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This quick reference guide was created for your convenience.

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#### **Provider Portal**

- Please visit <https://e-apply.ccpcares.org/> to request access to CCP's provider portal, PlanLink.

#### **Enrollee Eligibility Status Verification**

- Online verification of enrollee eligibility available: <http://planlink.ccpcares.org/> or you may also contact Community Care Plan at:
  - Phone: 954.622.3499
  - TDD/TYY: 855-655-5303

#### **Benefits**

- Please visit <https://ccpcares.org/Providers/MHS> for health plan documents V'

#### **Authorizations**

- Submit online authorization requests: <http://planlink.ccpcares.org/>
- For an updated list of services requiring prior authorization: <https://ccpcares.org/Providers/MHS/ServicesRequiringPriorAuthorization#ServicesRequiring>
- Online verification of authorization status: <http://planlink.ccpcares.org/> or you may also contact Community Care Plan at 954.622.3499 or 855.655.5303

#### **Claims Processing**

- Electronic claims submission
  - Clearinghouse: Availity
  - Payer ID: 59064
  - Claims Registration: [www.Availity.com](http://www.Availity.com)
- Paper claims that require attachments or claims appeals should be mailed to:
 

CCP Claims Department  
P.O. Box 849029  
Pembroke Pines, FL 33084
- Electronic Remittance: [www.Availity.com](http://www.Availity.com)
- Online verification of claims status: <http://planlink.ccpcares.org/> or you may also contact Community Care Plan at 866-930-0944.
- Claims appeals must be submitted using the CCP Request for Reconsideration Form within 60 days from date of denial. Form is available at <https://ccpcares.org/Forms>
- Electronic Funds Transfer (EFT): <https://ccpcares.org/ElectronicFundsTransferRequestForm>

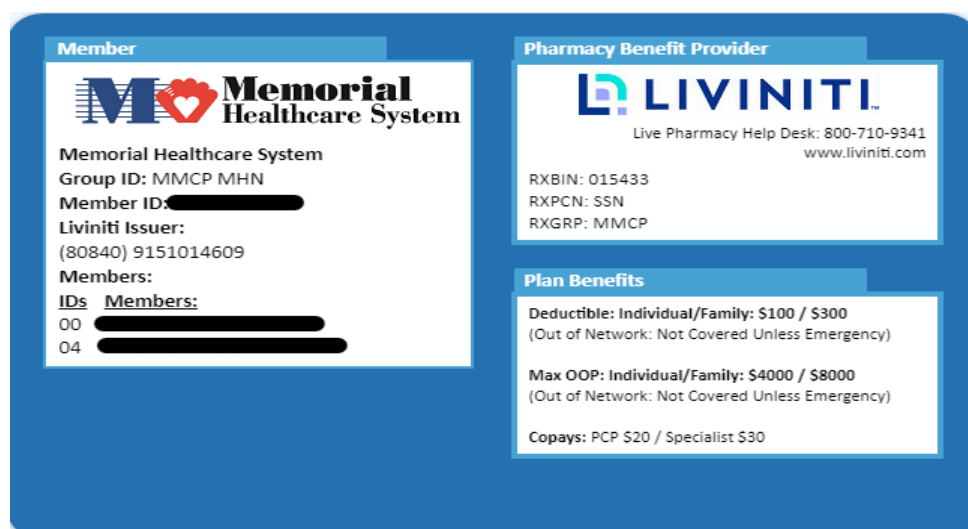
#### **Vendors:**


Service	Vendor Name	Phone Number
Pharmacy	Liviniti	800.710.9341
Behavioral Health	Evernorth	888.736.7009
Chiropractic Services	ChiroAlliance	877.434.8258
Fertility Program	Progeny	888.597.5065

**ATTENTION PROVIDERS AND OFFICE MANAGERS:**  
**Community Care Plan administers health benefits for**  
**Memorial Employee Health Plans**

**IMPORTANT THINGS TO KNOW**

- Please continue to submit claims electronically to our EDI clearinghouse, Availity.
- If you use another vendor for your clearinghouse services, please contact them to ensure connectivity to Availity is in place as soon as possible.
- The phone number for Availity's Customer Service Department is 800.282.4548.
- Please note CCP's electronic payer ID is 59064.



