pilot reform plans, with annual re-measurements to occur at least twice.



The goal is to increase the percent of children who receive six or more well-child visits with a primary care provider by the age of 15 months. National HEDIS* defined measures for a well-child visit address the provision of a history (both physical and developmental), a physical examination, and anticipatory guidance/health education at each visit.

All Child Health Check-Up (CHCUP) providers must adhere to CHCUP policy requiring face-to-face visits that also include a nutritional and developmental assessment, a dental screening, a vision and hearing screening, immunizations and lab work (e.g., blood lead testing), etc. These components are described further in Florida's Child Health Check-Up Coverage and Limitations (CHCUP) Handbook.

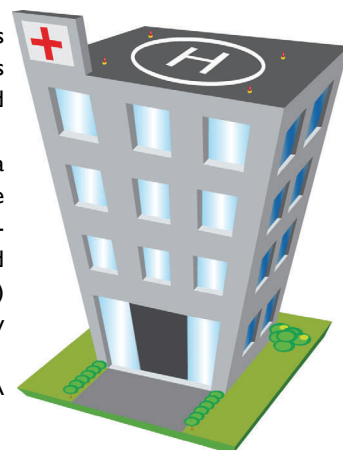
Plans are identifying these visits through billing codes or through medical record review. Providers must document all components of a CHCUP and appropriately bill using CPT codes 99381, 99382, 99391, 99392, or newborn codes. Services provided should be clearly documented, either through the use of a pre-printed form or a progress note.

The CHCUP tracking forms work well for documentation and can be found in the CHCUP Handbook at: <http://mymedicaid-florida.com>, choose Public Information for Providers, Provider Support, then Provider Handbooks, and select the Child Health Check-Up Handbook. For additional information on Florida's external quality review initiatives for managed health care, which also impact all prepaid mental health plans and nursing home diversion plans, visit HSAG's website at: www.MyFloridaEQRO.com.

EDS system denials for facility claims are not being reprocessed. Providers were originally told that EDS would reprocess the claims.

Providers will have to resubmit as a new claim up to 12 months from date of denial. Per AHCA, claims submitted for the 0142 denial (calculated stays does not equal # of days billed) will need to be resubmitted as new claims.

For questions please contact FCA Provider Services at 1-866-270-2468.



FLMMIS Link Added to First Coast Advantage Website

In an effort to make it easier for providers to access the FLMMIS website to view Medicaid Eligibility, FCA has added the FMMIS link to the

FCA Website at:

www.firstcoastadvantage.com under Links.

For questions please contact FCA Provider Services at 1-866-270-2468.



Provider Update Request Form On Website

FCA Provider Update Request Form is now available on the FCA Website under Provider Information / Forms.

If a Provider is updating any information regarding his practice, clinic or adding a new provider, this form would need to be completed and sent to FCA.

Please complete a separate request for each provider in your organization and fax form to 904-244-9409 or email it to davina.butler@jax.ufl.edu. For questions please contact Davina Butler Network Operations Specialist at (904) 244-9717.



We're on the WEB!

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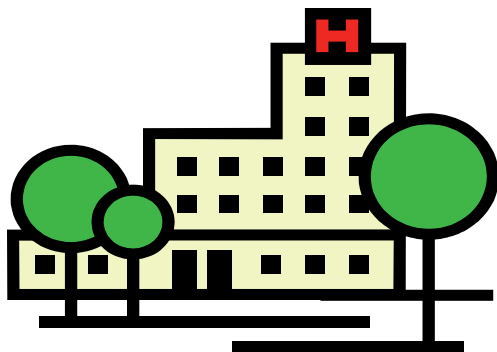
www.firstcoastadvantage.com



First Coast Advantage (FCA) Inpatient Authorization Process for Participating Hospitals Now on FCA Website

FCA's has posted the STAT and/or Normal Inpatient Authorization Process on the website. This process can be found at www.firstcoastadvantage.com **Pre-Authorization / Medical Information**. The Process is as follows:

