

Documents Updated on Website:

FCA Education Tab
FCA June 2011 NewsFlash
FCA Provider Directory
FCA Annual In-Service Flyer
FCA Preferred Drug List Page Updated
FCA Interested Provider Questionnaire
FCA Service Alert: New Dermatology Provider
FCA Service Alert Ophthalmology Procedure Added to Pre-Auth List
FCA Service Alert IBP Added to Pre-Auth List



First Coast Advantage (FCA) Annual Provider In-Service Scheduled for June 1-2, 2011:

- First Coast Advantage will be hosting another provider in-service June 2011.
- Providers will be able to select from morning and afternoon sessions for the In-services.
- FCA has already sent out flyers and e-mails informing providers of how they can sign up for these in-services.
- The registration flyer can be found on the FCA Website at www.firstcoastadvantage.com under In-service
- The In-service will include the following Topics:
 - FCA On-Line Pre-Authorization Process
 - Bariatric Pre-Authorization Guidelines
 - Billing and Claims
 - Medicaid NPI Implementation for 2011
 - Member PCP Transfers

Please register now seats are going fast!



Effective January 1, 2012 Florida Medicaid Version 5010 Implementation:

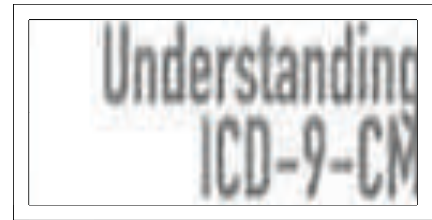
- The current HIPAA standard transaction set for claim submission, remittance and eligibility verification will change from version 4010 to 5010, effective January 1, 2012.
- This change will require action by all current participants in the electronic data interchange (EDI) process.
- This message is intended for any Provider and/or vendor submitting or receiving electronic data files from the Florida Medicaid Program and its Fiscal Agent, HP.
- The Florida Medicaid Public Provider Portal highlights the changes planned, testing options, key dates and resources for additional information.
- The site http://portal.flmmis.com/FLPublic/Provider_EDI/Provider_EDI_SubmissionInformation/tabId/66/Default.aspx includes the following topics:
 - Inbound files
 - Outbound files
 - Ramp Manager testing
 - Steps for updating Trading Partner ID for 5010 submission
- Providers and vendors will have the option effective July 1, 2011, to send and/or receive version 5010 of all transactions. This will allow a 6 month transition period for EDI stakeholders to test and transition to exclusive use of version 5010.
- Effective January 1, 2012, version 4010 will no longer be accepted or sent by the Florida Medicaid Program. Failure to prepare for this deadline will result in delayed Medicaid payments.
- HP staff is available to assist with questions or additional information at 1(866) 586-0961.
- **Please** take advantage of the various resources as quickly as possible to prepare for the upcoming change. As the implementation deadline approaches, the opportunity for testing will be limited.
- For questions contact your local Medicaid area office.

Effective May 18, 2011, CMS ICD-10 Conversion Activities National Provider Teleconference Held:

- The Centers for Medicare & Medicaid Services (CMS) hosted a national provider teleconference on "CMS ICD-10 Conversion Activities."
- Subject matter experts discussed the ICD-10 conversion process currently taking place within CMS, including a case study from the CMS Coverage and Analysis Group on their transition to ICD-10 for the lab national coverage determinations (NCDs).

Target Audience: Medical coders, physician office staff, provider billing staff, health records staff, vendors, educators, system maintainers and all Medicare fee-for-service (FFS) providers.