Member	Pharmacy Benefit Provider
 <b>Memorial Healthcare System</b> Group ID: MMCP MHN Member ID: [REDACTED] Liviniti Issuer: (80840) 9151014609 Members: IDs Members: 00 [REDACTED] 04 [REDACTED]	 Live Pharmacy Help Desk: 800-710-9341 www.liviniti.com  RXBIN: 015433 RXPCN: SSN RXGRP: MMCP
<b>Plan Benefits</b>  Deductible: Individual/Family: \$100 / \$300 (Out of Network: Not Covered Unless Emergency)  Max OOP: Individual/Family: \$4000 / \$8000 (Out of Network: Not Covered Unless Emergency)  Copays: PCP \$20 / Specialist \$30	

**COMMUNITY CARE PLAN** greatly values its relationship with our healthcare provider community, and remains committed to continually enhancing our services to you. If you have any questions regarding the information contained in this letter, please contact CCP's Provider Operations Department at 855.819.9506, or your Provider Operations Representative.

Best regards,  
Community Care Plan  
Provider Operations Department



## ***ATTENTION: Office Managers***

### **Did you know you can obtain EOB's through Availity?**

A 15-minute training course is available to all users which covers ERA enrollment as well as the tools available once ERA delivery is complete.

Please note:

- Users will need to be logged into Availity to access the course
- If you have a login under the CCP payer account, you should be able to access it as well, please follow the steps below.

### **Receiving Community Care Plan ERAs through Availity**

You will need to be registered with Availity and logged into the portal to access the Learning Center.  
<https://www.availity.com/>

Option 1:

- Once Logged in, click on Help & Training at the top right corner of the screen. Then, select Get Trained. You will be linked to the Availity Learning Center.
- At the top of the screen there is a search bar. Type in "Remittance Solutions" and an option will appear for a 15-minute training demo. Select this and follow on-screen instructions to enroll and watch the course.

Option 2:

- Alternatively, under the Help & Training there is another option Find Help. This is a search engine that will provide topics based on the keywords entered. We recommend entering the following:
  - o Electronic Remittance Advice (ERA) Enrollments
  - o Remittance Viewer
  - o Getting Access to Your Organization's ERAs

Should you have any questions regarding this memo please feel free to contact your assigned provider representative or the provider Operations hotline at 1 (855) 819-9506



## Claims

### CCP Claims Submission Information

Claims should be submitted promptly after the service is provided. Providers shall have six months from the date of service to submit clean claims in accordance with the Community Care Plan. As a guide, further detail on clean claims submittal can be accessed in the Provider Reimbursement handbooks, CMS-1500 or UB-04. All Community Care Plan handbooks can be found at [ccpcares.org](http://ccpcares.org)

CCP understands that the use of electronic healthcare transactions is of great value to the provider community. CCP, along with its strategic partner Availity, are working together to promote the adoption and use of electronic health care transactions including claim transactions and electronic remittance advice, so that your organization can take better advantage of the savings available through HIPAA.

If you are currently submitting paper claims to CCP, or using a clearinghouse that is unable or unwilling to submit claims electronically to CCP, you have options available to you that will allow you to send electronic claims to CCP and start saving time and money today!

We are excited to offer an enhanced free claim direct data entry option and ERA portal for your use. This option enables providers to conduct business with CCP using the following methods. These are entirely sponsored by CCP, at no cost to you:

- Enter and submit claims, receive electronic remittance advice, and exchange other electronic transactions using a browser-based application over the Internet. Directly transmit HIPAA compliant ANSI transactions over a secure direct connection.
- **If you are currently registered with Availity, please visit [Availity](http://www.availity.com) to access the Availity Portal for CCP**
- **If you are not currently registered with Availity, please visit [www.availity.com](http://www.availity.com) to get registered to use the Availity Portal for CCP**
- **For assistance with registration to the Availity portal, click on in the Availity website [\(New Registration\)](#) to access an on-demand training video**
- **CCP Payor ID'S MHN, PCC, Upfund, CCP Employee, BCG, BRHPC, # 59064. CCP-MMA # 59065. FHK # FHKC1. PPUC #BHPP1.**

To learn more about these options, visit [www.availity.com](http://www.availity.com) or contact Availity at 1-800-282-4548. We know you will enjoy industry leading products and services that will bring value to your organization!

