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FLORIDA MEDICAID

A Division of the Agency for Health Care Administration

Florida Medicaid Health Care Alert

January 12, 2018

Provider Type(s): All

Continuity of Care- Adults with Cystic Fibrosis Waiver, Traumatic Brain and Spinal Cord Injury Waiver, and Project AIDS Care Waiver Program Changes

The 2017 Legislature amended the law to allow individuals who are enrolled in the Adult Cystic Fibrosis (ACF), Traumatic Brain Injury/Spinal Cord Injury (TBI/SCI), and Project AIDS Care (PAC) Waivers to obtain Medicaid coverage through the Statewide Medicaid Managed Care (SMMC) program effective January 1, 2018.

The Agency is committed to ensuring recipients experience continuity of care, meaning that recipients experience no break in services or care coordination while transitioning from one service delivery system to another, one health plan to another, or from one service provider to another. The following is a reminder of the protections that apply for any Medicaid recipient who changes health plans:

Health care providers should not cancel appointments with current patients. Health plans must honor any ongoing treatment that was authorized or scheduled prior to the recipient's enrollment into the new health plan for up to 60 days after the recipient enrolls in the plan.

Providers will be paid. Providers should continue providing any services that were previously authorized, regardless of whether the provider is participating in the plan's network. Plans must pay

providers for previously authorized services for up to 60 days, and must pay non-network providers at the rate previously received for up to 30 days.

Providers should submit claims for reimbursement as soon as possible to Florida Medicaid directly for all services provided through December 31, 2017. Services provided on, or after January 1, 2018 should be billed to the managed care plan in which the recipient is enrolled.

Prescriptions will be honored. Plans must allow recipients to continue to receive their prescriptions through their current provider, for up to 60 days, until their prescriptions can be transferred to a provider in the plan's network.

Additional information regarding continuity of care is available at:

http://ahca.myflorida.com/Medicaid/statewide_mc/pdf/mma/Continuity_of_Care_Requirements.pdf.

If you have a complaint or issue please contact our Medicaid Helpline at 1-877-254-1055 or online at https://apps.ahca.myflorida.com/smmc_cirts/.

Thank you for your continued efforts to ensure a smooth transition.

QUESTIONS? FLMedicaidManagedCare@ahca.myflorida.com

COMPLAINTS OR ISSUES? ON LINE https://apps.ahca.myflorida.com/smmc_cirts/ | **CALL** 1-877-254-1055

The Agency for Health Care Administration is committed to its mission of providing "Better Health Care for All Floridians." The Agency administers Florida's Medicaid program, licenses and regulates more than 45,000 health care facilities and 37 health maintenance organizations, and publishes health care data and statistics at www.FloridaHealthFinder.gov. Additional information about Agency initiatives is available via [Facebook \(AHCAFlorida\)](#), [Twitter \(@AHCA_FL\)](#) and [YouTube \(/AHCAFlorida\)](#).