



AGENCY FOR HEALTH CARE ADMINISTRATION
2727 MAHAN DRIVE, TALLAHASSEE, FL 32308

www.AHCA.MYFLORIDA.com

092018

AGENCY FOR HEALTH CARE ADMINISTRATION

MEDICAID TRANSPORTATION SERVICES



Medicaid covers non-emergency transportation services for Medicaid eligible recipients who have no other means of transportation available to Medicaid covered services. Medicaid also covers medically necessary emergency ground or air ambulance transportation.

Some limits apply.

Transportation is covered by all health plans serving Medicaid enrollees.



NON-EMERGENCY TRANSPORTATION

Medicaid will pay for non-emergency transportation services for a Medicaid eligible recipient who has no other means of transportation to a Medicaid covered service.

Here are some examples of where Medicaid will transport you using non-emergency transportation services:

- Doctor Appointments
- Dental Appointments
- Mental Health Appointments
- To receive Dialysis Services
- To receive services at a Prescribed Pediatric Extended Care (PPEC) Center

Your health plan covers transportation to all dental services provided by your dental or health plan

EMERGENCY TRANSPORTATION



Medicaid will pay for medically necessary emergency ground or air ambulance transportation for a Medicaid eligible recipient requiring emergency transportation services.

COMPLAINTS

If you have a complaint about your transportation trip, you should call your transportation provider, not the driver.

If your transportation provider is not able to resolve your problem, call our Medicaid Helpline at **1-877-254-1055** to file a formal complaint. You may also visit

<http://ahca.myflorida.com/Medicaid/complaints/> to file a complaint.

HOW TO SCHEDULE A NON-EMERGENCY TRANSPORTATION RIDE



1. If you are enrolled in a health plan, call your plan to find out the name and telephone number for your transportation provider if you need a ride to a doctor's office, dental office or clinic.
2. If you are enrolled in a dental plan, you will need to call your health plan to find out the name and telephone number for your transportation provider if you need a ride to the dentist.
3. If you are not enrolled in a health plan, call our Medicaid Helpline at **1-877-254-1055** to find out the name and telephone number for your transportation provider.
4. You should call the transportation provider to schedule a ride at least **3 business days** before your appointment.
5. You should give the transportation provider the following information for the individual who has the appointment and needs transportation:
 - Full name
 - Medicaid Identification Number
 - Address (Pick up and Drop off Locations)
 - Date of Birth
 - Name of Health Plan (If You Are Enrolled in a Plan)
 - Date and Time of the Medical Appointment
 - Phone Number

The transportation provider may ask questions to make sure they send a vehicle that meets your needs. You may have a personal care attendant or escort travel with you if it is medically necessary. Be sure to call the transportation provider right away if your appointment is canceled or is changed to a different date or time.

MEDICAID FAIR HEARING

If you have had services Denied, Reduced, Terminated or Suspended or have been denied a plan change, you have a right to a Medicaid Fair Hearing.

After you have completed the appeal process, you can request a Medicaid Fair Hearing by one of the following methods:

PHONE

1-877-254-1055

Helpline staff will complete the request while you are on the line.

MAIL

Agency for Health Care Administration
Medicaid Hearing Unit
P.O. Box 60127
Ft. Myers, Florida 33906

EMAIL

MedicaidHearingUnit@ahca.myflorida.com

FAX

239-338-2642

The Medicaid Hearing Unit will provide the intake and gather all necessary documentation. This unit will then forward your request to the Office of Fair Hearings who will contact you with your case number(s) and information regarding your hearing request.

CONTACT US



1-877-254-1055

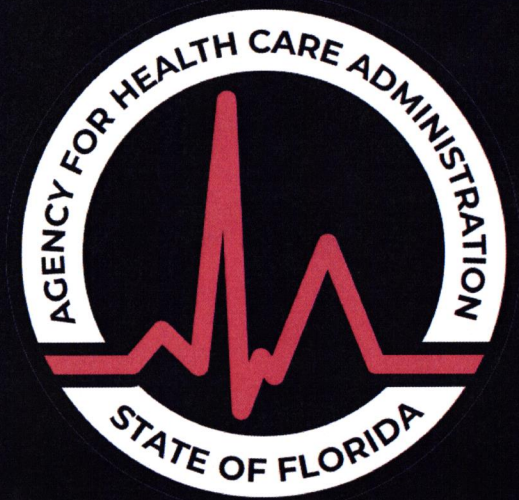


ahca.myflorida.com



Feedback for Florida Medicaid?

How To Submit Your Comments And Concerns



AGENCY FOR HEALTH CARE ADMINISTRATION
BUREAU OF RECIPIENT & PROVIDER ASSISTANCE

WHAT IS A COMPLAINT?

A complaint is any dissatisfaction or concern about the Medicaid Program and/or services you receive. The following are examples of complaints that can be submitted to the Agency.

