



Medical foster care provider training

*This communication applies to the Medicaid programs for
Simply Healthcare Plans, Inc. (Simply) and Clear Health Alliance (CHA)*

Agenda

- Medical foster care services overview
- Contracting and rate structure
- Care coordination and communication
- Continuity of care
- Approved medical foster care services codes
- Paper claims process
- Electronic claims process
- Claims reimbursement
- Timely filing
- Claims dispute process
- Availity* Provider Portal overview
- Electronic remittance enrollment (ERA) enrollment
- Key contacts

Medical foster care services overview

The medical foster care (MFC) program enables Medicaid eligible children from birth through age 20 with medically complex conditions, whose parents cannot care for them in their own homes, to live and receive care in foster homes rather than in hospitals or other institutional settings. Children's medical services (CMS) recruits MFC parents and provides training for them to care for the medically necessary needs of these children.

Contracting and rate structure — what is happening?

- *Letters of Agreement (LOA)* have been sent to all identified MFC providers.
- Simply Healthcare Plans, Inc. (Simply) and Clear Health Alliance (CHA) will enroll all identified MFC providers with a *LOA*, active Medicaid #, NPI and *W9* form to pay claims at 100% of the Medicaid allowable fee schedule.
- All MFC providers without a *LOA* will be enrolled with an active Medicaid #, NPI # and *W9* form to cover continuity of care (COC) period.
- All contracts will be processed within Statewide Medicaid Managed Care Managed Medical Assistance (SMMC MMA) required timeframes.

Care coordination and communication— how does it work?

Simply and CHA will work on aiding MFC for eligible members utilizing (authorized representative) and the plan's case manager (CM) to address the components of MFC case management including assessing, planning, implementing, coordinating, monitoring services and evaluating options to meet the member's needs through communication and available resources to promote quality cost effective outcomes.

Case management contact info:

Yamilet Tellez and Michelle Stout email:

dl-EIS_MFC_communications@anthem.com

Continuity of care — how will it work?

- Simply and CHA will honor all existing prior authorizations to ensure continuity of care guidelines are met.
- Simply and CHA will pay all continuity of care claims at the Medicaid fee for service rates established by The Agency for Health Care Administration for services rendered.
- Simply and CHA will continue to allow services without the need of an authorization for the required initial screenings and evaluations to ensure early intervention services providers can comply with the statutory 60-day timeframe.

Approved medical foster care services codes

Level	Codes	Allowed modifiers	Description
I	S5145	HA	Level I medical foster care service
II	S5145	TF	Level II medical foster care service
III	S5145	TG	Level III medical foster care service

Paper claims process

Please ensure that claims are submitted on a *CMS-1500* claim form and include but are not limited to the following:

- Complete and correct member demographic (for example, DOB, Medicaid ID, etc.)
- Correct plan information
- Billing and rendering provider MID # and NPI
- Billing provider address cannot be a P.O. Box (Medicaid agency requirement)
- Member diagnosis
- Procedure code as listed on the Medicaid fee schedule for SMMC MMA
- Procedure code — diagnosis pointer

Submit SMMC MMA program claims to the following address:

Paper claims:

Simply Healthcare Plans, Inc. and Clear Health Alliance

Attn: SMMC MMA in Florida

P.O. Box 61010

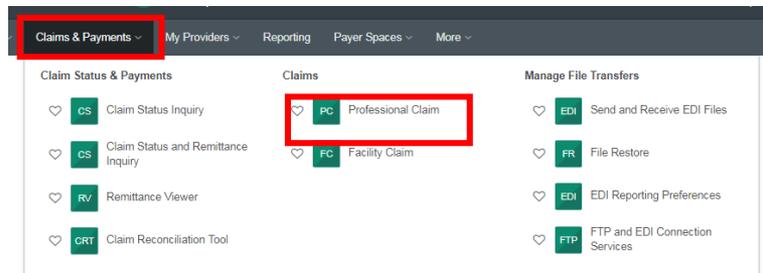
Virginia Beach, VA 23466-1020

Electronic claims process

Submitting a claim via Availity:

- Log in to the Availity Portal at www.Availity.com
- Select **CLAIMS & PAYMENTS** from the top navigation bar.
- Select **Professional Claims** from the options displayed.
- In the *PAYER FIELD*, please select: **SIMPLY HEALTHCARE NEW** for Simply members or **CLEAR HEALTH ALLIANCE** for Clear Health Alliance members.
- All fields reflecting a * must be completed for the submission of the claim.

