

EXTERNAL FACT SHEET

FAMILY CARE SPECIALISTS IPA			
FCS Primary Care Locations		Boyle Heights, Highland Park, Los Angeles, Glendale, Whittier and Montebello	
Toll-Free Number	(800) 699-9534	Website	https://www.fcsmg.com/
Network Coverage Area	Los Angeles County	Lives	8,000+
Tax ID	95-4582615	NPI Number	1740233725

HEALTH PLAN CONTRACTS	
HEALTH PLANS	PRODUCT LINES
Alignment Healthcare	HMO: Medicare Advantage
Anthem Blue Cross	HMO: Commercial and POS
Blue Shield of CA	HMO: Commercial, POS and Medicare Advantage (<i>eff. 01/01/2021</i>)
Blue Shield Promise Health Plan	HMO: Cal MediConnect and Medi-Medi
Brand New Day	HMO: Medicare Advantage and Medi-Medi
Central Health Plan	HMO: Medicare Advantage and Medi-Medi
Cigna	HMO: Commercial and POS
Health Net	HMO: Commercial, Medicare Advantage, Medi-Medi and POS
L.A. Care Health Plan	HMO: Covered California, Medi-Cal, Medi-Medi and Medicare
UnitedHealthcare	HMO: Commercial
WellCare of CA (Centene)	HMO: Medicare Advantage, Medi-Medi and POS

HOSPITAL NETWORK	
Adventist Health Glendale	Glendale Memorial Hospital
Beverly Community Hospital	White Memorial Medical Center

DEPARTMENT	FAX NUMBER
Case Management	(818) 686-5127
Inpatient Utilization Management	(818) 686-5125
Outpatient Utilization Management	(818) 686-5126
Authorization Notes**	(818) 686-5128

** If electronic submission is not available, please utilize the above fax number. However, electronic submission via MPM web portal is preferred.

MANAGEMENT COMPANY	MSO contract with MedPOINT Management - https://www.medpointmanagement.com/	
WEB PORTAL USER LOGIN	Access Claims, Cap Reports, Submit Authorization via web portal: Sign up for the web portal here - https://portal.medpointmanagement.com/sign-in	
APPLICATION PREFERRED	CAQH	
CAPITATED SPECIALTIES	LABORATORY	All Lab work must be referred to Lab Corp
	OPHTHALMOLOGY	Paul T. Urrea, M.D., MPH, Inc.
	PODIATRY	Gabriel J. Halperin, D.P.M., Inc.
ELIGIBILITY & BENEFITS	For most current, information, check via Health Plan website	
CLAIMS & ENCOUNTER SUBMISSIONS	Submit Electronic Claims and Encounters through Office Ally – Payer ID: MPM40 Contact Office Ally at (866) 575-4120 or go to https://cms.officeally.com/Register/Register.aspx to set up an account Submit hard copies to P. O. Box 570518 Tarzana, CA 91357	
FIELD REPRESENTATIVE	Field Representative is available to answer any questions or may come to your office for an In-Service. Contact Gustavo Mendes at (818) 702-0100 x1922 or GMendes@medpointmanagement.com	
PROVIDER NETWORK OPERATIONS	Please contact MPM Provider Network Operations with questions and Provider Updates at (818) 702-0100, Prompt 5 or FCS_ProviderServices@medpointmanagement.com	