- You need help finding a doctor or dentist
- You have concerns about an unpaid bill
- You are unhappy with the services you received
- You are having trouble getting medical or dental care
- You are having problems with transportation services
- Your personal information is incorrect or needs to be updated
- You would like to report potential fraud or a HIPAA violation
- You would like to request a Medicaid Fair Hearing

OTHER TYPES OF COMPLAINTS

- To report fraud, including misuse of someone's Medicaid coverage or Medicaid billing fraud, please contact the fraud and abuse hotline at 1-888-419-3456 or submit a complaint at <https://apps.ahca.myflorida.com/mpi-complaintform/>.
- If you feel your provider has shared your personal health information without your permission please visit the Office for Civil Rights HIPAA website at <http://www.hhs.gov/ocr/hipaa/> or contact them at 1-866-627-7748.

HOW DO YOU START THE COMPLAINT PROCESS?

You can start the process by contacting the Agency for Health Care Administration using any of the following methods:

PHONE:

1-877-254-1055

(TDD 1-866-467-4970)

Monday - Friday, 8am - 5pm EST

WEBSITE:

www.flmedicaidmanagedcare.com

Select the option to 'File a Complaint' under the menu button at the top of the screen.

QR CODE:



- Include your name, current phone number and email address
- The name of the Member and date of birth
- The member's 10-digit Medicaid ID number, 8-digit gold card number or SSN (if available)
- Add details about the reason for the complaint in the section provided.
- You may attach any related documents to your online submission.

WHAT HAPPENS NEXT?

When you have finished submitting the complaint, you will get a tracking number. You can use this tracking number to check the status of your complaint online. You may also call the Medicaid Helpline staff at 1-877-254-1055 (TDD 1-866-467-4970) to check on the status of a complaint.

All complaints submitted to the Agency are:

- **Prioritized** – We work complaints based on the urgency of the reported issue, not the order received. For example, a complaint from someone who cannot pick up medication at the pharmacy is worked before a complaint about an unpaid medical bill.
- **Assigned** – We assign someone to work your complaint. They may call you to get more information, if needed.
- **Researched** – We research your complaint. If you are enrolled in a Medicaid plan, we also contact your plan to get more information and ask the plan to reach out to you directly to address your issue.





CHOICES TO MAKE

Most people in Medicaid must enroll in a health and dental plan. If you are one of those people, you will get a letter telling you the name of your plan(s). You have 120 days to choose another plan if you want to change plans. Your letter will tell you how to change plans.

HOW TO GET SERVICES

If you are enrolled in a health or dental plan, contact your plan for information on providers and covered services. If you need help finding contact information for your plan, call our Medicaid Helpline at **1-877-254-1055**.

If you are not in a health plan, you are in fee-for-service Medicaid. For information on providers and covered services, call our Medicaid Helpline at **1-877-254-1055**

YOUR FLORIDA MEDICAID IDENTIFICATION CARD

Every adult and child who is eligible for Florida Medicaid will get a gold identification card. If you have not received your gold card, you may contact the Department of Children and Families at **1-850-300-4323**. If your gold card is lost or stolen, report it to the Department of Children and Families as soon as you know it is missing. Only the Department of Children and Families office can get you a new gold card.

If you receive care through fee-for-service, always take your gold card with you to the doctor, the pharmacy, the hospital, or any medical service.

If you are enrolled in a health or dental plan, you will also receive a membership card from your plan. Always take your plan membership card with you when you receive medical or dental care. Contact your plan if you have questions about your plan's membership card.

WHAT IS ON THE CARD

The front of your Florida Medicaid gold card shows your name and a card identification number called the Card Control Number. This is not your Medicaid number, but this number will allow your provider to check your eligibility before providing services. The back of the card tells your provider how to get your Florida Medicaid number and check your current eligibility. The phone numbers on the back of the card are for provider use only. Do not call the numbers on the back of the card.

The information on your health or dental plan's membership card will be different. Please contact your plan for questions about your membership card.

YOUR FLORIDA MEDICAID IDENTIFICATION NUMBER

Your Florida Medicaid identification number is not on your gold card. Your Florida Medicaid number is kept in your Florida Medicaid file. Any provider can use your gold card or plan's membership card to check the Florida Medicaid file to find out if you are eligible for Florida Medicaid services.



