

### **Option 3 – Submitting Changes to Previously Submitted Data**

Providers that want to update previously submitted building or historical information, please submit supporting documentation and an explanation to validate these changes. Only submit these changes through Excel. These changes shall be marked in red on the excel file submission.

- First, download the PDF copy of the form explaining the data to be entered from the main webpage.
- Next, download the copy of the Excel File Template to submit data for one or more facilities from the main webpage.
- Submit your Excel File as follows:
  - File name – please use this format: CompanyName\_Date(MM-DD-YY)\_FRVSSurveyChanges. Example: SandersHealthcare\_01-31-17\_FRVSSurveyChanges
  - Subject Line: please type the filename on the Subject Line

Email to: [NH.Reimbursement@AHCA.MyFlorida.com](mailto:NH.Reimbursement@AHCA.MyFlorida.com)