

Who is Coastal?

Coastal Care Services, Inc., provides home care services so that patients can live your life the way you want to. Our core staff members have more than 100 years of combined healthcare experience, coordinating a variety of services to include Durable Medical equipment, Home Infusion services and Home Health Services, Skilled Nursing, OT, PT and Speech Therapies and Home IV via its provider network throughout the state of Florida. Our dedicated team will meet or exceed our client's expectations providing the best quality of service and providing a One Point of Entry for coordinating services.

How do I join the network?

Coastal is currently accepting all Medicare/Medicaid certified providers in the state of Florida that provide DME, Home Health, or IV services.

You may begin the process of joining our network by filling out a Credentialing Application that can be found on our website at www.ccsi.care under the "Information for Providers" tab or by emailing the Provider Relations department at ProviderRelations@ccsi.care

Network Manager: Viviana Pietri
Phone: 855-481-0505 ext 8903

How Do I Submit Claims?

For Paper Claims, please mail the claims to:

Coastal Care Services, Inc.
Attn: Claims Department
7875 NW 12 Street, Suite 200
Miami, FL 33126

For Electronic Claims:

Please contact Emdeon at 1-877-363-3666
Payer ID# 47394 (Effective 9/1/2015)

How Do I request an Authorization?

All Services Require authorization. Please complete Coastal authorization request form (available at www.ccsi.care/Provider info) and submit along with signed orders and pertinent clinical information to our UM department via Fax at: **1-855-481-0606**.

Will Coastal Honor the MMA continuation of Care Policy?

For Non-Par Providers

Absolutely. If you are currently servicing a member that is now managed by Coastal, we urge you to contact our Provider Relations Department and become a Network Provider. If you do not wish to join our network, Please contact our Provider Relations department and notify us of the services the member is currently receiving. We will make arrangements to have the member transitioned to an In-Network Provider within 60 days.

For the first 60 days, Coastal will process all claims at your currently contracted rate (claims department will require ONE EOB to be submitted as proof of contracted rate. This can be submitted with your first batch of claims or be sent directly to Viviana Pietri). Claims will not deny No Authorization for the first 60 days (or as required by Health Plan).

For Par Providers

Yes, Coastal Par providers are encouraged to continue service on their current active patients. A list of current active members including Patient Name, Id Number, Start of Care Date, and Equipment Details should be sent to the Provider Relations Department. An Authorization will be sent to the provider within 60 days of Coastal's "Go-Live" date with the Health Plan. Claims for the first 60 days for all par-providers on continuation of care members will be processed without denials for No Authorization.

Transition Date

Providers should contact the Members' Health Plans directly for Coastal effective dates as each Health Plan Coastal will begin managing may have a different start date.

Providers can also periodically check our website for notifications as we will be updating pertinent Transition information as it becomes available to us.

Important Contact Information

Address:
7875 NW 12 Street, Suite 200
Miami, FL 33126

Phone: 855-481-0505
Fax: 855-481-0606

Website: www.ccsi.care