

Continuity of care

This communication applies to the Medicaid programs for Simply Healthcare Plans, Inc. (Simply) and Clear Health Alliance (CHA).

The continuity of care requirements for new members enrolled in Statewide Medicaid Managed Care Managed Medical Assistance require that we pay for continuity of care services rendered to new enrollees transitioning into Simply and CHA.

In the event a new Simply or CHA member is receiving prior authorized ongoing course of treatment with any provider, Simply and CHA are responsible for the costs of continuation of such course of treatment. This includes those services previously authorized under the fee-for-service delivery system or by the enrollee's immediate former managed care plan. This is also without regard to whether such services are being provided by participating or nonparticipating providers, for up to 60 days after the effective date of enrollment.

For more information related to continuity of care, please refer to the [provider manual](#).

<https://provider.simplyhealthcareplans.com>

<https://provider.clearhealthalliance.com>

Simply Healthcare Plans, Inc. is a Managed Care Plan with a Florida Medicaid contract. Simply Healthcare Plans, Inc. dba Clear Health Alliance is a Managed Care Plan with a Florida Medicaid contract.

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