



ICD-10 has Arrived

ICD-10 implementation has begun as of October 1st, 2015.

All providers should now be using the new ICD-10 codes when submitting new claims.

After October 1st, Prestige Health Choice will only accept claims submitted with ICD-9 codes for claims with dates of service prior to October 1, 2015.

If you have any questions, please visit our ICD-10 Resource Center at www.prestigehealthchoice.com/provider/itn/resources/icd-10-resource-center.aspx, or call Provider Services at 1-800-617-5727.

Prestige Health Choice Ownership Update

Prestige Health Choice is pleased to announce that Florida True Health, Inc., a Florida health maintenance organization (HMO), acquired ownership of the health plan on October 1, 2015. Florida True Health, Inc. is doing business as Prestige, so providers and members will not see any changes. Florida True Health brings with it the expertise of one of the largest Medicaid managed care organizations.

Prestige will continue to be our members' Medicaid health plan, with the same benefits, services and providers of care, while still offering the same quality service and support.

If you have any questions, please call Provider Services at **1-800-617-5727**.

Servicing Members with Limited English Proficiency

Communication, whether written, verbal, or "other sensory" modalities, is the first step in establishing a relationship with our members. The key to ensuring equal access to benefits and services for Limited English Proficiency (LEP), Low Literacy Proficiency (LLP), and sensory impaired members, is to ensure that you can effectively communicate with them.

Our members have the right to receive oral interpretation services free of charge. This includes telephonic interpretation as well as in-person interpreter assistance at their provider visits. Telephonic interpretation is available in over 200 languages and is available twenty-four hours a day, seven days a week.

To access these free services, contact Member Services at **1-855-355-9800**.



Routing Requests and Inquiries

To ensure the expediency of requests and inquiries, see below for a list of current Prestige contact information.

Prestige Phone Numbers:

Utilization Management:
1-855-371-8074
TTY/TDD:
1-855-371-8075

UM/Prior Authorization Fax:
1-855-236-9285

UM/Concurrent Review Fax:
1-855-236-9293

UM/Inpatient Notification
Fax: **1-855-236-9286**

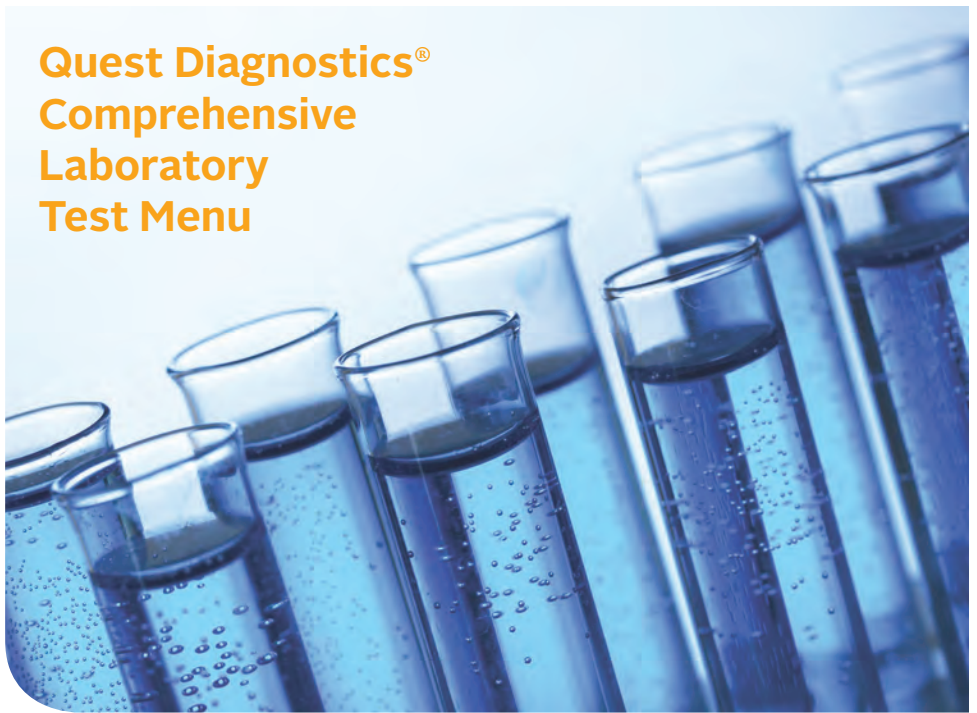
Coordinated Care Unit
(Home Care/DME):
1-855-371-3960

Coordinated Care Unit Fax:
1-855-398-5610

Reminder:

1099 forms are issued in January. Please notify your Account Executive immediately if there have been, or will be, any changes to your demographic information, including, but not limited to: address, phone or fax number, office hours, and/or whether you are accepting new Prestige patients.