- FCA receives a daily census from participating hospitals i.e. Baptist and/or Wolfson's and Shands Jacksonville.
- After receipt of the census and a copy of the hospital face sheet from the admitting hospital, FCA will load the authorization number into our TPA's webportal system (APEX Benefit Services) for patients who were admitted.
- FCA's In-patient Case Manager will follow the patient once they are admitted for concurrent review.
- The authorization will be available to view on the FCA webportal 72 hours after FCA receives the hospital census.
- Example: If patient admitted 11/01/09, the census and face sheet is faxed to FCA 11/02/09.
- 72 hours after 11/02/09, which would be 11/05/09, the authorization will appear on the FCA webportal.



In order to view the authorization, staff must have access to the FCA webportal at www.firstcoastadvantage.com under **FCA On-Line Status**. If staff does not have access to the FCA Webportal, they can obtain an FCA On-Line Access Status Form at www.firstcoastadvantage.com under **Provider Information / Forms**. The form is an interactive form and can be completed on the computer. Your password will be sent to you within 24 hours of the request.

Admission into a non-par hospital requires a pre-authorization from FCA prior to admission and the pre-authorization form must be completed and faxed to FCA at (904) 244-9744. For questions, call FCA Provider Relations at 244-9174.

FCA Interested Provider Page Updated on Website

FCA has updated the Interested Provider page, informing providers that if they are interested in participating with First Coast Advantage, that some of the requirements has been placed on the website.

Providers can complete the Interested Provider Questionnaire (IPQ) on-line. The form is an interactive form and can be completed on the computer.

All interested providers must ensure their Medicaid Information is current with EDS/Medicaid prior to submission of questionnaire. Verification must be completed within 6 months of Interested Provider Questionnaire submission. Please call 1-800-289-7799 and select your language when prompted then press option 4 for Provider Enrollment.

If information is not verified with Medicaid the questionnaire is subject to rejection. For questions, call the FCA Contract Manager at (904)244-9255.

2008 Performance Measures Data for Reform Counties Now on FCA Website

AHCA has released the 2008 Performance Measures Data for reform counties. These Performance Measures identify if the reform plans are meeting the standards identified by the State. To view all reform plans and how they rate you can log on to the FCA website at www.firstcoastadvantage.com under **links**.

For more information on the 2008 Performance Measures data you can contact Florida Medicaid Quality in Managed Care at quality-inmc@ahca.myflorida.com.

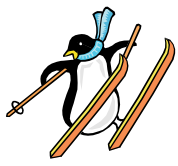
Florida Medicaid EDI Agreement and Electronic Funds Transfer Authorization Forms Now on FCA Website

Medicaid EDI Agreement (Enrollment Form) and Electronic Funds Transfer form is now on the FCA website at www.firstcoastadvantage.com.

The EDI Agreement form is for providers to enroll into Florida Medicaid. The Electronic Funds Transfer form is for providers to have their funds automatically transfer into their bank account instead of having a paper check sent to them. For more information regarding these funds please contact your local EDS representative.

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Critical Reminder to Child Health Check-Up (CHCUP) Providers in Medicaid Summer 2009 Bulletin

December
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“As licensed health care professionals, you are aware that performing a blood test for lead is a federal requirement at specific intervals during the “Child Health Check-Up.” This note is to remind you how important it is to document the blood tests you are performing in compliance with this federal mandate. Failure to provide documentation can lead to a federal audit and the requirement to repay Medicaid for fees received.

The federal regulation as referenced in the Child Health Check-Up Coverage and Limitations Handbook, October 2003, pages 2-13 and 2-14; and page 3-6, requires that all Medicaid children receive a screening blood lead test at 12 months and 24 months of age, and between the ages of 36 months and 72 months of age if they have not been previously screened for lead poisoning.* The procedure code for blood lead testing is 83655. The Child Health Check-Up Coverage and Limitations Handbook can be accessed by visiting <http://mymedicaid-florida.com>; click on Public Information for Providers, Provider Support, then Provider Handbooks, and select the Child Health Check-Up Handbook.