Availity payer ID	Simply Healthcare Plans, Inc.	Clear Health Alliance
	SMPLY	CLEAR



Claims reimbursement

- Clean claims are paid or denied within 15 days (for electronic) or 20 days (for paper) of receipt date. A paper check will be issued for approved claims.
- For additional guidance when submitting claims, please contact:

Process Improvement Manager: Keishly Torres

Phone: **1-813-830-6900** Ext. **106-121-0205**

Email: MFCbillinginquiries@simplyhealthcareplans.com

Timely filing

Timely filing guidelines:

- Initial filing of a claim must be made in 180 calendar days from the date of service.
- Providers must submit claims within six months after the date of discharge or the date a nonparticipating provider was given the correct name and address of the applicable managed care plan.

Resubmissions:

- Corrected, reconsiderations or disputes must be filed within 90 calendar days from the receipt of payment or denial notification.

Claims dispute process

Verbal dispute: **1-844-405-4296.**

Written dispute:

Simply Healthcare Plans, Inc. and Clear Health Alliance

Payment appeals

P.O. Box 61599

Virginia Beach, VA 23466-1599

Availity overview

Use the Availity Portal to get the tools and the real-time information exchange you need to drive measurable and meaningful, organizational improvements and enjoy the vitality of a healthy business. Best of all, health care providers can use a single login to access multiple health plan providers at **no cost**.

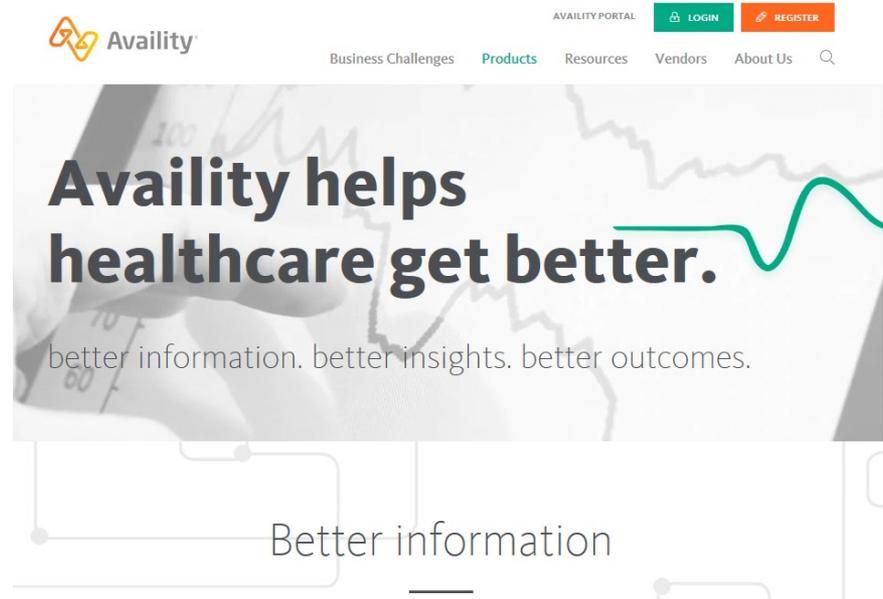
Availity helps you:

Improve:

- Administrative efficiency
- Payments and collections
- Regulatory compliance

Reduce:

- Administrative costs
- Revenue cycle complexities
- Abrasion between plans and providers



Registering to use Availity

Go to www.Availity.com and select **REGISTER** to start using Availity.



After your registration is finished, you can log in to verify your patients' eligibility and benefits, submit claims, track remittances, and more.



Need help with registration?
[Watch a quick demo.](#)

Right click >
Open Hyperlink

When you log in for the first time, Availity prompts you to:

- Accept privacy and security statements.
- Accept a confidentiality agreement.
- Choose three security questions and answers.
- Create a new password.
- Verify your email address.

It's important that you don't share your User ID or password with others.

You'll get a verification email after you enter this information. Select the link in the email to complete your registration with Availity.

