



CHARLIE CRIST, GOVERNOR

ANDREW C. AGWUNOBI, M.D., SECRETARY

February 2, 2007

Dear Medicaid Primary Care Provider:

The 2004 Florida Legislature mandated that Florida Medicaid implement a physician lock-in program for MediPass and Medicaid fee-for-service recipients over the age of 21 who participate in the Medicaid pharmacy lock-in program, to prevent excessive and inappropriate utilization of Medicaid goods and services. The new program, referred to as the Recipient Assignment Program ensures the recipients are assigned to a primary care physician. The accepting primary care physician acts as a case manager or “gatekeeper” for coordination of the recipient’s non-emergency medical services.

The Recipient Assignment Program is in effect for the dates of service on and after February 1, 2007. The Recipient Assignment Program promotes cost efficient management of health care services and provides continuity of care for Medicaid recipients. The program prevents duplication of services and eliminates recipient utilization of unnecessary health care services. Medicaid anticipates a reduction of unnecessary office visits, non-emergency visits to the emergency department, and preventable inpatient hospitalizations.

The following is a brief description of program specifics:

- All MediPass and fee-for-service recipients currently enrolled in the Medicaid Pharmacy Lock-In program are eligible for the Recipient Assignment Program. The recipients are notified in writing of their enrollment in the Program and are assigned to a MediPass primary care physician at that time. If the recipient is assigned to a MediPass physician, the assignment will remain the same.
- A recipient may request a primary care physician other than the one assigned by the Agency for Health Care Administration within 21 days from the date of the notification letter. Once the physician assignments are made, a recipient may request a physician change once during the 12-month assignment period at the Agency’s discretion.
- The Agency will determine if the individual must remain enrolled in the Recipient Assignment Program beyond the initial 12-month period based on utilization of services.
- All requests for reassignment to a different primary care physician must be made in writing, whether from the provider or the recipient. The requestor must explain, in detail, the reason for the reassignment. The Agency will determine appropriate action and notify all parties involved.
- If a primary care physician terminates care of a recipient, the Agency requires written notification at least 30 days prior to the termination. The primary care physician should also send the same notification to the recipient. This confirmation will allow the Agency to reassign the recipient to another primary care physician.



- Assigned primary care physicians may authorize the referral of Recipient Assignment Program recipients to specialists when necessary. However, the services listed below are available to the recipient without the need for a referral from the assigned physician. They are:
  - Behavioral health services
  - Transportation
  - Vision or optometric services
  - Mental health targeted case management services
  - Dental services
  - Chiropractic services (first ten visits per calendar year)
  - Podiatry services (first four visits per calendar year)
  - Family Planning
  - Emergency services and care provided to a recipient in a hospital emergency department
- Prior to rendering health care services, it is important for providers to check the recipient's status as a "Recipient Assignment Program enrollee" when verifying recipient Medicaid eligibility. The recipient may receive care from other providers only as directed or referred by the designated primary care physician. Services furnished by a provider other than through a referral from the assigned primary care physician, or other than the services listed above requiring no referral, will be denied by Medicaid as unauthorized services to a Recipient Assignment Program recipient.

It is critical to the success of this program that the primary care physician explains to the recipient the procedures to follow when the office is closed or where to go for assistance in the case of an urgent or emergency situation. This coordination of care and the recipient's knowledge of office procedures help reduce the unnecessary use of the hospital emergency room.

Further information on this program can be found in Chapter 4 of the Medicaid Physician Services Coverage and Limitations Handbook posted on the Medicaid website at <http://floridamedicaid.acs-inc.com>. Click on "Provider Support," then "Handbooks," and finally "Physician Services." If you have any questions, please call your area Medicaid office or Kathy Canfield, Registered Nurse Consultant, at (850) 414-0193.

Thank you in advance for your support of this program and for the work you do to provide quality medical care to your community.

Sincerely,



Thomas W. Arnold  
Deputy Secretary for Medicaid