March 15, 2005

Re:

Dear DME Provider:

Our records indicate that the DME location named above does not have a current surety bond on file. A surety bond is required by DME policy at time of enrollment and bond renewal documentation must be submitted annually thereafter unless specific exemptions are met. Refer to Chapter 1 of the DME/Medical Supply Services Coverage and Limitations Handbook and the Provider General Handbook for information regarding surety bond requirements.

Submit a surety bond in the amount of $50,000, or proof of exemption from surety bond coverage, by close of business April 30, 2005. Failure to comply with this request by the date listed will result in termination of the Medicaid number listed above.

Please complete the enclosed form, attach appropriate proof of bond coverage and submit to the address as indicated on the form.

Sincerely,

Alan Strowd, Chief
Medicaid Contract Management

Attachment
Re:  
Subject: DME Surety Bond Renewal

Please check the appropriate box:

- Surety Bond is enclosed. (Bond document must identify the name, physical address and Medicaid provider number of the DME location being bonded.)
- Exempt – DME is owned and operated by a government entity.
- Exempt – DME is owned by and operated within a Medicaid enrolled pharmacy. The pharmacy and the DME must be located at the same physical address.
- Exempt – DME is owned and operated by an entity with multiple locations. The provider number listed above is operated in addition to the five provider locations with current surety bonds as listed below.

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<tr>
<th>Provider Name</th>
<th>Provider Number</th>
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I attest that the information provided on this form is correct.

____________________________  ________________________
Signature of Owner  Date
(or authorized signer)

Print Name of Signatory

Attach proof of bond coverage for this provider number, if required, and return to:

**For Regular Mail:**
ACS State Healthcare  
Provider Re-enrollment  
P.O. Box 13800  
Tallahassee, FL 32317-3800

**For Overnight or Express Delivery:**
ACS State Healthcare  
Provider Re-enrollment  
2308 Killearn Center Blvd STE 100  
Tallahassee, FL 32309