

Dear Provider:

Managed care plans are required to develop and implement a community living support plan to ensure compliance with Section 394.4574, Florida Statutes, related to behavioral health services provided to mental health residents of an assisted living facility (ALF) with a limited mental health (LMH) license. Managed care plans must ensure the community living support plan is implemented as written and updated annually. The purpose of this provider update is to inform providers of changes in Florida law regarding the community living support plan requirements, which became effective July 1, 2015.

- The LMH-ALF must have a copy of each mental health resident's community living support plan and the cooperative agreement with the mental health care services provider, or provide written evidence that **a request for the community living support plan and the cooperative agreement was sent to the managed care plan within 72 hours after admission.** (See s. 429.075, F.S.)
- Managed care plans must ensure that the community living support plan and the cooperative agreement with the mental health care service provider are provided to the administrator of an LMH-ALF in which the mental health resident lives **within 30 days after the resident's admission.**
- Managed care plans must ensure that the community living support plan is updated at least annually, **or when there is a significant change in the resident's behavioral health status.** (See s. 394.4574, F.S.)
- Managed care plans must **conduct and document** consistent monitoring and implementation of community living support plans and cooperative agreements. (See s. 394.4574, F.S.) Managed care plans must **conduct and document** consistent monitoring and implementation of community living support plans and cooperative agreements. (See s. 394.4574, F.S.)

Providers are encouraged to access a complete version of the 2015 Florida Statutes, now available online at www.leg.state.fl.us/Statutes/, in order to ensure their compliance with these amended laws.

What does this mean to you?

If you are an LMH-ALF and you are admitting or servicing an Amerigroup member, please contact our case management department. Providers can request the member's community living support plan and the cooperative agreement via fax.

Region 10 Long Term Care members case management phone 1-877-440-3738 and follow the prompts
Region 10 Long Term Care members case management fax 1-888-762-3220

Region 11 Long Term Care members case management phone 305-716-0730
Region 11 Long Term Care case management fax 305-328-0898

MMA members case management phone 813-830-6900, ext. 73187
MMA members case management fax 1-866-495-2009

If you have questions about this communication, please contact your local Provider Relations representative at 1-800-454-3730.

Thank you,

Provider Relations
Amerigroup