Quest Diagnostics® Comprehensive Laboratory Test Menu



Quest Diagnostics® offers both high-quality routine laboratory testing, such as total cholesterol, Pap testing and white blood cell counts, as well as advanced genetic, molecular and other specialty tests. Their portfolio includes more than 3,000 tests with specialized expertise in cancer, cardiovascular diseases, infectious diseases, neurology and more.

Explore the Quest Diagnostics Test Center at www.questdiagnostics.com/testcenter/TestCenterHome.action to learn more about available tests designed to meet the needs of a diverse patient population.

Additionally, Quest Diagnostics has more than 700 scientific experts on staff to connect you with the information you need. To browse the directory of scientific staff, visit www.questdiagnostics.com/home/physicians/professional-consult.

For providers who are not current Quest Diagnostics clients, it is easy to set up an account and get up and running. Call **1-866-MYQUEST (1-866-697-8378)**, and select 1 and then 8 to set up a new account. If you require further assistance, call Prestige Provider Services at **1-800-617-5727**.

New Prestige Coordinated Care Unit To Handle DME, Home Health and Home Infusion

All of our DME, home health and home infusion services are now being handled by the Prestige Coordinated Care Unit. You can contact the Coordinated Care Unit at **1-855-371-3960**.

Prior Authorization Reference Tools

Prestige Health Choice provides prior authorization benefit resources to assist in determining whether or not prior authorization is required for specific procedures. The Prior Authorization Reference Guide is a concise and helpful document, that makes it clear what common services or procedures are, or are not, covered by the Plan. This includes a listing of stat labs and procedures that do not require prior authorization.

Prestige is committed to serving the provider network, and delivering the necessary tools to help answer common questions and improve efficiency, to help provide quality care.

The Prior Authorization Reference Guide, as well as all required prior authorization request forms, can be found on both the Prestige prior authorization and forms pages:

www.prestigehealthchoice.com/provider/itn/resources/prior-authorization.aspx

www.prestigehealthchoice.com/provider/itn/resources/forms.aspx

If you have any questions or need assistance, please call Provider Services at **1-800-617-5727**.

Billing for CHCUP

As a friendly reminder, don't forget to fill out all claim forms completely to help avoid unnecessary denials. Check the details below to ensure your form is filled out properly.

All claims submitted for Child Health Check Ups must contain the following information:
Box 24H. (EPSDT) Family Plan (listed next to the days and units box) must have the correct referral code.

Acceptable Referral Codes for CHCUP:

U - Complete Normal - Indicator is used when there are no referrals made.

2 - Abnormal, Treatment Initiated - Indicator is used when a child is currently under treatment for referred diagnostic or corrective health problem.

T - Abnormal, Recipient Referred - Indicator is used for referrals to another provider for diagnostic or corrective treatments or scheduled for another appointment with check-up provider for diagnostic or corrective treatment for at least one health problem identified during an initial or periodic check-up (not including dental referrals).

V - Patient Refused Referral - Indicator is used when the patient refused a referral.

Providers who bill electronically using the 837P format must select the appropriate response for ASC X12N 837: Loop 2300 element CRC02 - "Was an EPSDT referral given to the patient? (Yes or No)" and provide the appropriate condition indicator in element CRC03 of the electronic claims file. Completion of elements CRC02 and CRC03 are required for electronic claims. Providers who submit EPSDT paper claims must complete field 24H (EPSDT Family Plan) on the CMS1500 claim form.

This information can also be found in the Provider Manual under child health check-up. The Provider Manual is available on the Prestige site at:

<http://www.prestigehealthchoice.com/pdf/provider/itn/provider-manual.pdf>

Please be aware that incomplete or incorrect claim forms may be denied.



HEALTH CHOICE®

Leading the Way to Quality Care

9250 NW 36th St.
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Healthy Behaviors Program

Prestige has initiated a series of Healthy Behaviors Programs to encourage members to achieve their health goals, through regular and follow-up visits with their health care providers. These include Well-Child, Diabetes Care, Behavioral Health, and Maternity.

If you have any questions, call Provider Services at **1-800-617-5727**.



Zika Virus in Florida

Zika fever is a mild febrile illness caused by a mosquito-borne virus similar to those that cause dengue and chikungunya infection. Only about 1 in 5 people infected with Zika virus are symptomatic. Severe disease requiring hospitalization is uncommon.

It is important to make sure that you have a mechanism in place for getting the fastest, as well as the latest and greatest updates on communicable diseases and other public health issues that concern you, your family, and your patients. Now is the time to connect in order to keep current on news and events that are clinically relevant. Having a source that you can recommend to your patients is also very important. You can use the resources listed below to provide detailed and accurate information to help keep their apprehension low and bring calm to your busy practice.

You can visit Prestige Health Choice at <http://www.prestigehealthchoice.com>, and bookmark the Florida Department of Health's Zika virus page, http://www.floridahealth.gov/diseases-and-conditions/zika-virus/index.html?utm_source=flhealthIndex, to make it quick and easy to get important public health information.