



## **Reminder on Continuity and Coordination of Care for New Medicaid Members, including Child Welfare Specialty Plan (CW) and Comprehensive Long Term Care (LTC)**

All new Medicaid members have a Continuity of Care (COC) period in which Sunshine Health can help transition members who have been receiving care through a non-participating Sunshine Health provider to a participating provider. This is very important as our new members enroll in Sunshine Health from another health plan or from Medicaid Fee-For-Service.

Please review this Q&A to make sure you and your office staff are aware of the COC period to help our new members successfully transition to Sunshine Health without experiencing any break in their care.

### **How long is the COC period?**

- Up to 60 days for our new Medicaid and LTC members.
- Up to 90 days for our new Child Welfare members.

### **Does COC only apply during the new SSMC contract roll out?**

No. Continuity of Care is provided for any new member, even after February 2019 when all regions are effective.

### **What services are included in COC for new members?**

- Any previously prior authorized ongoing course of treatment, with any provider, including a provider who is not participating with Sunshine Health.
- Sunshine Health is responsible for continuing to cover the costs of the course of treatment, without any form of authorization, including:
  - Prior existing orders
  - Provider appointments
  - Prescriptions
  - Prior authorizations
  - Treatment plan/plan of care

**Are there services that may continue past the COC period?**

Yes. Services that can continue after the COC period for new members include:

- Prenatal and postpartum care – up to the postpartum visit
- Transplant services through the first year post-transplant
- Oncology (radiation and/or chemotherapy) for the current round of treatment
- Full course of Hepatitis C treatment drugs

**What rates does Sunshine Health pay during the COC period?**

Sunshine Health pays non-participating providers the rate they were receiving prior to the member transitioning to Sunshine Health, for a minimum of 30 days, unless the non-participating provider agrees to an alternative rate.

Providers with additional questions about Continuity and Coordination of Care or who need further assistance can call Sunshine Health’s new Provider Services help line at 1-844-477-8313, from 8 a.m. to 8 p.m., Monday through Friday.

Thank you for all you do to care for our members. We look forward to our continued partnership.

Sincerely,

Sunshine Health