- **The following topics were discussed:**
 - ICD-10 overview
 - Lab NCDs conversion process from ICD-9-CM to ICD-10-CM
 - Home health conversion
 - OASIS and procedure code reporting
 - Update on claims spanning the implementation date
 - National ICD-10 implementation issues

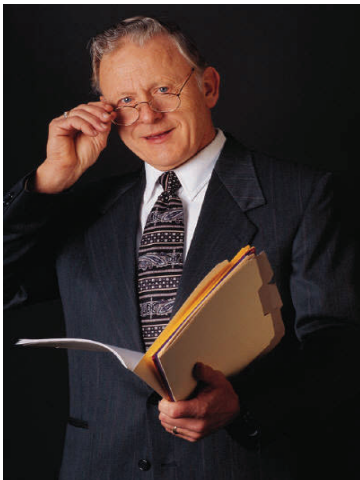


Save the date: The next ICD-10 national provider teleconference will be held on Wednesday, August 3. Registration information will be posted to the CMS ICD-10 Teleconferences web page at <http://www.cms.gov/ICD10/Tel10/list.asp>.

- Is your organization preparing for a smooth transition to ICD-10 on October 1, 2013? The CMS ICD-10 website at www.cms.gov/icd10 is a valuable resource to help you prepare for the U.S. health care industry's change from ICD-9 to ICD-10 for medical diagnosis and inpatient procedure coding.
- Check the Florida Medicaid website frequently for the latest news, resources, compliance timelines, and teleconference information. While you are visiting the site, sign up for the CMS ICD-10 Industry Email Updates to receive the latest information on the transition and new web site content.
- For questions contact your local Medicaid area office.

Effective May 2, 2011, Florida Medicaid Sanction Alert: Failure to Furnish Records:

- Medicaid Providers are required to furnish copies of records to the agency, the Attorney General, the Federal Government, and the authorized agents of each of these entities, as requested and as specified in governing regulations.



- For example, the Agency may request medical records from a Provider for purposes of an audit or review; the failure to furnish those records as requested will result in an administrative sanction.
- Another example is where certain Provider types who are required to submit cost reports to the Agency either fail to submit a cost report or submit it late.
- In accordance with the Agency's sanction rule (Rule 59G-9.070, Florida Administrative Code), which is available electronically at www.flrules.org on the Department of States searchable website, a Provider will be sanctioned for the failure to furnish required or requested records to the Agency, or any of the other authorized entities.
- The sanction for a first offense is a \$2,500 fine and suspension from the Medicaid program -- the fine increases if the violation continues; and if the violation continues for 30 days, the Provider will be terminated. Suspension and termination preclude participation in the Medicaid program.
- Providers may access other compliance information, such as Florida Medicaid handbooks and contact information for your local Medicaid area office, through the Agency's Web site.

- The Medicaid page on the Web site includes a link for information about fraud and abuse issues: ahca.myflorida.com/Medicaid/abuse

Effective May 12, 2011, First Coast Advantage (FCA) Interested Provider Questionnaire Updated on FCA Website:

- FCA has updated the Interested Provider Questionnaire on the FCA Website at www.firstcoastadvantage.com to include a space for Providers to include the county in which they will service FCA Members.
- Now that FCA is expanding we will need to know where Providers intend to service our Members.
- For more information call FCA Provider Service at 1-866-270-2468.

Effective May 19, 2011, Understanding Meaningful Use: CMS National Provider Call for EHR

Incentive Programs:

- CMS held a Seminar on how to use electronic health records (EHRs) to earn incentive payments from CMS.
- CMS held a National Provider Education to help Providers learn more about meaningful use that covered:
 - The definition of meaningful use
 - The requirements for Stage 1 of meaningful use (2011 and 2012)
 - How to attest to having met meaningful use
 - Overview of the meaningful use objectives specification sheets

[Stage 1 EHR Meaningful Use Specification Sheets for Eligible Professionals](#)

[Stage 1 EHR Meaningful Use Specification Sheets for Eligible Hospitals](#)

- For questions on how to obtain this information contact your local Medicaid area office



Effective May 19, 2011, Florida Medicaid Announcement Imported Levoleucovorin Use Due to Fusilev Shortage J0641: Levoleucovorin Calcium Injection, 0.5mg;