*Paper claims that require attachments or claim appeals should be mailed to the CCP Claims Department, visit [ccpcares.org](http://ccpcares.org) for the correct mail to address. Any Inquiries regarding claims payment may be directed to the CCP's Customer Service Department by calling 1-866-899-4828. Third Party Liability – It is the provider's responsibility to notify CCP if an enrollee has coverage in addition to CCP.*



## Provider Notice

**Date:** January 27<sup>th</sup>, 2023

**To:** All Community Care Plan Providers

**Subject:** New Guest Eligibility Lookup Feature

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Community Care Plan (CCP) is pleased to announce a new feature which makes it easier for your office staff to verify real-time eligibility and benefits for any of your patients with a health plan managed by CCP. The new “Guest Eligibility” feature of our provider portal, PlanLink, allows your staff to input key member information and receive instant verification of member eligibility and benefits, without the need for a user account or login credentials.

The new Guest Eligibility feature provides access to:

- Member eligibility status and effective date
- Member’s current PCP assignment (when applicable)
- Links to benefit information such as copays and covered services
- Remaining Family and Individual Deductibles (when applicable)
- Remaining Max Out of Pocket for Family and Individual (when applicable)

**NOTE:** For Memorial Healthcare System employee plan members (MMCP/ MCHP), you will need to enter the 2-digit suffix for each member for a successful search. Ask the member to provide you the 2-digit suffix found on their MyChart virtual ID card. (Typically, 00 for the employee, then 01, 02, 03, etc. for any dependents.)

As a reminder, a PlanLink user account and login credentials are required to access electronic authorization requests and electronic claim appeal/claim corrections. (PlanLink login credentials are not granted to third-party vendors, only to contracted providers.)

Please see the attached Guest Eligibility User Guide for detailed information.

If you have questions about this notice or need help using Guest Eligibility, please contact Community Care Plan at [PlanLink@ccpcares.org](mailto:PlanLink@ccpcares.org)

## **GUEST ELIGIBILITY LOOKUP VIA PLANLINK PROVIDER PORTAL**

Providers who need to verify member eligibility and benefits, but do not have a PlanLink user account may use Guest Eligibility to access information such as eligibility status, PCP assignment, deductible/OOP max (when applicable), and benefits. See instructions and more details below.



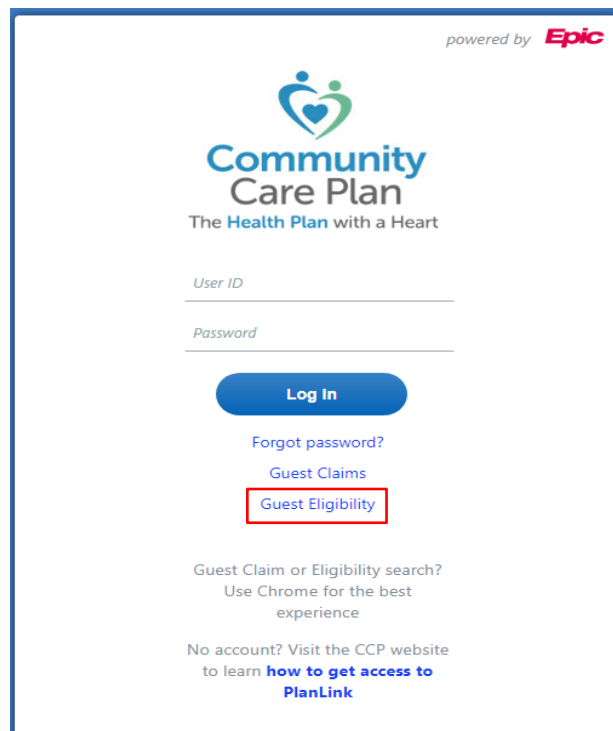
Try It Out

### **Using Google Chrome Go to the PLAN LINK login page**


- For the best experience, we highly recommend using **Google Chrome** as your web browser for Guest Eligibility. With Chrome, authentication with reCAPTCHA is required only once every 24 hours. (With other browsers, reCAPTCHA is required with every search.)
- Copy/paste this URL into Chrome [PlanLink.CCPcares.org](https://PlanLink.CCPcares.org) or go to our home page [CCPcares.org](https://CCPcares.org) and select “Provider Login”



- Click the “Guest Eligibility” hyperlink located under the “Log In” button.




- d) The “Verify Eligibility” page will display. To check eligibility status, simply enter a few key pieces of information (as indicated in the screenshot below). Using this search tool, you can check current eligibility, or up to one year back.

Verify Eligibility


To view eligibility status for CCP members, we will need a few pieces of information. Please be advised that after five unsuccessful attempts, access to this search page will be blocked. To unlock search access, call the PlanLink support desk at (844) 514-1494 and press option 1, or press option 2 for general questions about Guest Eligibility lookup. For new plan members, please allow 24 hours for eligibility to display due to file processing time.







