



CMSPlan.FloridaHealth.gov

Welcome to the first edition of the CMS Plan provider newsletter, designed to keep you informed about the CMS Plan and offer tips and useful information. We value our providers, and we want to make sure you have the information and support you need from us to provide the best care possible to CMS Plan members. The newsletter will be published on a quarterly basis, and it will always be posted to our new website, CMSPlan.FloridaHealth.gov.

To sign up to receive newsletters and alerts right to your inbox, or if you would like to provide feedback about this newsletter, feel free to email the CMS Plan Communications Coordinator at Heather.Kelleher@flhealth.gov.

Children's Medical Services Managed Care Plan (CMS Plan) is a health care plan for children with special health care needs offered by the Florida Department of Health.



National Infant Immunization Week 2016

Every year, National Infant Immunization Week (NIIW) highlights the importance of administering vaccines to infants in order to protect them from vaccine-preventable diseases like measles and pertussis. This year, NIIW was April 16–23, but it's important to communicate the benefits of infant immunization year-round.

The Centers for Disease Control and Prevention (CDC) and NIIW offer plenty of information for health care providers, including immunization schedules for patients ages 0–18 (<http://goo.gl/thOLHK>) and 19 and older (<http://goo.gl/B9UnmQ>). The CDC has even made these schedules available on smartphones and other mobile devices via a free app (<http://goo.gl/HhZ2WU>).

Health care professionals play an important role in establishing and maintaining effective communication about vaccines and maintaining high vaccination rates. Get some tips on talking with parents and guardians about the importance of vaccinations for infants by viewing this CDC brochure (<http://goo.gl/XNO48W>).

Learn more about how you can participate in National Infant Immunization Week at: www.cdc.gov/vaccines/events/niiw/index.html.



Well-Child Visits Keep Kids Healthy

Well-child visits are crucial for keeping track of your patients' overall health and development. A well-child check-up includes a nutritional assessment, developmental assessment, immunizations update and an assessment of the patient's comprehensive medical history. You can read more about well-child visits in the *CMS Plan Provider Handbook*, which is available online: <http://goo.gl/KQMVFo>.



Did you know?

Now the CMS Plan allows you to bill for a well-child check-up and a sick child visit on the same day.

Children should receive well-child check-ups at:

Birth or neonatal examination;

2–4 days for newborns discharged in less than 48 hours after delivery;

By 1 month;

2, 4, 6, 9, 12, 15, 18, 24 and 30 months; and

Once a year for ages 3–20 years.

How Are We Doing?

The Healthcare Effectiveness Data and Information Set (HEDIS) is a standardized tool used by more than 90 percent of health plans in America to measure performance in the areas of care and service. By reviewing their HEDIS scores, health plans can make improvements to the care they offer. HEDIS data is also important for consumers who are looking for the best care to suit their needs.

You can review the current CMS Plan performance for well-child check-ups in the chart below. The CMS Plan continually works to improve the quality of care our members have access to. By administering well-child check-ups, you are not only helping to improve our HEDIS scores, you are also helping CMS Plan members receive high quality care.

Well-Care Visits Performance Measure	All Plans Average Score	Data for the CMS Plan		
		Score	Percentile	Number of Stars (1–5)
Adolescent	53.3%	57.5%	<75th	5
First 15 Months, 6+ Visits	55.5%	47.3%	<25th	2
Ages 3–6 years	75.5%	75.7%	<75th	5

Clinical Eligibility Screening Update

Clinical eligibility screening for the CMS Plan resumed in January 2016.

Children may be determined to be clinically eligible for the CMS Plan through a parent-based survey or through a physician-based attestation form using diagnostic codes for chronic and serious conditions.

You can learn more about the clinical eligibility determination process and the physician attestation form online: <http://goo.gl/U14PsK>.

Quality Improvement Programs

As part of our **Quality Improvement (QI) Program**, the CMS Plan contracts with Ped-I-Care and the South Florida Community Care Network (SFCCN) to conduct site visits and provide technical assistance. The purpose of a QI visit is to interview staff about practice policies and procedures, tour the facility and review a sample of medical records. Charts are reviewed by a QI nurse to evaluate the measures described in Section X of the *CMS Plan Provider Handbook*.

The results of the site visit are summarized in a letter sent to the provider.

Member Rights and Responsibilities

All of our members are entitled to certain Member Rights. Some of these are:

- To be treated with respect, courtesy, and dignity.
- To ask questions and get answers they understand.
- To get good medical care regardless of race, origin, religion, age, disability, or illness.
- To know about their treatment. To know what their options are. To decide about their care. They can refuse treatment.
- To ask for and get a copy of their medical records. To request their medical records be changed or amended.
- Changes can only occur as allowed by law.
- To get a second opinion from another doctor.
- To change providers at any time. They can ask for another primary care doctor (PCP) or specialist.

All CMS Plan members also have the following responsibilities:

- To call their PCP(s) before getting care unless it is an emergency.
- To call their PCP when they get sick and need care.
- To listen and work with their providers.
- To treat all health care providers and staff with respect, courtesy and dignity.
- To give them the information they need for their care.
- To talk to their doctor if you have questions or concerns
- To call their doctor if they cannot make it to an appointment.

There are many more, and they are listed in full in the *CMS Plan Provider Handbook*, which is available on our website (CMSPlan.floridahealth.gov). We encourage you to read them.

Did you know?

The CMS Plan has a new **Physician Portal**, www.floridahealth.gov/programs-and-services/childrens-health/cms-plan/physician-portal/index.html, with important information for our primary care providers. Visit the Portal now to read provider alerts, information about accreditation, health and wellness promotion and more!

Important Provider Contacts

Addresses for mailing paper claims:

Title XIX P. O. Box

CMS MMA Specialty Plan
Title XIX

P. O. Box 981648
El Paso, TX 79998-1648

Title XXI P. O. Box

McKesson CMS Title XXI
P. O. Box 981733

El Paso, TX 79998-1733

Pharmacy assistance:

Magellan, Medicaid

Title XIX pharmacy benefits manager
Phone: 800-603-1714

MedImpact, KidCare

Title XXI pharmacy benefits manager
Phone: 800-788-2949