*The Florida Department of Health has announced the publication of the Childhood Lead Poisoning Screening and Case Management Guide. The guide provides valuable updated information for health care providers about childhood blood lead screening and case management requirements. The guide is available by calling 850-245-4444 x2694 or via the Web at: <http://www.doh.state.fl.us/Environment/community/lead/pdfs/ChildhoodLeadPoisoningScreeningandCaseManagementGuide.pdf>.

Please also note:

CHCUP providers may only bill for one visit, per Medicaid child, per provider, per day. The visit may be a CHCUP visit or a sick visit. Provider discretion in evaluating the degree of illness should determine if a Child Health Check-Up should be performed. This policy is explained in the Child Health Check-Up Coverage and Limitations Handbook, October 2003, page 2-3. Medicaid may recoup overpayments if medical record audits indicate that a provider has been reimbursed for a CHCUP and a sick visit on the same day, for the same child. A CHCUP referral code is required on the claim form in order to be reimbursed for a Child Health Check-Up.

It is critical that the federally required referral code be appropriate for the diagnosis code on Child Health Check-Ups. For example, a diagnosis code of V20.2 (routine infant or child health check) would be appropriate with a referral code of “U” or “NU” (complete normal/no referral). A diagnosis code of V20.2 (routine infant or child health check) is not appropriate with a referral code of “T” or “ST” (abnormal, patient referred). For the required referral codes see page 3-4 of the Child Health Check-Up Coverage and Limitations Handbook, October 2003. CHCUP providers are responsible for referrals and follow-up on a Medicaid child as a result of a CHCUP. This is referenced in the Child Health Check-Up Coverage and Limitations Handbook, October 2003, page 2-2.

Dental referrals are required beginning at 3 years of age; earlier as medically indicated. CHCUP providers must refer Medicaid children who are 3 years old and older for an assessment by a dentist and document this referral in the child’s medical record. The provider may refer a younger child if it is medically necessary. Following the initial dental referral, subsequent visits to a dentist are recommended every 6 months, or more frequently as prescribed by a dentist or other authorized provider. If a dental provider is not available, providers should notify the local Medicaid area office that the child needs a dental visit and still complete the referral.”

Florida Medicaid Inappropriate Denials for Provider Type (s): 10, 11, 12 and 15 Billing Requirements

(FCA) Policies and Procedures Now on Website

In an effort to limit inappropriate denials for other provider types that may bill for a recipient, please assist with the following billing requirement. Actual Dates of Service Must be Included at the Line Item to Ensure Proper Payment

For electronically submitted claims, Nursing Homes must report actual dates of service at the line level when submitting room and board (rev code 101) and Hospital Bed Hold (rev code 185) dates on the same claim.

Failure to use specific dates for bed hold days may cause other provider’s claims to deny inappropriately.

FCA is required by AHCA (Agency for Healthcare Administration) to provide certain policies and procedures for our contracted providers upon written or oral request.

For easy reference, we have posted some of the policies on the FCA Website under Provider Information at www.firstcoastadvantage.com.

FCA will provide written notice, which may be via electronic transmission or by mail, of material changes to these policies.

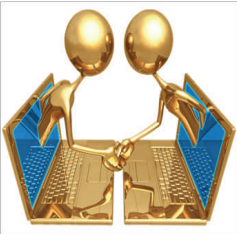
If anyone has any questions regarding these policies you can contact Provider Relations at 904-244-9174.



Florida Medicaid Alert - DCF Provider View Link Now Available

Providers can now access Medicaid Beneficiary coverage information on-line through the Department of Children and Families (DCF) Provider View application. This application provides a link to the DCF My ACCESS Account System where providers can search and view Medicaid recipient coverage information.