Logging in

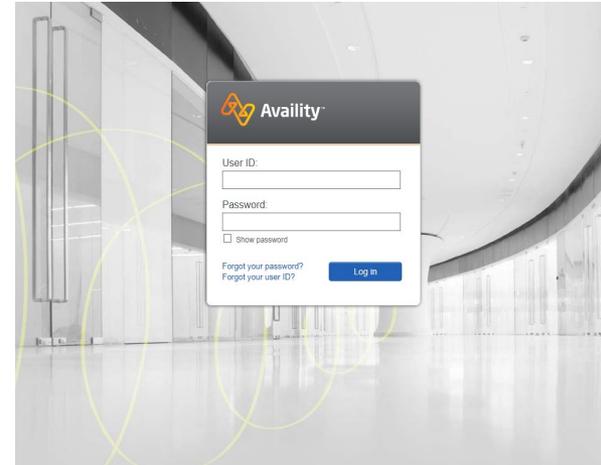
Go to <http://www.Availity.com> and select **Log in**.

Self-service

Use options or contact your organization administrator if you forget your password or user ID.

Security matters

Availity prompts you to change your password every 60 days.



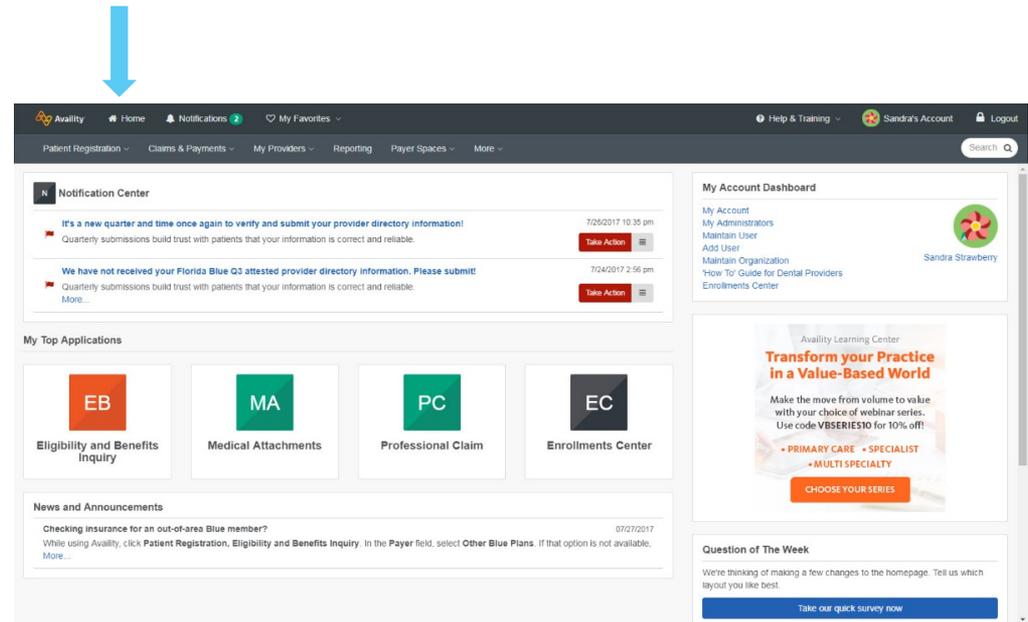
It is against *HIPAA* rules to share user IDs to sites that contain protected health information (PHI) or personally identifiable information (PII).

Example tools and applications

Name and description	Steps to access
Eligibility and benefits inquiry	Select Patient Registration Eligibility and Benefits Inquiry .
Professional and facility claims	Select Claims & Payments , and then select either Professional Claim or Facility Claim .
Claim status	Select Claims & Payments Claim Status Inquiry or Claim Status (New) .
Payer spaces	Select Payer Spaces and then your payer's logo.

Top row navigation

- Link to home page
- Quick view of notifications
- Place to access and manage favorites
- *Help & Training* menu
- Link to account page



The screenshot shows the top navigation bar of the Availity portal. A blue arrow points to the 'Home' link in the top left corner. The navigation bar includes links for 'Patient Registration', 'Claims & Payments', 'My Providers', 'Reporting', 'Payer Spaces', and 'More'. On the right side of the navigation bar, there are links for 'Help & Training', 'Sandra's Account', and 'Logout'. Below the navigation bar, the dashboard content is visible, including a 'Notification Center' with two notifications, 'My Top Applications' with four tiles (EB, MA, PC, EC), 'News and Announcements', 'My Account Dashboard', and a 'Question of the Week' section.

Users should select **Logout** when no longer working in Availity Portal.

Self-service is key

Organizations

Every organization has one or more administrator to add and manage users, maintain organization details, and complete setup or enrollments.

No need to wait on Customer Service to reset passwords and manage users' accounts. Users and administrators have all the power with integrated options, help and training.