1 Who is requesting information?

Enter one of the following:  
A) Provider NPI  
B) Vendor Tax ID **(Recommended)**


Provider NPI   
Vendor Tax ID    
**(Recommended)**


2 Who are you verifying eligibility for?


The following are required to look up the member:  
A) Member ID  
B) Date of Birth  
C) Legal Sex

Member ID   card"/>  
Date of Birth     
Legal Sex    

What date do you want to verify eligibility for?  
If no date is entered, we will check current eligibility.

View eligibility as of:  

☐ I'm not a robot   
reCAPTCHA  
Privacy - Terms

 Search

e) In the first section: “Who is requesting information?”

- You must enter *either* the Provider NPI *or* the Vendor Tax ID (NOT both):
- We recommend that you **enter Vendor Tax ID ONLY**

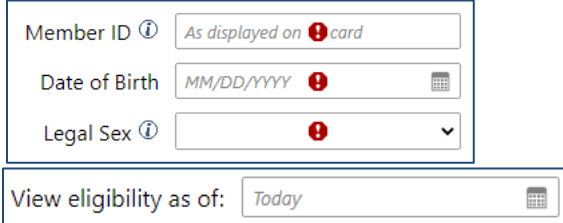
Provider NPI  

*NOTE: If you search using an NPI number, it must be the individual NPI, not the group NPI*

OR...

Vendor Tax ID    
**(Recommended)**

**f) In the second section “Who are you verifying eligibility for?”**

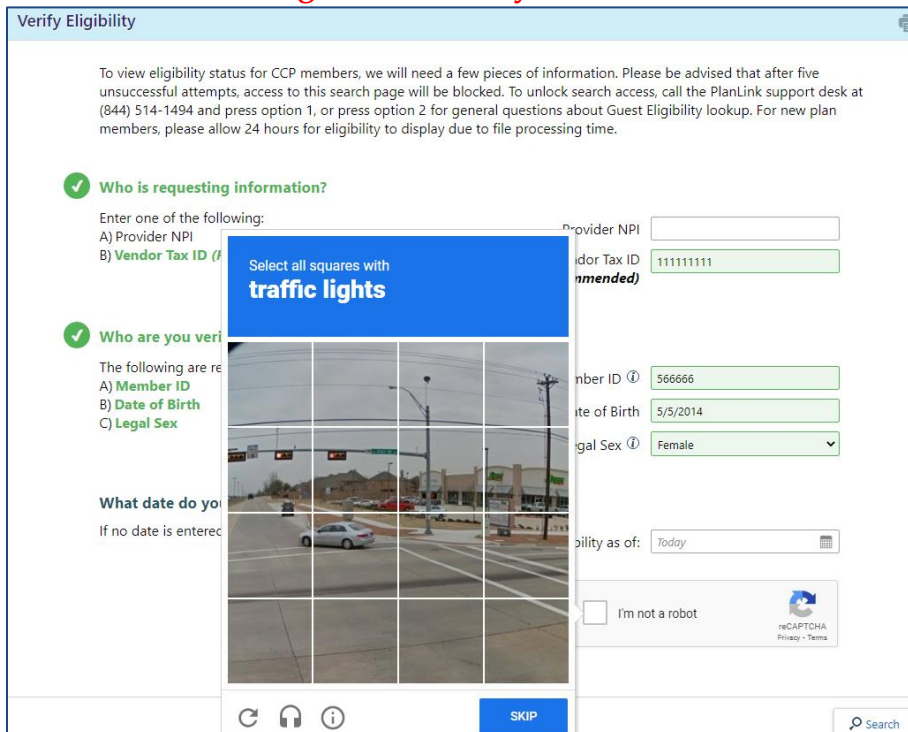


- Enter the Member ID exactly as it is displayed on their insurance ID card  
*If the ID has a suffix such as 00, 01, 02, etc. be sure it is included. (e.g. 555555502)*

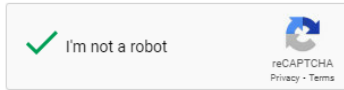
**NOTE:** For Memorial Healthcare System employee plan members (MMCP/ MCHP), you will need to enter the 2-digit suffix for each member for a successful search. Ask the member to provide you the 2-digit suffix found on their MyChart virtual ID card. (Typically, 00 for the employee, then 01, 02, 03, etc. for any dependents.)