- Effective May 19, 2011, for Provider types 24, 26, and 97, Florida Medicaid announces that in order to manage the ongoing shortage of leucovorin and levoleucovorin, the United States Food and Drug Administration (FDA) has authorized Spectrum Pharmaceutical, Inc. to import and distribute Pfizer Levoleucovorin 100mg Powder for Injection from Italy.
- **Providers need to be** sure to note that the imported product is a 100mg powder. The product approved in the USA by the FDA is a 50mg powder. Please see the Florida Medicaid “Dear Healthcare Professional” letter, dated February 1, 2011, from Spectrum Pharmaceutical, Inc. for additional information.
- Imported levoleucovorin has been assigned AIC #024659195. However, it has not been assigned an NDC number. Therefore, Florida Medicaid has created an NDC number to be used for physician services billing purposes only.
- Florida Medicaid combined the 5-digit labeler code for Spectrum Pharmaceuticals (68512) with the last 6 digits of the AIC number (659195) to create an 11 digit “NDC” number that the HP system can recognize.
- When billing levoleucovorin, continue to use J0641. If Providers are billing for the 50mg vials use NDC 68152-101-00. This is the NDC that is on the vial.
- If Providers are billing for the 100mg vials, use NDC 68152659195. The HP system has been modified to accept both NDCs as valid NDCs for J0641.
- For questions contact your local Medicaid area office.

Effective Monday, May 23, 2011, First Coast Advantage (FCA) Service Alert: New Dermatology Provider for All Ages:



- Effective Monday, May 23, 2011, Providers will be able to submit a Pre-Authorization for Dermatology Services to First Coast Advantage’s (FCA) new Dermatology Provider, Advanced Dermatology.
- A Pre-Authorization will be required until Advanced Dermatology has completed the credentialing process, which can take up to 60 days.
- See FCA Service Alert on the FCA Website at www.firstcoastadvantage.com under Service Alert for more information.

Dermatology

Effective April 1, 2011, Florida Medicaid Physician Injectable Medication Fee Schedule Update:

June 2011
Page 4

- An updated physician injectable medication fee schedule has been published to the provider website at the following link:

http://portal.flmmis.com/FLPublic/Provider_ProviderSupport/Provider_ProviderSupport_FeeSchedules/tabId/44/Default.aspx

- The updated reimbursement rates are retroactive to 4/1/2011. We performed a detailed analysis on chemotherapy and chemotherapy support drug pricing, and eliminated the Medicare B pricing as a benchmark for the federal upper limit in the drug pricing equation. (See the provider alert dated January 19, 2011 for the explanation on the drug pricing calculation).

Reminder: The National Drug Code (NDC) for physician administered injections products must be listed in conjunction with the appropriate HCPCS code. The NDC is found on the drug container.

- The claim must reflect the NDC codes found on the product package/container from which the medication was administered.
- The NDC must contain 11 digits (a 5-4-2 grouping, no hyphens) on the claim form in order to be recognized as a valid NDC.
- It is not uncommon for the label attached to a drug product to be missing leading zeros. Additional requirement to be included with the NDC number include metric units and dispense quantity.
- The HCPCS code and the number of billing units are reported elsewhere in the claim format. See the National Uniform Billing Committee criteria for the exact format.

C-Codes:

- Please see the chart below for information on C-codes. The purpose of opening C-codes to office based providers is to speed claims processing and eliminate the medical review process when Medicaid is the primary payer.
- When Medicare is the primary payer, office based providers must still use either J3490 or J9999, but we have amended the Medicaid system so that Medicare B crossover claims should process under J3490/J9999.