If you need help, select **Help & Training | My Support Tickets** to open a ticket or call **1-800-AVAILITY (1-800-282-4548)**.

Users

Users have quick access to online help and training to learn basics and best practices while using Availity.

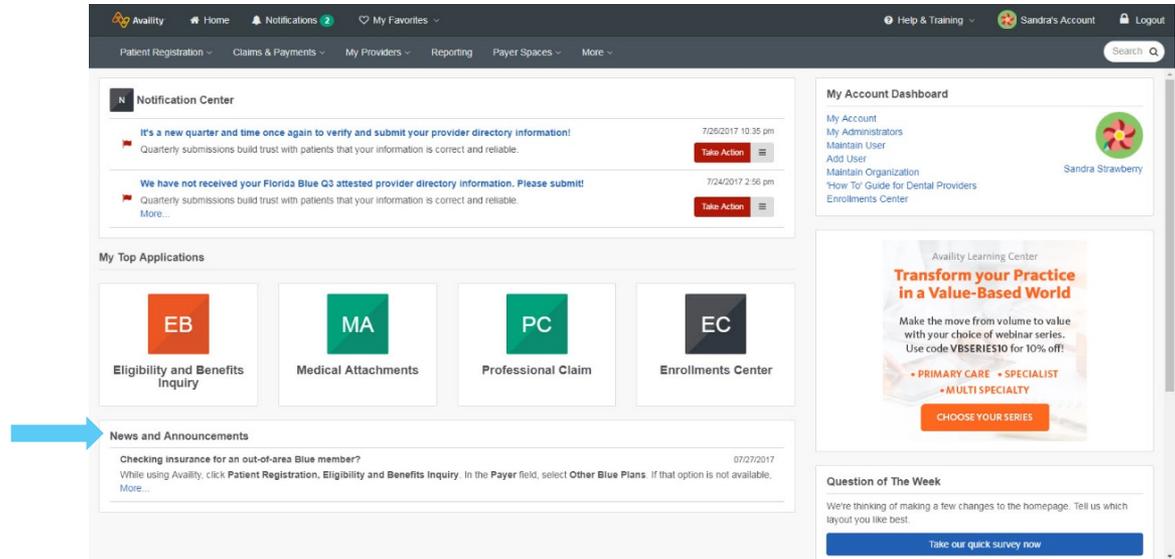
AVAILITY PORTAL
REFERENCE GUIDE FOR USERS & ADMINISTRATORS

Streamline workflows
with multi-payer access

Right click >
Open Hyperlink

Home page

- Notification center
- My top applications
- News and announcements
- Account dashboard
- ...and more

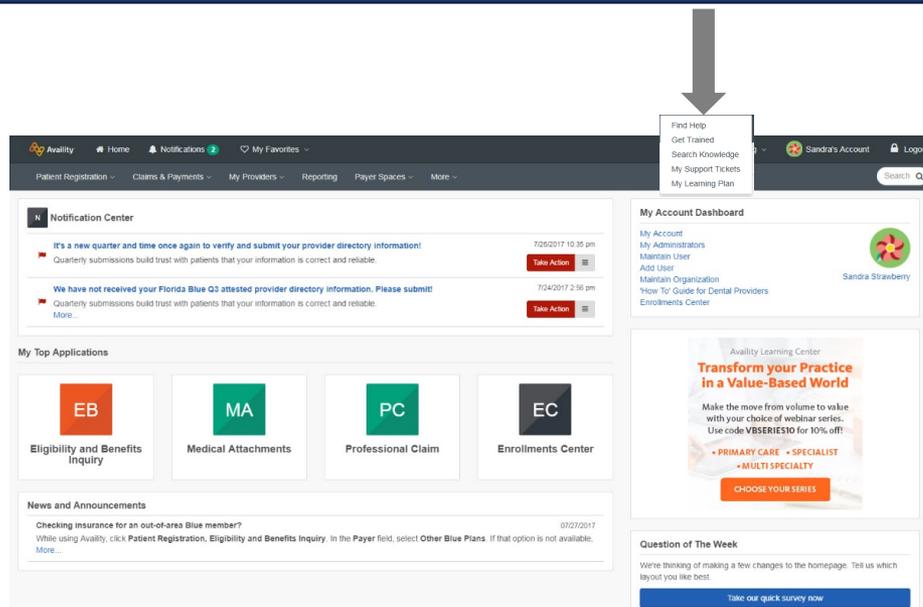


Home page options may vary by region, organization access and user account permissions.