- Enter the Member Date of Birth
- Then enter the Member Legal Sex
- If you do not select a date to view the eligibility search as of, it defaults to search for eligibility as of today’s date. You can search up to one year in the past.
- If the member is not eligible as of the date indicated, or if any criteria are invalid, you will receive this message: “Unable to find a member based on your criteria”.

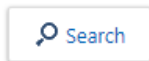
**g) Once all of the information has been entered, you must pass the reCAPTCHA authentication process by clicking the box “I’m not a robot.” As a reminder for best results **we recommend Google Chrome as your web browser** for Guest Eligibility searches.**



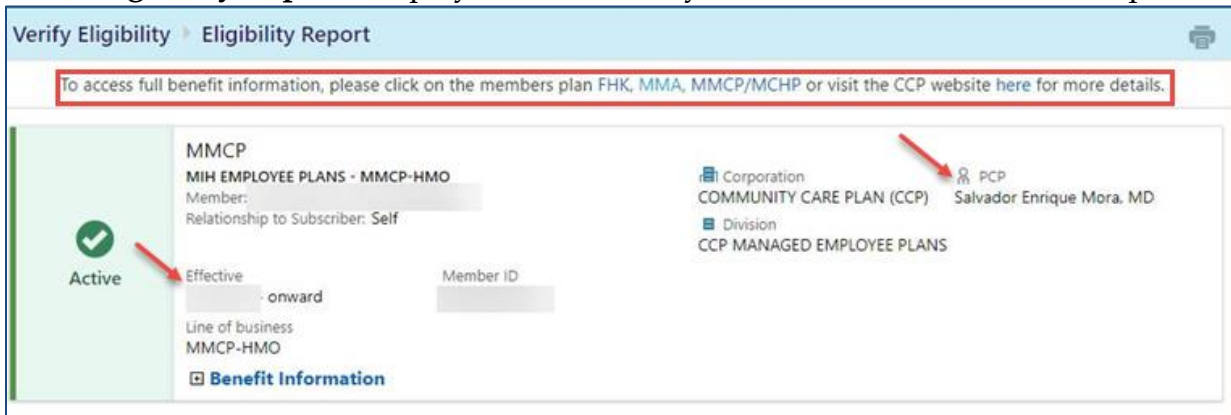
- h) After being authenticated, you will see a checkmark next to “I’m not a robot”.



- i) Click “Search” on the lower right hand of the page:



- j) The “Eligibility Report” displays the results of your search similar to the example below:



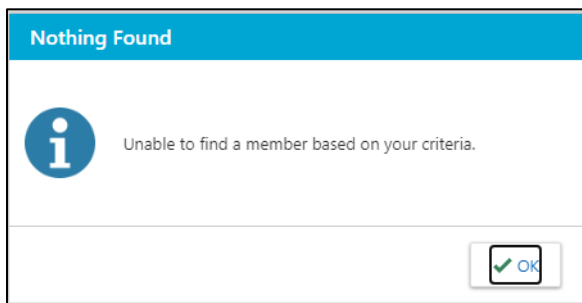
**NOTE:** Deductibles and MOOPs are not applicable for all CCP-managed plans.

*(If you have a patient who is currently eligible for more than one health plan managed by CCP, you will need to search eligibility for each plan separately, based on the member ID displayed on the ID card. Only one plan will display at a time.)*

- k) If you need benefit information such as copay amounts and/or a list of covered services, click on the appropriate link at the top of the results page:

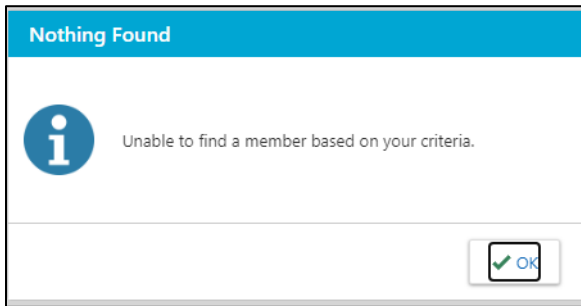
To access full benefit information, please click on the members plan [FHK](#), [MMA](#), [MMCP/MCHP](#) or visit the CCP website [here](#) for more details.