C-Codes	Description	Update	
C9254	INJECTION, LACO-SAMIDE, 1MG (VIMPAT)	Use C9254 for claim type = M (effective 01/01/2011)	Use J3490 for claim type=B (effective 01/01/2011)
C9257	INJECTION, BEVACIZUMAB, 0.25 MG	Use C9257 for claim type = M (effective 01/01/2011)	Use J3490 for claim type=B (effective 01/01/2011)
C9270	INJECTION, IMMUNE GLOBULIN (GAMMAPLEX), Intravenous. Non-lyophilized (liquid) 500mg***PA required	Use C9270 for claim type=M (effective 01/01/2011)	Use J3490 for claim type=B (effective 01/01/2011)
C9272	INJECTION, DENOSUMAB, 1MG (PROLIA)	End Medicaid coverage, effective 04/01/2011	This product is available through recipient pharmacy benefits.
C9273	SIPULEUCEL-T, MINIMUM OF 50 MILLION AUTO (PROVENGE)	Use C9273 for claim type=M (effective 01/01/2011)	Use 9999 for claim type=B (effective 01/01/2011)
C9275	INJECTION, HEXAMINOLEVULINATE HYDROCHLORIDE, 100 MG, PER STUDY DOSE	Use C9275 for claim type=M (effective 01/01/2011)	Use J3490 for claim type=B (effective 01/01/2011)



Effective April 1, 2011, Florida Medicaid Physician Injectable Medication Fee Schedule Update - C-Codes (continued):

- Please see the chart below for information on C-codes. The purpose of opening C-codes to office based providers is to speed claims processing and eliminate the medical review process when Medicaid is the primary payer.
- When Medicare is the primary payer, office based providers must still use either J3490 or J9999, but we have amended the Medicaid system so that Medicare B crossover claims should process under J3490/J9999.

C-Codes	Description	Update	
C9276	INJECTION, CABAZI-TAXEL, 1 MG (JEVTANA)	Use C9276 for claim type=M (effective 01/01/2011)	Use J9999 for claim type=B (effective 01/01/2011)
C9277	INJECTION, ALGLUCOSIDASE ALFA (LUMIZYME), 1 MG	Use C9277 for claim type=M (effective 01/01/2011)	Use J3490 for claim type=B (effective 01/01/2011)
C92778	INJECTION, INCO-BOTULINUMTOXIN A, 1 UNIT	Use Q2040, effective 4/01/2011	

Providers may forward questions to either:

Kiyoe Hebert, Govt Analyst II, Bureau of Pharmacy Services
Phone: 850-412-4150

Email: Kiyoe.Hebert@ahca.myflorida.com

Anne C. Wells, Pharm.D. MS, Bureau Chief, Medicaid Pharmacy Services

Phone: 850-412-4146 Email: Anne.Wells@ahca.myflorida.com



Effective May 17, 2011, Florida Medicaid Provider Training Held for Medicaid Provider Compliance Program & Provider Self Audits:

- The *Fraud Prevention and Compliance Unit* in partnership with the *Bureau of Medicaid Services* held a delivering “**Medicaid Provider Compliance Program & Provider Self Audits**” teleconferences in May.
- The training followed a Microsoft PowerPoint presentation found the below link:
http://ahca.myflorida.com/Medicaid/deputy_secretary/recent_presentations/index.shtml
- If you have any questions about this information, please contact Yolanda Sacipa at:
Yolanda.Sacipa@ahca.myflorida.com



Effective May 1, 2011, First Coast Advantage Preferred Drug List Page Updated on FCA Website:

June 2011
Page 6

- The Preferred Drug List Page on the FCA Website at www.firstcoastadvantage.com has been updated.
- This page is a direct link to the AHCA website so when they make changes to this site they are change on the FCA website. AHCA revised the links on this page and they were deactivated.
 - These links have been removed and replaced with the correct links for the Medicaid Preferred Drug list.
 - For more questions on this changes please call FCA Provider Services at 1-866-270-2468.



