



RON DESANTIS  
GOVERNOR

MARY C. MAYHEW  
SECRETARY

March 21, 2019

## Statewide Medicaid Managed Care (SMMC) Contract Interpretation: 2019-04

Applicable to the **2018-2023 SMMC contract benefits** for:

- Managed Medical Assistance (MMA) and MMA Specialty
- Long-Term Care (LTC)
- Dental

### Re: Provider Termination and Continuity of Care

The dental plan must notify the provider and enrollees that received services from the provider within the past six months, at least sixty (60) days before the effective date of the suspension or termination of a provider from the network for cause. If the termination was for "cause," the dental plan must provide to the Agency the reasons for termination. (Attachment II, Section VIII.C.7.c.)

The purpose of this contract interpretation is to clarify that the provider and enrollee notification requirements in the aforementioned contract excerpt applies to both "for cause" **and** "not-for-cause" suspensions or terminations.

Pursuant to Attachment II, Section XV.I.1., the managed care plan must submit, within twenty-one (21) days after the interpretation of the contract, a written dispute of the contract interpretation directly to the Deputy Secretary; this submission must include all arguments, materials, data, and information necessary to resolve the dispute (to include all evidence, documentation and exhibits). All other provisions in this section apply.

Please submit such written requests to the following address:

Attn: Ms. Beth Kidder  
Deputy Secretary for Medicaid  
Agency for Health Care Administration  
**Attn: Managed Care Appeals/Disputes, MS #70**  
2727 Mahan Drive  
Tallahassee, FL 32308

If you have any questions, please contact your Agency contract manager at (850) 412-4004.

Sincerely,

Shevaun Harris  
Assistant Deputy Secretary for  
Medicaid Policy and Quality

SH/sr

