




**State of Florida
Department of Children and Families**

Rick Scott
Governor

Mike Carroll
Secretary

DATE: April 8, 2015
TO: SAMH Regional Directors, SAMH Contract Managers and SAMH Managing Entities
FROM:  John Bryant, Assistant Secretary, Substance Abuse and Mental Health
SUBJECT: Policy Guidance: 65E-14.014(3), F.A.C.

PURPOSE:

To provide policy guidance on the application of Rule 65E-14.014(3), F.A.C. to SAMH-funded services provided to persons pending admission to non-SAMH benefits programs.

DISCUSSION:

In certain circumstances, a SAMH-funded provider may be required or requested to provide "covered services," defined in Rule 65E-14.021, F.A.C. to individuals who are eligible for a publically funded health benefits program, such as Medicaid. Rule 65E-14.014(3), F.A.C., reprinted below, applies in circumstances where a recipient of publically funded health benefits is wait-listed or otherwise unable to access qualified providers under their benefits program.

(3) SAMH-Funded Entities shall not bill the department for services provided to:

(a) Individuals who have third party insurance coverage when the services provided are paid under the insurance plan; or

(b) Recipients of Medicaid, or another publically funded health benefits assistance program, when the services provided are paid by said program.

(4) SAMH-Funded Entities may bill the department if services are provided to individuals who have lost Medicaid, or another publically funded health benefits assistance program coverage for any reason during the period of non-coverage subject to the sliding fee scale requirements in Rule 65E-14.018, F.A.C.

This paragraph allows a SAMH-funded provider to bill for necessary "covered services" provided outside the benefits program until such time as the individual is admitted to services by a qualified provider under the program.

To illustrate further, for example, a Medicaid-enrolled child is referred for services which are covered by Medicaid, but is wait-listed by all Medicaid enrolled providers in the community. In these circumstances, a SAMH-funded provider may provide necessary services, using DCF funds, until such time as the child is accepted into the Medicaid provider's program. The SAMH-funded provider must, however, diligently pursue acceptance by the Medicaid provider during the course of treatment.

1317 Winewood Boulevard, Tallahassee, Florida 32399-0700

Mission: Protect the Vulnerable, Promote Strong and Economically Self-Sufficient Families, and Advance Personal and Family Recovery and Resiliency

LIMITATIONS:

During the allowable billing period, SAMH-funded entities are expected to make every reasonable effort to facilitate the individual's admission into services by a qualified provider under the individual's benefits program.

KEY PROVISIONS:

Rule 65E-14.014(3), F.A.C.

cc: David Fairbanks, Deputy Secretary

Jane Johnson, Chief of Staff

Regional Managing Directors