Updated Information for Providers and Patients
Affected by Hurricane Michael

Per Governor Rick Scott’s Executive Order (18-276) due to Hurricane Michael, we are committed to offering affected members and providers (within the 35 counties) additional support and information. If you are a provider in the impacted area – or a provider outside the impacted area and are caring for patients who have been affected – please read the important information below.

Counties Included in Executive Order:

Authorization and Claims Processing Changes for Affected Providers and Members*

Authorizations/Prior Approvals
- Florida Blue has relaxed referral and prior authorization requirements for all service types during this time. If you are unable to obtain prior authorization, please proceed with providing treatment.
- Florida Blue members who have evacuated from the affected counties may seek medical care at any facility and they will be covered at the in-network level.
- Retroactive authorizations are not necessary.

If You Still Want to Obtain an Authorization or Prior Approval
- Authorizations and certifications can be entered and verified electronically through Availity®.
- If you’re unable to verify or enter authorizations online, contact the Florida Blue utilization management center at 800-955-5692.
- If affected members are new to your practice and you need to view their medical history, you can use the up-to-date online capabilities through Availity®'s Patient Care Summary.
  - The Patient Care Summary is a longitudinal care record that displays up to 24 months of a patients’ medical claims history including diagnoses, procedures, prescriptions, lab results and laboratory services performed by all of their providers. Your organization’s user administrator can grant access to you to view the Patient Care Summary if you do not already have it.
  - There are two options to access the Patient Care Summary after you have logged into availity.com:
    1. Access Eligibility and Benefits Inquiry through the Patient Registration menu. Click on the Patient Care Summary button that appears on the Eligibility and Benefits Results page.
    2. Click on the Patient Care Summary standalone link located within the Patient Registration menu and complete the required fields.
- Care and coding reminders, if applicable, are available when running an eligibility and benefits inquiry. They are displayed on the Eligibility and Benefits Results page.

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Special Note:
- Some employer groups have requested their employees’ data not be included, which will prevent the Patient Care Summary button from appearing.
- Individual members can elect not to have their claims data displayed; you will receive a message after you click on the button indicating the member is excluded.
- If you cannot view the patient’s data, please talk with the patient to obtain the information.

Claims
- Claims with dates of service from October 9 through the emergency order end date will not be denied due to lack of authorization for those providers from the impacted counties. For Medicare this is effective through December 8, and for all other members this is effective through November 8.
- Claims will be reviewed for medical necessity prior to payment, in accordance with the member’s contract benefits.

*These changes do not apply to the following Plans:
- Federal Employee Program®
- Self-funded ERISA plans

Member ID Card Guidelines
Please accept ID cards from Florida Blue or other Blue Plan members even if you’re unable to communicate with us. Here are a few general guidelines to remember if you’re unable to follow normal business procedures.

Accept the Card Guidelines
1. Verify member eligibility and benefits electronically through Availity.
2. If you can’t verify member eligibility and benefits electronically, contact the Florida Blue Provider Contact Center at 800-727-2227.
3. If you’re unable to verify member eligibility and benefits electronically or by phone:
   - Accept a valid Florida Blue ID card and picture ID, or
   - Accept a Florida Blue universal application, acknowledgement/acceptance letter and picture ID.
4. If you can’t submit claims electronically:
   - Hold electronic claims for up to 14 calendar days or until service is restored.
   - If you convert electronic claims to paper claims, purge the electronic claims from your system to avoid duplicate claim submissions.

Emergency Supply of Drugs
Florida Blue is allowing members in all Florida counties affected by Hurricane Michael to get an early refill of their medications.

Prime Therapeutics has provided all in-network pharmacies within the state of Florida authorization codes to fill a 30-day emergency supply upon request. Florida Blue members who have been affected by Hurricane Michael may receive an early refill on their maintenance medication up to a 30-day supply fill until November 5, 2018.

For controlled substances, specialty and prior authorization overrides, members may call the number on the back of their member ID card for emergency refill requests. Pharmacies and providers may call the commercial pharmacy help desk at 888-877-6323 or the Medicare pharmacy help desk at 888-877-6420.
Additional Services Offered to All Residents of Impacted Area

Florida Blue also is offering the following health services to residents (not just Florida Blue members) of impacted areas:

- For non-emergency medical care, any resident of an evacuation zone who has online or phone access can receive free care from a medical professional 24 hours/day through Teladoc. Residents can visit teladoc.com/michael or call the hotline at 855-764-1727. No insurance is required.

- A free bilingual help line for emotional support, available 24 hours/day at 833-848-1762. Florida Blue, in partnership with New Directions Behavioral Health, is offering the support line for both English and Spanish speakers. No insurance is required.