

Hurricane Irma exception information

The following information is to assist providers who rendered services to a Florida Medicaid recipient during the State of Emergency for Hurricane Irma. Please review the following information.

The State of Florida Agency for Health Care Administration is defining the “disaster grace period” for Hurricane Irma as: 12:01 a.m. on September 7, 2017, through 11:59 p.m. on September 21, 2017:

- Without any form of authorization.
- Without regard to whether such services are provided by a participating or nonparticipating provider.
- Without regard to service limitations.

As a result of the impact of Hurricane Irma to the state of Florida an exception period has been implemented until further notice. To obtain authorization and/or payment for services within the exception period, proof of impact will be required.

For Nonparticipating and/or out-of-state providers

Amerigroup will ensure that providers not in the Florida Medicaid system (providers without a Medicaid ID number) who rendered services during the disaster grace period complete the Agency’s provisional (temporary) enrollment process to obtain a provider identification number.

Florida Medicaid enrollment resources

http://portal.flmmis.com/FLPublic/Provider_ProviderServices/Provider_Enrollment/Provider_Enrollment_EnrollmentForms/tabId/58/Default.aspx

Florida Medicaid Out-of-State Provider Application Form

http://portal.flmmis.com/FLPublic/Portals/0/StaticContent/Public/PUBLIC%20MISC%20FILES/OS_App.pdf

Our health plan will reimburse nonparticipating providers at the rates established in the applicable Medicaid fee schedules incorporated by reference in Rule 59G-4.002, F.A.C. and the provider reimbursement rates/reimbursement methodologies published on the Agency’s web page for services rendered to the enrollee during the disaster grace period.

The information in this update may be an update or change to your provider manual. Find the most current manual at:

<https://providers.amerigroup.com>

Authorization information

Beginning Friday, September 22, 2017, Amerigroup will resume its normal operations except as specified: Amerigroup will reimburse for services furnished outside of the disaster grace period without prior authorization and without regard to service limitations or whether such services are provided by a participating provider in those instances where the provider and/or enrollee could not adhere to the policy requirements because of storm-related impacts. If you submit a new prior authorization request for DME or home health services from September 22-September 30, we'll expedite your request.

Services provided before the disaster grace period qualifying under this provision must be due to early evacuations in parts of the state, which resulted in the enrollee receiving care in a different region or out-of-state.

Amerigroup will continue to follow the State of Emergency rules outlined in s. 252.358, F.S., governing the suspension of early prescription refill edits. Members who are affected can fill existing prescriptions early (one time, up to 90-day refill) until further notice or when the governor declares an end to the State of Emergency. Early refills don't include controlled substances.

Claims submission information

Submit claims on original claim forms (*CMS-1500* or *CMS-1450*) printed with dropout red ink. Claims must be typed and not handwritten in large, dark font. AMA- and CMS-approved modifiers must be used appropriately based on the type of service and procedure code.

Mail To:
Florida Claims
Amerigroup Community Care
P.O. Box 61010
Virginia Beach, VA 23466-1010

Frequently asked questions**Who does this process apply to?**

Any provider that provided services to Medicaid recipients during the Hurricane Irma State of Emergency

What are the dates of service applicable?

Between the dates 9/7/17 and the end of the Exception Period.

What if I do not have a Medicaid ID #?

Please refer to our bulletin on "Obtaining a provisional Medicaid ID#" for guidance on how to apply for a number.

Do I need to submit supporting documentation?

Any documentation request will be asked at the point of claims processing.

How will I be reimbursed?

Payments will be issued based on contractual agreements and/or Medicaid Fee Schedule.

Who do I contact for any questions?

You may contact the Provider Services number at 1-800-454-3730.

Mailing Address:

4200 West Cypress Street
Tampa, FL 33607

For electronic claim submission, please use the following trading partner IDs:

Availity: Payer ID **26375**

Emdeon: Payer ID **27514**

Capario: Payer ID **28804**

** Amerigroup will be conducting regular reporting to ensure that Hurricane Irma exception claims are being processed accordingly to AHCA Guidelines.*

Additional provider information and guidelines for Hurricane Irma

http://ahca.myflorida.com/MCHQ/Emergency_Activities/Providers_Update.shtml

Contact us

Provider Services: 1-800-454-3730

Use prompts: Enrollment > Claims > Precertification