The new link Provider View (Check Information about Medicaid Benefits) allows you to:



- View current benefits
- View the date benefits will be available
- See when the next review is due
- See when an appointment is scheduled
- View Medicaid account history
- View a list of verification needed
- View Person Identification number (PIN)

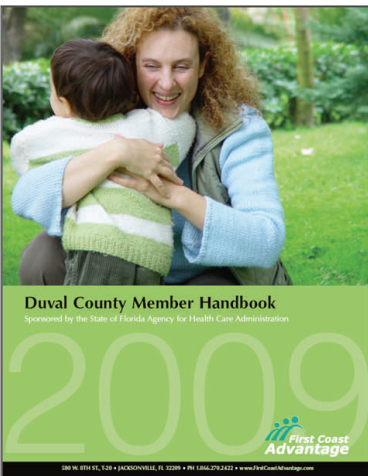
To gain access to the DCF Provider View please contact your local EDS Representative. For more information, you may view and download the DCF Provider View System Guide at

<http://www.dcf.state.fl.us/ess/docs/MYACCESSAccountProviderView.pdf>

First Coast Advantage (FCA) Member Handbook Updated

The First Coast Advantage Member Handbook has been updated for 2009/2010. Some of the changes are as follows:

- Page 6 – Addition of Pharmacy Benefit Information phone number 1-866-270-2468 on Member ID Card
- Page 6 – Addition of FCA Website on Member ID Card
- Page 35 – Covered Services under Inpatient Hospital Services - Removal of 20 Additional Hospital Inpatient days as an Expanded Benefit
- Page 35 – Covered Services under Outpatient Hospital Services - Removal of \$3,500/yr Additional Hospital Outpatient dollars as an Expanded Benefit



The Member Handbook is located under Member Information on the FCA Website at www.firstcoastadvantage.com.

If anyone has any questions regarding this information you can contact the Member Service line at 1-866-270-2422.

2009/2010 Cultural Competency Plan (CCP) On Website

The FCA 2009/2010 full Cultural Competency Plan (CCP) has been updated and is now posted on the FCA website under Provider Information and should be reviewed by Providers on an annual basis. Providers please complete the last page of the plan and fax to the FCA Administrative offices at (904)244-9409 for inclusion in your provider file.

The FCA Provider Manual includes a summary of the Cultural Competency Plan (CCP). The purpose of Cultural Competency Plan is to ensure First Coast Advantage meets the diverse needs of all its members in the delivery of services to all segments of our population.

This is achieved by developing and promoting the necessary skills and practices to ensure that healthcare services are delivered in a culturally competent and sensitive manner.

First Coast Advantage (FCA) NPI Service Alert

Florida Medicaid has posted a notice on the Known Issues list on the EDS website. The notice is listed as issue #216. It states:

“As your organization works through any issues related to NPI (for example, claims that fail for EOB edit 1000) – you continue to have the option to submit “Medicaid Provider ID” identifiers. This is an interim measure to avoid negatively impacting your organizations claim processing as you transition to use of the NPI. Once NPI issues are resolved, it is advised that you transition fully to use of the NPI for claim processing.”

What this means for First Coast Advantage Providers is that if you know your NPI is registered with the State and you are **not** receiving any claim edits “1000” on your weekly EDS remits then you should submit your claims with NPI only.

It is best to test now while you still have the opportunity to re-submit with NPI and the “Medicaid Provider ID” identifiers until the NPI issues are resolve.

Please remember that First Coast Advantage requires NPI on all claims submissions. Claims submitted to First Coast Advantage without an NPI will be rejected back to the provider.

For information on frequently asked questions and a quick reference for NPI EDI submission, please visit the FCA website: http://www.firstcoastadvantage.com/Claims/Claims_info.asp

Please feel free to contact Debbie Shelton (904) 244-1836 or Veronica Walton at (904)-244-9255 should you have any questions.



(FCA) Behavioral Health Necessity Criteria Posted on Website

First Coast Advantage (FCA) Behavioral Health Necessity criteria are based upon the protocols of The American Academy of Child and Adolescent Psychiatry, American Psychiatric Association, and the American Society of Addiction Medicine. Criteria are based on a symptomatic phenomenological perception of psychiatric illness and not purely on specific diagnoses.

