

## Simply Healthcare Plans, Inc. and Clear Health Alliance EIS and TCM Continuity of Care Processes

This notice serves to provide information to Early Intervention Services (EIS) and Children's Health Targeted Case Management providers concerning Statewide Medicaid Managed Care Program (SMMC) continuity of care (COC) requirements for new members that transition into Simply Healthcare Plans, Inc., inclusive of Clear Health Alliance.

## **Continuity of Care**

SMMC COC requirements for new members requires that we pay for COC services rendered to new enrollees transitioning into the Plan. In the event a new Simply member is receiving prior authorized ongoing course of treatment with any provider, including those services previously authorized under the fee-for-service delivery system or by the enrollee's immediate former managed care plan, Simply is responsible for the costs of continuation of such course of treatment, without any form of authorization and without regard to whether such services are being provided by participating or non-participating providers for up to sixty (60) days after the effective date of enrollment. Simply will reimburse non-participating providers at the rate they received for services rendered to the enrollee immediately before the enrollee transitioning for a minimum of thirty (30) days unless said provider agrees to an alternative rate. Further information pertaining to reimbursement outside of the COC period can be found under the provider manual. Please visit our provider site at: www.Simplyhealthcareplans.com/florida-home

## **Claims Submission**

Please submit SMMC program claims to the following address:

Paper Claims: Florida SMMC

Simply Healthcare Plans, Inc.

P.O. Box 61010

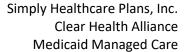
Virginia Beach, VA 23466-1020

Availity	Simply Healthcare	Clear Health Alliance
Payer ID	SMPLY	CLEAR

Electronic Claims:

Please ensure that claims are submitted on a CMS 1500 claim form and include, but are not limited to the following:

- Complete and correct member demographic (i.e., DOB, Medicaid ID, etc.)
- Correct plan information
- Billing and rendering provider MID# and NPI#





- Billing provider Address cannot be P.O.BOX (Medicaid Agency Requirement)
- Member diagnosis
- Procedure code as listed on the Medicaid Program's Medicaid fee schedule
- Procedure Code -Diagnosis Pointer

For additional information and/or assistance concerning EIS and TCM services contracting, billing, or reimbursement please **c**ontact Wendy Wriggins Ernst, Director of Network Relations at 305-487-4430 or Email: <a href="wernstl@simplyhealthcareplans.com">wernstl@simplyhealthcareplans.com</a>