Help and training

Select **Help & Training** and then an option:

- **Find Help**
- **Get Trained**
- **Search Knowledge**
- **My Support Tickets**
- **My Learning Plan**

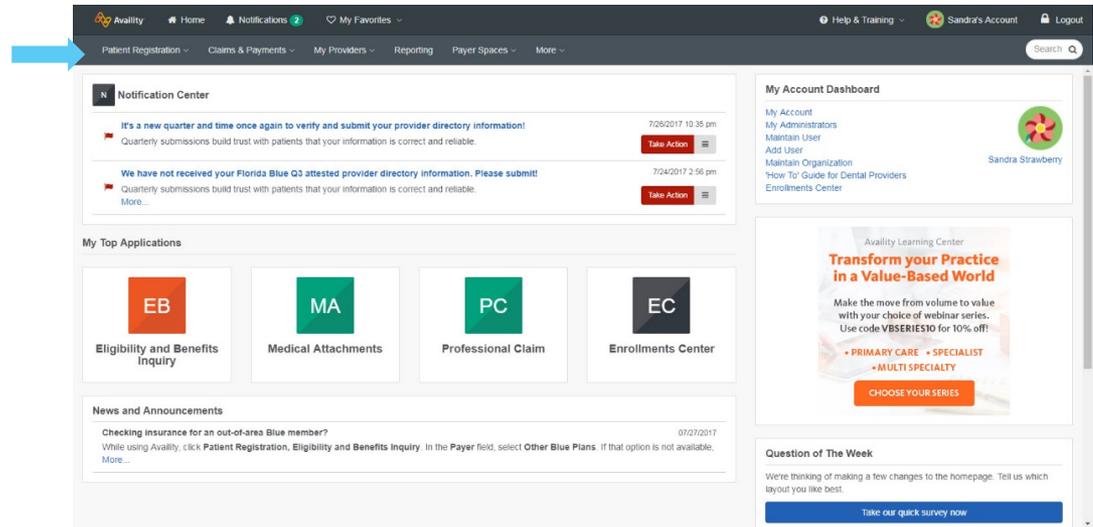


New to Availity?

Select **Help & Training** | **My Learning Plan** to plot your learning journey. Check out onboarding programs for new administrators and new users.

Second row navigation

- Patient registration
- Claims & payments
- My providers
- Reporting
- Payer spaces
- A search option



Options under the menus vary by user account, region and provider type. Search includes home page, applications and payer spaces.

Expert time-saving tips

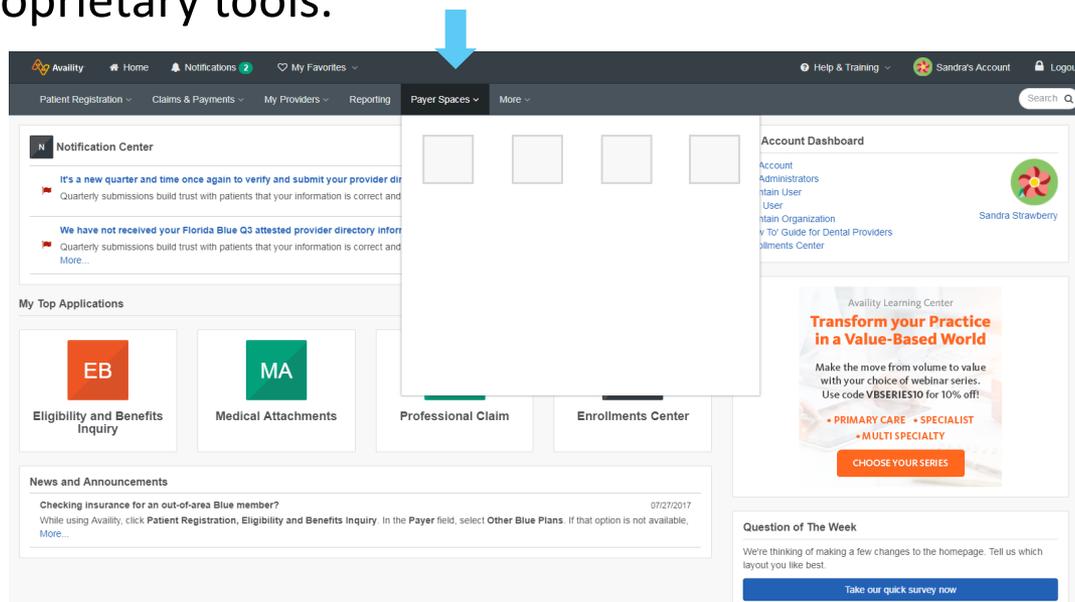
Express entry	When completing forms in Availity, select a provider from express entry. To add providers to your organization's express entry list, select My Providers Express Entry . You can add them one at a time or import a spreadsheet.
Favorites	Select heart icons next to tools you use the most to mark them as favorites. Then, select My Favorites to quickly access and manage them.
Search	Can't find an application or resource? Remember to use the <i>Keyword Search</i> feature.
Training	Need in-depth training about a specific Availity tool? Select Help & Training Get Trained .
Explore	Availity works closely with health plans to integrate additional third-party tools and apps into your workflow. If you see a button or link, select it to explore.