This criteria is now posted on the FCA website at www.firstcoastadvantage.com under Provider Information and under Pre-authorization.

For questions, please contact FCA Behavioral Health Coordinator at 244-9780.

First Coast Advantage (FCA) Advance Directive Forms Now Available in Member Handbook and on FCA Website

All adults in healthcare facilities, such as hospitals, nursing homes, hospice, home health agencies and health maintenance organizations, have certain rights under Florida law. Every competent adult has the right to make decisions concerning his or her own health, including the right to choose or refuse medical treatment.



An advance directive is a written or oral statement that is made and witnessed in advance of serious illness or injury. It tells others how the Member wants their healthcare (including mental health) decisions made when they are not able to make decisions for themselves.

A Living Will form will generally state the kind of healthcare a Member wants or does not want if they become unable

to make their own decisions.

A Healthcare Surrogate Designation form is a signed dated and witnessed paper naming another person—such as the Members husband, wife, daughter, son or close friend—as their agent.

FCA will provide the policy and procedure for advance directives to all Members' age 18 and older, by including the policy in every new Member packet and via the FCA website at www.firstcoastadvantage.com

FCA Provider Manual, Pre-Authorization List and Covered Services Documents Updated on FCA Website

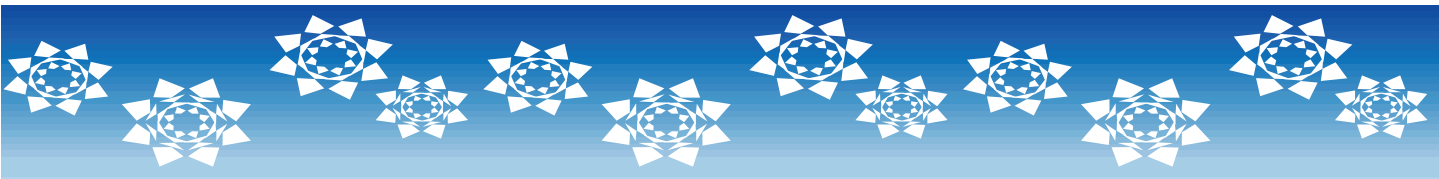
The following documents have been updated:

- Section 17 (PM) - Utilization Management Updated with Pre-authorization List referencing Behavioral Health Tier System. Behavioral Health Services Authorization requirements are based on Tier System.
- Section 9-A (PM) - Functional Assessment: The Age range for CFARS was changed from 18 or younger to ages 7 – 17.
- Section 9-I (PM) - Behavioral Health - Utilization Management: Now includes language that Services are authorized based on the Tier System. This process was introduced August 1, 2008.
- Section 9-G (PM) - Behavioral Health Quality Management Improvement: QI Requirements: In determining if behavioral health services are acceptable according to current treatment standards, the FCA QI department will perform an annual medical records review of ten percent (10%) or seventy-five (75) medical records, whichever is less, of Members who receive behavioral health services during the State Fiscal year (July through June).
- Section 7 (PM) - Covered Services – Behavioral Health Updated.

The Provider Manual and Covered Services Documents have been updated to reflect changes in Inpatient and Outpatient Hospital Services for FCA from 2007/2008 Benefits.

- Outpatient Hospital Services for Adult recipients, 21 years of age and older, are limited to \$1,500 entitlement per fiscal year for outpatient hospital services, excluding certain medical and surgical procedures, dialysis services and chemotherapy services.
- There are some provider services that are exempt from the \$1,500 Cap. Please refer to the Medicaid Hospital Services Coverage and Limitations Handbook, page 2-14 for information on the revenue codes and procedure codes that are exempt from the \$1,500 outpatient services cap.
- Inpatient Hospital Services covers a maximum of 45 inpatient days for the period of July 1 through June 30th.
- Section 17 (PM) - Utilization Management of the Provider Manual and Covered Services document located on the FCA website has been updated with the Pre-authorization List referencing Podiatry and Chiropractic Services. Podiatry and Chiropractic services will no longer require an authorization. These services allow for 24 visits per calendar year. The 25th visit for Podiatry and Chiropractic services will be denied for benefits exhausted.