CMS Held Special Open Door Forum: ICD-10 Conversion for 2011 Physician Quality Reporting System and Electronic Prescribing (eRx) Incentive Programs:

- The Centers for Medicare & Medicaid Services (CMS) hosted a Special Open Door Forum on the 2011 Physician Quality Reporting System (previously known as the Physician Quality Reporting Initiative or PQRI) and E-Prescribing (eRx) Incentive programs.
- **This Special Open Door Forum focused on ICD-10 Conversion.**
- Following the presentation, the telephone lines were opened to allow participants to ask questions of the CMS subject matter experts.
- Reminder, be sure to use the correct 2011 Physician Quality Reporting Measure Specifications as these documents are updated from year to year:
 - 2011 Physician Quality Reporting Measure Specifications for Claims and Registry Reporting of Individual Measures
 - 2011 Physician Quality Reporting Measures Groups Specifications
 - 2011 Physician Quality Reporting EHR Measure Specifications
 - 2011 Physician Quality Reporting GPRO I Narrative Measure Specifications.
- An audio recording and transcript of this Special Forum is posted to the Special Open Door Forum website at http://www.cms.gov/OpenDoorForums/05_ODF_SpecialODF.asp and will be accessible for downloading beginning on or around June 23, 2011.



Effective May 2, 2011, Florida Medicaid Compounded Sildenafil Suspension:

- Effective immediately for Provider types **20, 25, 26, 29 and 30**, Revatio will be the only sildenafil agent available for management of pulmonary hypertension.
- Prior authorization (PA) requests for compounded Sildenafil suspension will be directed to Revatio (Sildenafil 20mg tabs) instead of Viagra (Sildenafil 100mg tabs).
- Revatio will still require a prior authorization review for the treatment of pulmonary hypertension.
- Providers should fax Prior-authorization (PA) requests on a Miscellaneous PA Request form to (877)614-1078. Forms may be downloaded from: http://ahca.myflorida.com/Medicaid/Prescribed_Drug/pharm_thera/paforms.shtml.
- For questions contact your local Medicaid area office.

Effective June 1, 2011 Florida Medicaid Change to Elective Surgery Prior Authorization:

- Effective June 1, 2011, for Provider types 24 and 26, The Agency for Health Care Administration (Agency) entered into a contract with eQHealth Solutions, Inc., for utilization management, including prior authorization for all inpatient medical and surgical services.
- eQHealth offered web based training sessions for providers who will need to submit requests in their system (eQSuite) for elective inpatient procedures.
- These training sessions were held to enable Providers to understand how to access and receive prior authorization for Medicaid services through eQSuite.
- If you did not attend any of the sessions offered May 19th- 26th you can find recordings of these webinar sessions and a sample of eQSuite for practice purposes at eQHealth website at <http://fl.eqhs.org>.
- For questions contact your local Medicaid area office.



Effective June 1, 2011, Florida Medicaid Changes to BBA Claim Processing Does Not Include FCA Claims:

- Florida Medicaid has changed the Balanced Budget Act (BBA) claims (along with the related medical records), to no longer need to be submitted to AHCA for review for inpatient admissions.



- **This Process does not include Providers who service First Coast Advantage Patients.** Providers must continue to submit their claims to FCA in order to be processed.
- FCA Claims Processing Information can be found on the FCA Website at www.firstcoastadvantage.com under Provider Information / claims Information.
- If you have any questions, please contact Provider Services at 1-866-270-2468.

Effective June 15, 2011, First Coast Advantage (FCA), Adds Implantation Intrathecal Baclofen Pump (ITB) to Pre-Auth List:

- Effective June 15, 2011, Implantation of an Intrathecal Baclofen Therapy Pump in the outpatient hospital setting is being added to the First Coast Advantage (FCA) Pre-Authorization list.
- See FCA Service Alert on the FCA Website at www.firstcoastadvantage.com under Service Alert for information on this change to the Pre-authorization list. For questions, please contact FCA Medical Management Department at 244-3539 or at pre.authorizations@jax.ufl.edu.