Looking for health care education and to earn continuing education credits? Check the Availity Learning Center (ALC) store.

Select **Help & Training | Get Trained**. The ALC Catalog opens in a new browser tab. Select **Catalog | Store** to search for free and reasonably priced health care education courses by keyword or category.

Payer spaces

Select **Payer Spaces** and then select the payer's logo to access many important proprietary tools.



Available payer spaces vary by region, organization access and user account permissions.

Eligibility and benefits request

The screenshot displays the Avality web application interface. The top navigation bar includes the Avality logo, Home, Notifications (3), My Favorites, Help & Training, Sandra's Account, and Logout. Below this is a secondary navigation bar with links for Patient Registration, Claims & Payments, My Providers, Reporting, Payer Spaces, and More. A search bar is located on the right side of this bar. The main content area is divided into two sections. On the left, there is a vertical panel with the text "No Patient History". On the right, the "New Request" form is displayed, featuring a "Watch a quick demo" link. The form includes several sections: "Payer" with a dropdown menu labeled "Please Select a Payer"; "Provider Information" with an "Express Entry" dropdown labeled "Search for a Provider" and an "NPI" text input field; "Patient Information" with an "As of Date" field containing "05/15/2014", a "Benefit / Service Type" dropdown menu labeled "Health Benefit Plan Coverage", a "Patient ID" text input field, and a "Date of Birth" field with a date picker. At the bottom of the form, there is a checkbox labeled "Submit another patient" and a blue "Submit" button.

Eligibility and benefits inquiry result

The screenshot displays the Availity web application interface. At the top, there is a navigation bar with the Availity logo, Home, Notifications (3), My Favorites, Help & Training, Sandra's Account, and Logout. Below this is a secondary navigation bar with links for Patient Registration, Claims & Payments, My Providers, Reporting, Payer Spaces, and More. A search bar and a dropdown menu for 'My Patients Only' are also present.

The main content area shows a patient profile for AVAILITY, SOPHIA M. The profile includes the following information:

- Date of Service: Jul 31, 2017
- Transaction ID: 5808247902
- Transaction Date: Jul 31 4:21 pm
- Customer ID: 394657
- Member ID: ABC123456789
- Plan / Coverage Date: Jan 01, 2012 - Dec 31, 9999
- DOB: Jul 06, 1933
- Gender: Female

Below the profile information, there are buttons for 'Payer logo displays here', 'Patient360', and 'Patient Attribution'. The interface also features tabs for 'Patient Information', 'Coverage and Benefits', and 'Care Reminders (1)'. A filter section allows users to select 'In Network', 'Out of Network', or 'All Networks'. The main display area shows details for a 'Professional (Physician) Visit - Office' with a feedback button. The visit is categorized as 'Active Coverage' and includes the following details:

- Insurance Type: Preferred Provider Organization (PPO)
- Plan / Product: LOWER COST PLAN 05360
- Contact Information: Professional (Physician) Visit - Office
- Payer Contact: [Redacted]
- Co-Payment: Professional (Physician) Visit - Office
- In Network: Yes
- Co-Payment Amount: \$35.00 Visit
- Specialist: SPECIALIST
- Collect Payment: [Button]

A sidebar on the left provides a list view of the patient's history, showing a single entry for AVAILITY, SOPHIA M. with details on the date of service, member ID, and payer information.

Claims & payments

The screenshot displays the Avallity web application interface. At the top, the navigation bar includes 'Avallity', 'Home', 'Notifications 3', 'My Favorites', 'Help & Training', 'Sandra's Account', and 'Logout'. Below this is a secondary navigation bar with 'Patient Registration', 'Claims & Payments', 'My Providers', 'Reporting', 'Payer Spaces', and 'More'. A search bar is located on the right side of this bar.