The Provider Manual is located under Provider Information of the FCA Website at www.firstcoastadvantage.com. If anyone has any questions regarding this information you can contact Provider Service line at 1-866-270-2468.





First Coast Advantage (FCA) Cervical Cancer Screening Guidelines Using HEDIS National Standards Performance Measures

First Coast Advantage (FCA) would like to make our providers aware of the national standards for Cervical Cancer Screening. FCA follows the guidelines of the Healthcare Effectiveness and Data Information Sets (HEDIS). These are the most widely used sets of health care performance measures in the United States. HEDIS measures are developed and maintained using the National Committee for Quality Assurance (NCQA) standards.

In accordance with these guidelines, women 21-64 years of age should receive a minimum of one Pap test every 3 years to screen for cervical cancer. Women who have had a hysterectomy with no residual cervix are excluded from the screening. Only 45.9% of FCA women members 21-64 years of age have had a Pap screen with an FCA provider within the past three years. This rate is at the 10th percentile nationally. In Florida, FCA ranked 8th out of 12 Medicaid reform health plans. To improve the rate of this important women's preventative health screen, FCA is implementing a corrective action plan approved by AHCA.



FCA is a relatively new plan that has tripled its membership in the past two years. Hence, very few women 21-64 years of age have been members of FCA for a full 3 years. For this reason, FCA is at a disadvantage compared to other more established Health Plans in which women more frequently will have a full three year claims history that would maximize the reporting of a Pap screen.

FCA would like to stress the importance of scheduling a routine Pap smear for all women 21-64 years of age. Specifically,

FCA is asking our providers to assess whether each woman between the ages of 21-64 has had a Pap screen performed since becoming an FCA member. FCA recommends that a Pap screen is ordered for an eligible woman if (1) no screen has been obtained since FCA enrollment or (2) no screen has been obtained in the past 3 years in women who have been FCA members since December 2006.

Thank you for helping First Coast Advantage provide quality care to our members.

FCA Service Alert — Pre-Authorization Requirements for Oral Maxillofacial Surgery (OMFS)

On November 4, 2009, FCA sent out a Service Alert regarding pre-authorization requirements for Oral Maxillofacial Surgery (OMFS). The following procedures should be followed for a pre-authorization request to Oral Maxillofacial Surgery (OMFS):

- When requesting prior authorization **from FCA** to OMFS, the FCA authorization form should be completed in its entirety.
 - No line should be left blank.
 - If information not required, N/A should be written on the line.
 - If the pre-authorization form is sent to FCA with a blank line it will be returned to the requesting provider.
- A pre-authorization request for OMFS with a diagnosis of dental caries and/or with extractions should include a work up by a general dentist and this documentation must be submitted to FCA along with the pre-authorization request (this includes clinicals).
- If a Dentist determines that restorative treatment is not an option and does in fact need to be seen by an Oral Surgeon a pre-authorization must be obtained **from FCA**.
- Once an **FCA** pre-authorization is obtained it will be processed, if all supporting documentation is provided, within 72 hours of the request. The authorization will be posted on the FCA Webportal.
- If you do not have access to the FCA Webportal, you can obtain an FCA On-Line Access Status Form at www.firstcoastadvantage.com under Provider Information / Forms.
- The form is an interactive form and can be completed on the computer. Your password will be sent to you within 24 hours of the request.

Any MCNA pre-authorization received by OMFS for services will be returned to the requesting provider for an authorization from FCA. For questions, call FCA Provider Relations at 244-9174.

FCA Website Under Pre- Authorization — No Auth Required for Medicare Primary

The FCA website has been updated under Pre-authorization stating that no authorization is required when Medicare is primary.