Effective May 1, 2011, Florida Medicaid Spring 2011 Provider Bulletin Now on Medicaid Website:

- The Spring 2011 Provider Bulletin is now available on the [Medicaid landing page](#) and on the [Public Provider Portal](#).
- **Please note, the front page article includes critical information for Providers regarding NPI replacing Medicaid ID for claims processing on and after May 1, 2011.**
- For questions contact your local Medicaid area office.



Effective May 1, 2011, Florida Medicaid EHR (Electronic Health Record) Link Now on FCA Website:

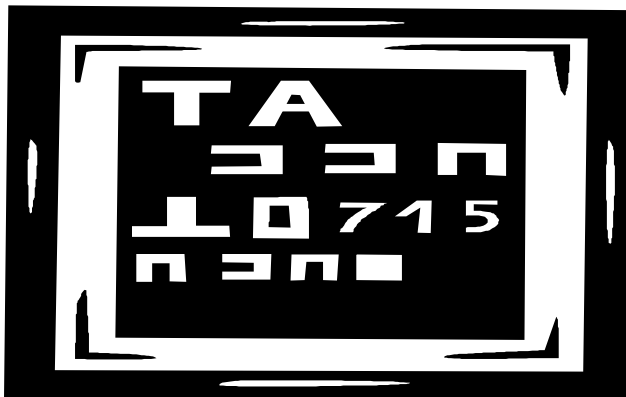
June 2011
Page 8

- The Florida Medicaid Electronic Health Record (EHR) Incentive Program was established by the Health Information Technology for Economic and Clinical Health (HITECH) Act of the American Recovery & Reinvestment Act of 2009.
- The program provides financial incentives to health care professionals and hospitals for the adoption and meaningful use of electronic health records.
- FCA has updated our website to include Florida Medicaid Electronic Health Record Incentive Program at www.firstcoastadvantage.com/Links.
- You can also access the link at <http://www.ahca.myflorida.com/medicaid/ehr/>.
- For more information contact your local Medicaid area office.



Effective June 15, 2011, First Coast Advantage (FCA), Adds Specific Ophthalmology Procedures to Pre-Auth List:

- Effective June 15, 2011 First Coast Advantage (FCA) will be adding specific Ophthalmology Procedures to the Pre-authorization List for Medical Necessity.
- See FCA Service Alert on the FCA Website at www.firstcoastadvantage.com under Service Alert for a list of Ophthalmology Procedures requiring Pre-authorization.
- For questions, please contact FCA Medical Management Department at 244-3539 or at pre.authorizations@jax.ufl.edu.



Ancillary

Solarus, Enterprises, LLC

Solarus Enterprises, LLC

DME

Covering Only (PCP)

Gonzalez-Truong, Angelina, MD

San Jose Pediatrics and Adolescent Center

Pediatrics

PCP

Cordero, Diana M, MD

Shivashankar, Latha, MD

Family Medical Centers

Hampton Pediatrics

Internal Medicine

Pediatrics

Specialist

Battle, Bridgett D, ARNP

Davis, John W, CRNA

English, Daryl P, ARNP/UF Neuro- Surgery

Fontane, Emily, MD

Goodrich, Claire, SLP

Hickman, Hollie Jo, DO

Johansen, Amy L, PAC

Sakhalkar, Monali, MD

Thomas, James Louis, DPM

Wasserman, Paul L, DO

UF Neonatology

UF Anesthesia

Adult Health

UF Emergency Medicine

The Speech Therapy Closet, Inc

UF Plastic Surgery/Institute

UF Urology

UF Ophthalmology/UF Eye Institute

UF Bone Joint at Emerson/at Shands

UF Radiology

Neonatology

Nurse Anesthetist

Emergency Med

Speech Lang Path

Plastic Surgery

Urology

Ophthalmology

Podiatry

Diag Radiology

**" How wonderful it is that nobody need wait a single moment
before starting to improve the world."**

~Anne Frank