The main content area is divided into several sections:

- Notification Center:** Contains three notification items: 'We noticed you did not submit your Quarterly submission', 'Keep your information up to date with your Quarterly submission', and 'We heard you! Now you can choose your preferred Providers are optional'.
- Claim Status & Payments:** A dropdown menu showing options: CS Claim Status Inquiry, CS Claim Status (New), CRT Claim Reconciliation Tool, and RV Remittance Viewer.
- Claims:** A dropdown menu showing options: PC Professional Claim, FC Facility Claim, DC Dental Claim, MA Medical Attachments, and SM Secure Messaging.
- Manage File Transfers:** A dropdown menu showing options: EDI EDI Reporting Preferences, EDI Send and Receive EDI Files, and FR File Restore.
- Patient Payments:** A dropdown menu showing options: CP Collect Payment, CF Card on File, PAF Pre-Authorization Forms, and PA Payments Administration.
- Account Dashboard:** Displays user information for Sandra Strawberry (sandra.sobotka@avallity.com) and links for Account Administrators, Admin User, and Admin Organization.
- My Top Applications:** Four large buttons for EB (Eligibility and Benefits Inquiry), MA (Medical Attachments), PC (Professional Claim), and EC (Enrollments Center).
- News and Announcements:** A section titled 'Checking insurance for an out-of-area Blue member?' dated 07/27/2017.
- Question of The Week:** A poll question: 'Do you change provider work history and education when you re-credential a provider?' with a 'Take our one-question poll' button.
- Avallity Learning Center:** A promotional banner for 'Transform your Practice in a Value-Based World' with a 'CHOOSE YOUR SERIES' button.
- BECOME A PATIENT RELATIONS:** A partially visible banner at the bottom right.

Claims status inquiry

Avallity Home Notifications 3 My Favorites Help & Training Sandra's Account Logout

Patient Registration Claims & Payments My Providers Reporting Payer Spaces More Search

Claim Status Inquiry

* indicates a required field

* Payer:

* Organization:

Provider Information

Is the provider name the same as the organization name?
What does this mean?

Yes
 No

Express Entry - Provider:

* NPI:

Subscriber Information

Is the subscriber the patient?
 Yes
 No

* Subscriber ID:

* Subscriber Last Name:

Subscriber First Name:

* Patient Date of Birth: / /
MM DD YYYY

Gender:

Patient Account Number:

Claim Information

* Claim Service Date From: / /
MM DD YYYY

* Claim Service Date To: / /
MM DD YYYY

Claim Number:

Total Claim Charge Amount:

Institutional Bill Type:

Claims status inquiry results

Avallity Home Notifications 3 My Favorites Help & Training Sandra's Account Logout

Patient Registration Claims & Payments My Providers Reporting Payer Spaces More Search

Claim Status Inquiry Results [Less More >>](#)

Transaction ID: 877567845 Transaction Date: Jul 31, 2017 04:39 PM EDT Customer ID: 394657

[Edit Inquiry](#) [Print](#)

Payer: [REDACTED] **Subscriber ID:** ABC123456789
Provider: JAMES MATERNITY **Patient Name:** AVALLITY, SOPHIA W
NPI: 1234567893 **Patient Account #:** 12345678
Subscriber Name: AVALLITY, SOPHIA W **Date of Service:** 04/03/2012 - 04/03/2012

Payer logo displays here

Claims Found

From-To Date of Service	Status Type	Claim Number	Date Processed	Check # / EFT	Billed Amount	Paid Amount
04/03/2012 - 04/03/2012	Finalized	123456	04/14/2012	000012345	\$ 116.50	\$ 15.36

Status: Finalized The Claim/Encounter has completed the adjudication cycle and no more action will be taken.
Processed according to contract provisions (Contract refers to provisions that exist between the Health Plan and a Provider of Health Care Services).
Entity - Provider. Status Date 04/13/2012

[Edit Inquiry](#) [Print](#)

Claims status inquiry details

Avallity
Help & Training | Sandra's Account | Logout

Patient Registration | Claims & Payments | My Providers | Reporting | Payer Spaces | More
Search

Claim Status Detail Learn More >>

Transaction ID: 877567845 Transaction Date: Jul 31, 2017 04:42 PM EDT Customer ID: 394857