- l) If the member is not eligible for the date indicated, or if any criteria are invalid, you will receive the following message:

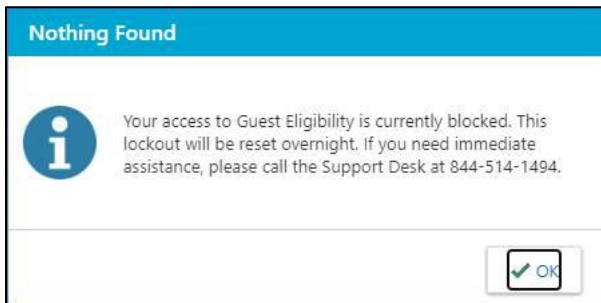


## IMPORTANT INFORMATION

If incorrect information is entered on the “**Verify Eligibility**” page, you will be informed that no results matched the search process:



After **five failed search attempts** using the same NPI or Tax ID, the system will block either number until an administrator reactivates them. In this circumstance, the user will see the following screen:



## GUEST CLAIMS LOOKUP VIA PLAN LINK PROVIDER PORTAL

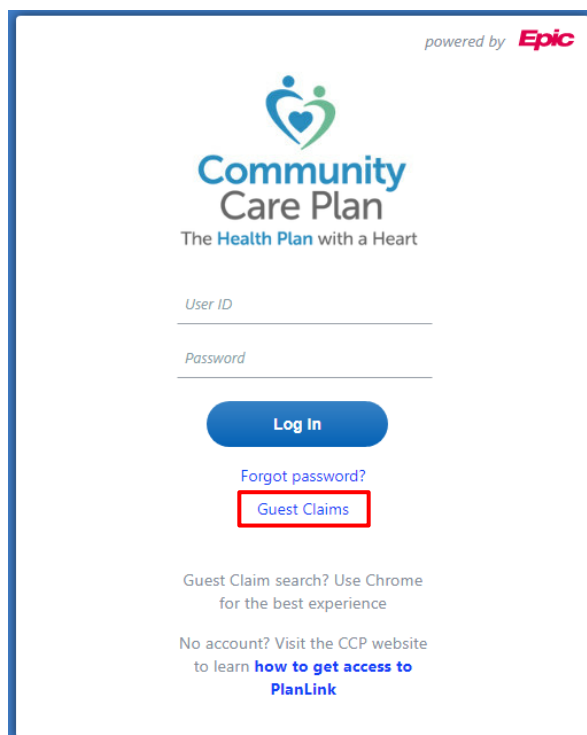
*Providers who submit claims or need to verify claim status, but do not have a PlanLink user account may use Guest Claims to look up claim information such as claim status and paid amount, etc. See instructions and more details below.*



Try It Out

### Go to the **PLAN LINK** login page using Google Chrome

- For best experience, we **highly recommend the use of Google Chrome** as your **Web browser** for Guest Claims. With Chrome, authentication with reCAPTCHA will be required just once every 24 hours. (With other browsers, reCAPTCHA is required with every search.)
- To log in, copy/ paste this URL into Chrome web browser: [PlanLink.CCPcares.org](https://PlanLink.CCPcares.org)
- Click the “**Guest Claims**” hyperlink located on the login screen as indicated below:



powered by **Epic**

**Community Care Plan**  
The Health Plan with a Heart

User ID \_\_\_\_\_

Password \_\_\_\_\_

**Log In**

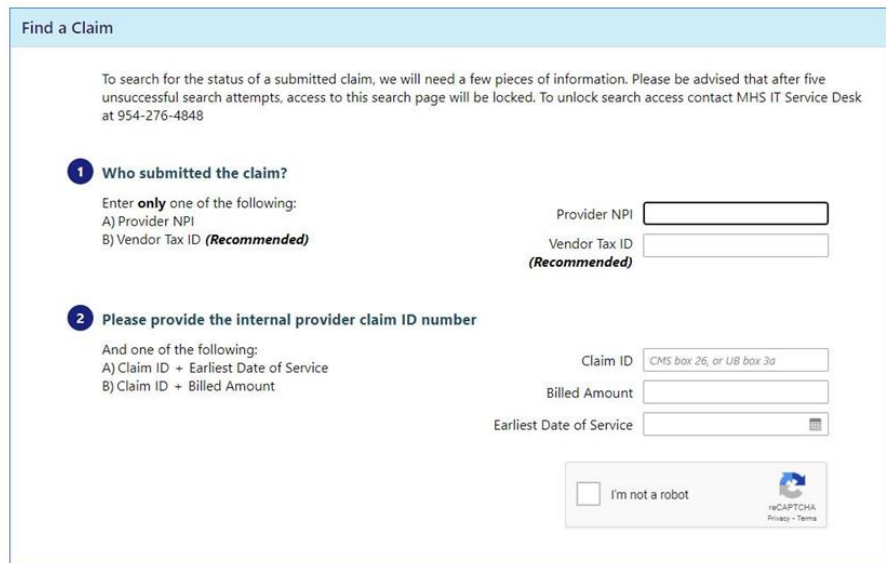
[Forgot password?](#)