For questions, call FCA Member Services at 1-866-270-2422.



Postpartum Care Guidelines Using HEDIS Performance Measures

First Coast Advantage (FCA) would like to make providers aware of the national standards for the Postpartum Care Visit. FCA follows the guidelines of the Healthcare Effectiveness and Data Information Sets (HEDIS); which is the most widely used set of health care performance measures in the US.

It is developed and maintained by the National Committee for Quality Assurance (NCQA) standards. In accordance with these guidelines, the Postpartum Care Visit should be conducted between 21 and 56 days after delivery. Even if the member is seen prior to 21 days due to complications or cesarean staple removal an additional postpartum visit must be scheduled between the 21 and 56 days to remain compliant with the HEDIS recommendations.

FCA rate for this measure decreased in 2008. FCA scored in the 10th percentile nationally. FCA is under a corrective action plan sanctioned by AHCA for this Postpartum Care Visit measure. During the chart review, FCA conducted in Spring 2009, FCA found that the majority of postpartum visits for our members were conducted around 7 to 14 days following delivery and therefore FCA was not able to count these visits in our measure.

FCA would like to stress the importance of scheduling the Postpartum Care Visit between 21 and 56 days following delivery. Thank you for helping First Coast Advantage to provide quality care to our members.

FCA Behavioral Health Additional Services and Case Management Forms Now on Website

FCA has posted the Behavioral Health Additional Services form on the FCA website under Pre-authorizations. The Case Management form name has been changed to Behavioral Health Additional Case Management Form.

For questions, regarding these two forms please contact FCA Behavioral Health Coordinator at 244-9780.

Agency for HealthCare Administration (AHCA) Area 4 Contact Information Now on FCA Website

AHCA Area 4 contact information is now on the FCA website under **Links**. Area 4 covers the following counties:

- Baker
- Clay
- Duval
- Flagler
- Nassau
- St. Johns
- Volusia Counties

For more information on Area 4 you can e-mail them at:

Area4MedicaidHelp@ahca.myflorida.com



First Coast Advantage New Providers...

Primary Care Providers

Mina, Betty M., M.D.
Valenzuela, Maria V., M.D.
White, Susan H., M.D.
Egbujor, Rachel, M.D.
Gabertan, Bonifacio T., M.D.
Ray, Mary E., D.O.
Carbonell, Melchor M., M.D.
Lavina, Zenaída L., M.D.
Khalvati, Nooshazar, M.D.
Barrett, Harold E., D.O.
Lavina, Zenaída L., M.D.
Samuel, Eric B., M.D.

Betty M. Mina, MD
Children's Health Associates
Children's Medical Group
Family Care Partners - Arlington
Family Care Partners - Arlington
Family Medical Centers
Jax Heights Medical Service
Middleburg Pediatrics
Nooshazar Khalvati, MD
Physicians Group Services, PA
South Jax Family Health DCHD
West Jax Family Health DCHD

Pediatrics
Pediatrics
Pediatrics
Pediatrics
Pediatrics
Family Practice
Family Practice
Pediatrics
Pediatrics
Family Practice
Pediatrics
Family Practice

Behavioral Health Providers

Truog, Kaurie Ann M.D.
Broderick, Jill Erin, LMHC
Wright, Colleen Hill, LMHC
Children's, Home Society
Cooper, Constance, LCSW
Cancilla, Wendi-Jo, LMHC
Paul, Sivanta R.J., M.D.
Desai, Chirag V., M.D.
Farooque, Mohammad, M.D.

Child Guidance Center
Child Guidance Center
Child Guidance Center
Children's Home Society of Florida
Jewish Family & Community Svcs.
Mental Health Resource Center
Sivanta J Paul MD PA
UF Psychiatry Center
UF Psychiatry Center

Psychiatry
Counselor Mental Health
Counselor Mental Health
Other Physician Specialty
Social Worker
Counselor - Mental Health
Child & Adolescent Psychiatry
Psychiatry
Psychiatry



First Coast Advantage New Providers...