AGENCY FOR HEALTH CARE ADMINISTRATION
2727 MAHAN DRIVE, TALLAHASSEE, FL 32308

WWW.AHCA.MYFLORIDA.COM

042020

AGENCY FOR HEALTH CARE ADMINISTRATION

USING FLORIDA MEDICAID FOR YOUR HEALTH CARE



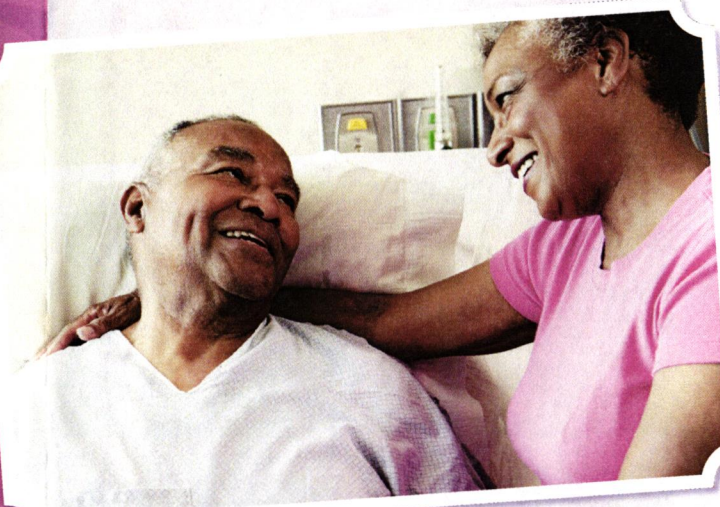
COVERED SERVICES

FLORIDA MEDICAID COVERED SERVICES

Services of doctors, advanced registered nurse practitioners, physician assistants, chiropractors, podiatrists, prescribed drugs, licensed and certified nurse midwives, durable medical equipment and medical supplies, family planning, emergency and non-emergency transportation, dialysis, some dental care, vision, hospice, transplant, rural and federally qualified health centers, home health, laboratory and X-ray services, community mental health services, County Health Department services, inpatient and outpatient hospital services and nursing facility services. Limitations and prior authorizations may apply to some of these services.

FLORIDA MEDICAID SERVICES FOR CHILDREN UNDER AGE 21

In addition to the above, services for children also include: comprehensive health screenings, full dental care, therapies, private duty nursing, personal care, medical foster care, early intervention, prescribed pediatric extended care centers, community based services, behavior analysis and school-based services.



KEEP THE CARD

Your gold card is a permanent identification. Even if your Florida Medicaid eligibility ends, you should always keep your gold card. If you become eligible again, you can use the same gold card.

You may throw your health or dental plan's membership card away if your eligibility ends. You will receive a new membership card from your plan when you become eligible again.

PROTECT THE CARD

Be careful with your gold card and your plan's membership card. NEVER LET ANYONE BORROW YOUR CARDS. Protect your cards from damage. Don't write on the cards. Protect the dark strip on the back side. Keep your cards with your other important cards, like your driver's license or your Medicare card.

CARRY YOUR CARD

Always take your gold card or your plan's membership card with you whenever you go to a doctor, hospital, pharmacy, or need any medical service. Carry your card with you at all times in case you need emergency medical care.

OTHER INSURANCE

If you have other insurance that may cover some or all of your medical care and you receive services from a Medicaid provider, be sure to tell the Medicaid provider about the other insurance. Other insurance includes Medicare, Champus, Worker's Comp., a Medicare supplement, accident insurance or any insurance that provides medical coverage.

OUT OF STATE

If visiting outside of Florida, Florida Medicaid will pay only for emergency care, or care that has been arranged and approved by Florida Medicaid ahead of time. If an out-of-state provider is willing to accept Florida Medicaid, let that provider use your gold card or your plan's membership card to verify your eligibility.

APPEAL RIGHTS

You have the right to appeal any denial, reduction or termination of services. Call our Medicaid Helpline at **1-877-254-1055** for questions about your rights.

FRAUD

You must not give or loan your gold card or plan's membership card to any other person. If anyone offers you money or non-Medicaid items in return for using your card or recommends medical care that you do not need or that seems more often than normal, or tries to get you to become a patient, report this to our Medicaid Fraud Hotline at **1-888-419-3456**.

CALL THE PROVIDER FIRST

Call your provider if you have a question about any medical bill charged to you. Make sure they have your Florida Medicaid number and know to bill Florida Medicaid. If you are enrolled in a health or dental plan, make sure your provider is part of your plan's network.

NO CHARGE

Providers may not charge you for checking your eligibility.

IF YOU MOVE

If you move, you must notify the Department of Children and Families or the Social Security Office. If you leave Florida to live in another state, your Florida Medicaid eligibility stops.

BEFORE YOU GET MEDICAL CARE

A provider is someone who gives you a medical or related service. Be sure to ask the doctor, pharmacy or other provider if they will accept Florida Medicaid as payment before services are given, or you may have to pay.

You must make sure that the services you are going to receive are covered by Florida Medicaid. Always show your gold card, health or dental plan's membership card before you get medical or dental care. Show your card in the pharmacy before you have prescriptions filled.

CO-PAYMENTS

Adults may be required to pay part of the cost of their medical care through a small co-payment for some services. Any required co-payments should be paid to your provider. If you do not have your co-payment, the doctor cannot refuse to see you for your medical care. Call our Medicaid Helpline at **1-877-254-1055** if you have questions about which services require co-payment.

If you are enrolled in a health or dental plan, you may not have to pay a co-payment. Contact your plan for questions about co-payments.

FLORIDA MEDICAID WILL NOT PAY

Florida Medicaid will not pay a provider when you are not eligible to receive services. Florida Medicaid will not pay a provider if the service is not covered. Florida Medicaid will not pay a provider when you have met the limit for a medical service that has a limit. Call our Medicaid Helpline at **1-877-254-1055** if you have questions about covered services and service limits.

If you are enrolled in a health or dental plan, contact your plan for questions about covered services and service limits.