[Guest Claims](#)

Guest Claim search? Use Chrome for the best experience

No account? Visit the CCP website to learn [how to get access to PlanLink](#)

- d) The “**Find a Claim**” page displays. To search for the status of a submitted claim, the user is required to enter a few key pieces of information. You can check claims that are up to 2 years old using this search tool.



In the first section:

- We recommend that you **enter the Tax ID ONLY**
- You must enter **one of the following (NOT both):**

Provider NPI

Or



Vendor Tax ID   
**(Recommended)**

*If you choose to enter the NPI, it should reflect the **rendering** provider's individual NPI.*

**Recommended**

In the second section:

- Enter the Claim ID:

Claim ID

- Claim ID= Patient's Account No. from box 26 on a CMS claim
- Claim ID= Pat Cntl # from box 3a on a UB claim

- Then enter **either** the Billed Amount

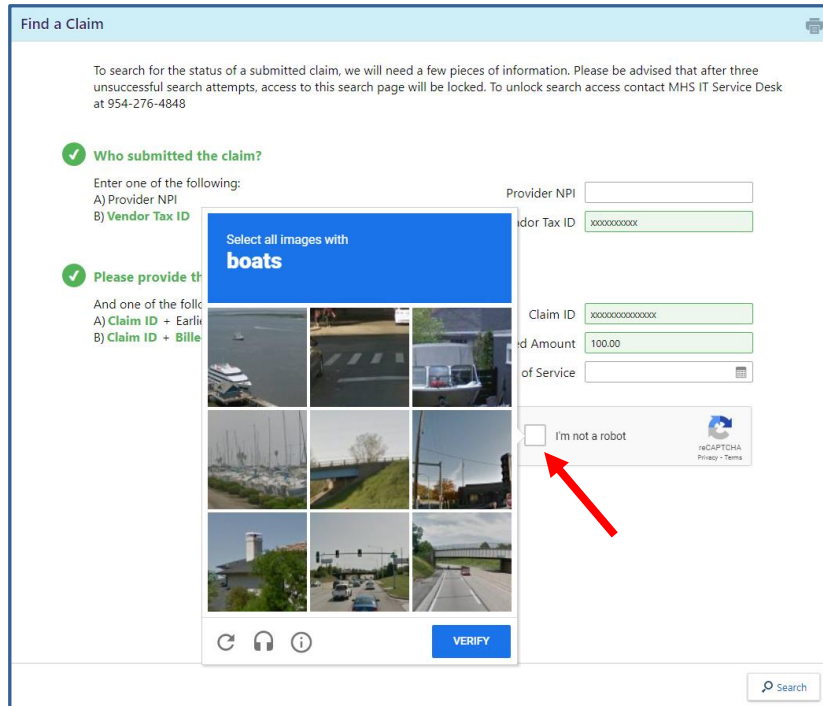
Billed Amount

**Or...**

The Earliest Date of Service

Earliest Date of Service

- e) Once the information has been entered, you must pass the reCAPTCHA authentication process by clicking the box “I’m not a robot.” As a reminder, for best results **we recommend that you use Google Chrome as your web browser** for Guest Claim searches.



**Find a Claim**

To search for the status of a submitted claim, we will need a few pieces of information. Please be advised that after three unsuccessful search attempts, access to this search page will be locked. To unlock search access contact MHS IT Service Desk at 954-276-4848

✓ **Who submitted the claim?**  
Enter one of the following:  
A) Provider NPI  
B) Vendor Tax ID

Provider NPI   
Vendor Tax ID

✓ **Please provide the claim information**  
And one of the following:  
A) Claim ID + Earliest Date of Service  
B) Claim ID + Billable Amount