Return to Results
Edit Inquiry
Print

Subscriber Name:	AVALITY, SOPHIA W	Claim Number:	123456	Check Number:	000012345
Subscriber ID:	ABC123456789	Bill Type:	N/A	Check Date:	04/14/2012
Patient Name:	AVALITY, SOPHIA W	Voucher ID:	N/A	Check Address:	N/A
Patient Account #:	12345678	Billed Amount:	\$ 118.50	Paid Amount:	\$ 15.36
Provider Name:	JAMES MATERNITY	Claim Processed Date:	04/14/2012	Paid To:	N/A
NPI:	1234567893	Claim Received Date:	N/A	Paid To Name:	N/A
		DRG:	N/A	Paid To Tax ID:	N/A

Claim Level Status

Status: Finalized The Claim/Encounter has completed the adjudication cycle and no more action will be taken.
 Processed according to contract provisions (Contract refers to provisions that exist between the Health Plan and a Provider of Health Care Services).
 Entity = Provider. Status Date: 04/13/2012

Payer logo displays here

Service Line Status

Show/Hide Status Messages

From Service Date	To Service Date	Procedure Code	Revenue Code	Modifier	Quantity	Billed Amount	Allowed Amount	Patient Co-Ins	Patient Deductibles	Patient Co-Pay	Paid Amount	Non-Covered Amount
04/03/2012	04/03/2012	82043	N/A	N/A	1	\$ 77.50	N/A	N/A	N/A	N/A	\$ 5.73	N/A
Status: FinalizedPayment The Claim/Line has been paid. Claim/Line has been paid. Entity = Provider. Status Date: 04/13/2012												
Remarks: N/A : N/A												
04/03/2012	04/03/2012	83036	N/A	N/A	1	\$ 41.00	N/A	N/A	N/A	N/A	\$ 9.63	N/A
Status: FinalizedPayment The Claim/Line has been paid. Claim/Line has been paid. Entity = Provider. Status Date: 04/13/2012												
Remarks: N/A : N/A												
Total						\$ 118.50	N/A	N/A	N/A	N/A	\$ 15.36	N/A

Other Insurance Information

Carrier	Paid Amount
N/A	N/A

Send a secure message




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Professional claim form

Availity Home Notifications 3 My Favorites Help & Training Sandra's Account Logout

Patient Registration Claims & Payments My Providers Reporting Payer Spaces More Search

Professional Health Care Claim [Learn More >>](#)

* indicates a required field

* Payer: ?

* Organization:

Transaction Type: ?

Responsibility Sequence: ?

Patient Information

* Last Name:

First Name:

Middle Name or Initial:

* Date of Birth: / /

Date of Death: / /

* Gender:

Country: ?

* Address 1:

Address 2:

* City, State, ZIP Code: -

* Relationship to Subscriber: ?

release signature from provider on behalf of patient

Patient Amount Paid: ?

Patient's Condition Is Related To:
(Select all options that apply to patient's condition)

current or previous employment

auto accident

other accident

ERA enrollment

ERA enrollment

Go to <https://www.availity.com> and select **Enrollments Center** in the *My Account Dashboard* on the home page. Select **ERA Enrollment** in the *Multi-Payer Enrollments* section. Then, simply follow the wizard and submit. After submitting, you will be notified by email that enrollment is complete and start receiving 835s through Availity.

Availity: **1-800-282-4548**

Simply key contacts

Provider Services phone: **1-844-405-4296**

- Member eligibility inquiry
- Claims payment inquiry

Network Contracting and Participation

Name: Ivian Fundora

Phone: **1-305-408-5877**

Case Management

Name: Michelle Stout

Phone: **1-813-538-3235**

Name: Yamilet Tellez

Phone: **1-786-457-8747**

Email: dl-EIS_MFC_communications@anthem.com

Claims Contact

Name: Keishly Torres

Phone: **1-813-830-6900**, ext. **106-121-0205**

Email:

MFCbillinginquiries@simplyhealthcareplans.com

Additional resources

If you need additional resources or training material, please visit the education and training section of our provider website at <https://www.simplyhealthcareplans.com/florida-provider/provider-education>.

Questions

Thank you

* Availity, LLC is an independent company providing administrative support services on behalf of Simply Healthcare Plans, Inc. and Clear Health Alliance.

<https://provider.simplyhealthcareplans.com>

<https://provider.clearhealthalliance.com>

Simply Healthcare Plans, Inc. is a Managed Care Plan with a Florida Medicaid contract. Simply Healthcare Plans, Inc. dba Clear Health Alliance is a Managed Care Plan with a Florida Medicaid contract.

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