December
2009

Dental

Conlon, Dennis D.D.S.
Mertz, Kenneth, D.M.D.

Central Dental Clinic
Happy Tooth Express

Dental
Dental

Specialist Providers

Doctor, Zeboye A., DC
Fisher, Floren F., ARNP
Guzman, Nilmarie, M.D.
Johns, Jeffery S., M.D.
Schain, Denise Constance, M.D.
Aure, Shaun F., M.D.
Brijendra, Gupta K., M.D.
DePaiva, Helder, M.D.
Jayadevappa, Dinesh E., M.D.
Nahar, Nilay, M.D.
Stapleton, Gary Edward, M.D.
Kancha, Koteswari, M.D.
Mansur, Kadir M.D.
Guzman, Nilmarie, M.D.
DeFlorio, Robert M., M.D.
Ortner, Stephanie L., M.D.
Naseri, Iman, M.D.
Yoon, Amy K., AuD
Hiemenz, John W., M.D.
Brinkis, Edmund Z., M.D.
Russo, Louis S., M.D.
Brinkis, Edmund Z., M.D.
Goldman, Zachary A., M.D.
Luten, Robert C., M.D.
Topp, Stephen S., M.D.
Westenbarger, Richard L., M.D.
Radhakrishnan, Ravi, M.D.
Zaiden, Jr., Robert A., M.D.
Guzman, Nilmarie, M.D.
Sakhamuri, Haritha, M.D.
Toronczyk, Karen V., M.D.
Heger, Ian M., M.D.
Johnson, Nancy Jill, ARNP
Pappa, Chrysoula, M.D.
Naseri, Iman, M.D.
Mandia, Stephen E., M.D.

A-Z Gonstead Chiropractor
Bvld. Comprehensive Care Center DCHD
Bvld. Comprehensive Care DCHD
Brooks Rehab Center Southside
Cardiovascular Center at Shands
Clinic for Kidney Diseases, PA
Clinic for Kidney Diseases, PA
Clinic for Kidney Diseases, PA
Clinic for Kidney Diseases, PA
Clinic for Kidney Diseases, PA
Congenital Heart Center at Shands
DaVita Nephrology Partners
DaVita Nephrology Partners
Duval County Public Health Dept.
Nemours Children's Clinic - Jax
Nemours Children's Clinic - Jax
Otolaryngology ENT Clinic at Shands
Otolaryngology ENT @ Shands
Shands UF Transplant Center
The Bone and Joint Institute at Shands
The Neuroscience Institute at Shands
UF Bone and Joint Center at Emerson
UF Emergency Medicine
UF Emergency Medicine
UF Emergency Medicine
UF Emergency Medicine
UF Eye Institute
UF Hematology/Oncology
UF Infectious Disease
UF Nephrology
UF Pathology
UF Pediatric Neurosurgery Center
UF Pediatric Palliative Care Clinic
UF Rheumatology
UF Surgery
UF Urology

Chiropractor
Nurse Practitioner - OBGYN
Infectious Disease
Physical Med. & Rehab.
Infectious Disease
Nephrology
Nephrology
Nephrology
Nephrology
Nephrology
Pediatric Cardiology
Nephrology
Nephrology
Infectious Disease
Pediatric Radiology
Speech Language Pathology
Otolaryngology
Audiologist
Medical Oncology
Orthopaedic Surgery
Neurology
Orthopaedic Surgery
Emergency Medicine
Emergency Medicine
Emergency Medicine
Emergency Medicine
Ophthalmology
Medical Oncology
Infectious Disease
Nephrology
Anatomic Pathology & Clinical Pathology
Neurological Surgery
Nurse Practitioner - Pediatrics
Rheumatology
Otolaryngology
Urology

Contact Us...

Administrative Office:
904-244-9016
Provider Services:
1-866-270-2468

*Plant your DREAMS and miracles will grow...
-Ralph Waldo Emerson*



We're on the
WEB!