Claim ID   
Billable Amount   
Date of Service

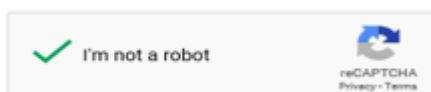
Select all images with boats

☐ I'm not a robot

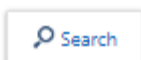
VERIFY

Search

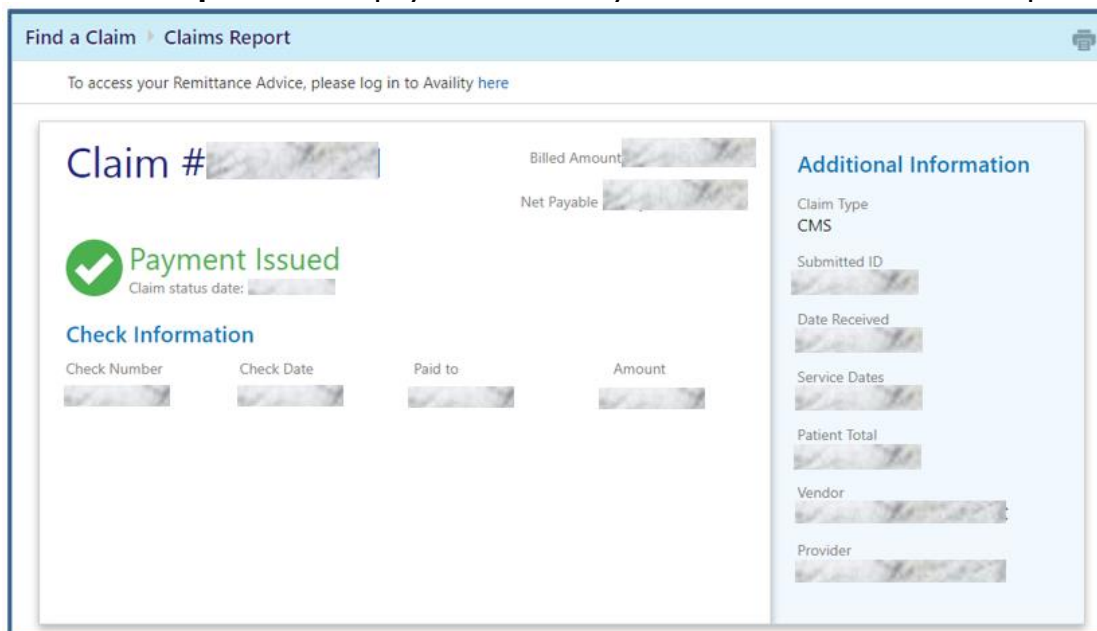
- f) After being authenticated, you will see a checkmark in the reCAPTCHA field.



- g) Then click “Search” on the lower right hand of the page:



h) The “**Claims Report**” will display the results of your search similar to the example below:



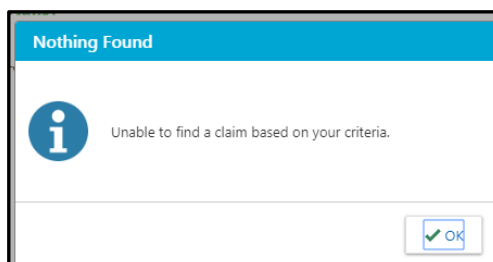
The screenshot shows the 'Find a Claim' > 'Claims Report' page. At the top, it says 'To access your Remittance Advice, please log in to Availity here'. The main content area displays a 'Claim #' field, a 'Billed Amount' field, and a 'Net Payable' field. A green checkmark icon indicates 'Payment Issued' with a 'Claim status date' field. Below this is a 'Check Information' section with fields for 'Check Number', 'Check Date', 'Paid to', and 'Amount'. On the right side, there is an 'Additional Information' section with fields for 'Claim Type' (CMS), 'Submitted ID', 'Date Received', 'Service Dates', 'Patient Total', 'Vendor', and 'Provider'.

i) If you need to access the Remittance Advice, please click the link to Availity at the top of the page:

To access your Remittance Advice, please log in to Availity [here](#)

## IMPORTANT INFORMATION

If incorrect information is entered in the “**Find a Claim**” page, you will be informed that no results matched the search process:



The screenshot shows a 'Nothing Found' message. It features a blue header with the text 'Nothing Found'. Below the header is a large blue circle with a white 'i' icon. To the right of the icon, it says 'Unable to find a claim based on your criteria.' At the bottom right, there is a button with a green checkmark and the text 'OK'.

After **five failed search attempts** using the same NPI or Tax ID, the system will block either number until an administrator reactivates them. In this circumstance, the user will see the following screen:

### Nothing Found



You have been locked out for unsuccessful attempts. For assistance, please contact the MHS Service Desk at 954-276-4848.

