SECRETARY



FOR IMMEDIATE RELEASE May 14, 2018

Contact: AHCA Communications Office AHCACommunications@ahca.myflorida.com (850) 412-3623

AHCA Announces Moratorium on Enrollment of New Behavioral Analysis providers

TALLAHASSEE. Fla. - Today, the Agency for Health Care Administration (Agency) announced that it will impose a temporary moratorium on enrollment of new Behavioral Analysis (BA) providers in Miami-Dade and Broward counties, with the approval of the Centers for Medicare and Medicaid Services (CMS). A thorough investigation has identified Medicaid fraud and abuse including extraordinary overbilling. The Agency is imposing the moratorium to prevent significant fraud that impacts taxpayers and potentially compromises the quality of care patients receive. The moratorium will begin on May 14, 2018 and be implemented for an initial six-month period. No Medicaid recipients will go without the services they deserve. All existing BA providers will continue to be reimbursed for legitimate services while the Agency further investigates fraud and abuse.

Secretary Justin Senior said, "Today's moratorium comes after many months of investigation and analysis of the BA providers and services in south Florida. Our number one priority remains the children who rely on this service and making sure that they have access to high quality providers. We need anyone who knows of a child who is not receiving necessary services to contact our Agency so that we can connect them with an honest and qualified provider. We will take aggressive action against any fraudulent providers, or those who attempt to abuse the Medicaid system, to the fullest extent of the law."

In its investigation, the Agency has identified numerous instances of Medicaid fraud and abuse:

- The Agency has identified widespread problems with providers attempting to bill unbelievable hours, such as more than 24 hours per day, more than 40 hours per week, and billing in excess of 31 days in a row. In one instance, a provider tried to bill more than 250 days in a row.
- Some Medicaid recipients were also enrolled as BA providers, which proved fraudulent upon further investigation.
- Some providers appeared to have falsified their qualifications, meaning that patients could be receiving BA services from unqualified providers.
- Miami-Dade County currently has 8,175 total BA providers enrolled, and 5,676 recipients receiving BA services, an abnormally high ratio for any provider type.
- More than a dozen large provider groups have been referred to the Office of the Attorney General's Medicaid Fraud Control Unit (MFCU) for investigation of suspected criminal activity.
- The many ongoing investigations by the Agency are expected to lead to additional MFCU referrals as well as sanctions against current providers.

This temporary moratorium will allow the Agency an opportunity to complete a comprehensive assessment of the current provider population and remove from the provider network those individuals and entities who are not qualified to participate or whose participation is believed to have been based solely to commit fraud.



Investigations of suspected fraud or abuse remain ongoing and are exempt from public disclosure pursuant to s. 409.913(12), F.S. If any recipient is having difficulty accessing services, please encourage them to contact the Florida Medicaid Helpline at 1-877-254-1055 or file a <u>complaint</u> using this online form. Providers who are under investigation and have received correspondence from the Agency should continue to participate in any record review that is ongoing, and a point of contact was included in the letter sent by the Agency.

Background:

In February 2017, the ABA services transitioned to a Behavior Analysis (BA) services, and AHCA promulgated rules that were designed to strengthen provider qualifications and ensure all services were reviewed for medical necessity. A prior authorization program by Beacon Health Options was put into place to ensure services were medically necessary and achieving the desired behavior changes.

Earlier this year, the Agency reassessed its delivery of Medicaid BA services. The Agency determined through this reassessment that the authorization process for BA services needed to be changed and that a review of the providers furnishing these services needed to be conducted. In February 2018, the Agency for Health Care Administration (Agency) began transitioning its prior authorization process for BA services from Beacon Health Options to eQHealth Solutions.

Throughout this transition, the Agency has honored existing authorizations and has reimbursed for services approved by Beacon as long as the provider had received a letter with a prior authorization number. Again, to date the Agency has continued to honor service authorizations and is providing full funding for medically necessary BA services. As long as their provider is in full compliance with Florida Medicaid's standards, recipients should receive services without issue.

A copy of the moratorium can be found <u>here</u>. AHCA will continue to process applications from providers who applied before May 14, but whose application review has not yet been completed.

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The Agency for Health Care Administration is committed to better health care for all Floridians. The Agency administers Florida's Medicaid program, licenses and regulates more than 50,000 health care facilities and 47 health plans, and publishes health care data and statistics at www.FloridaHealthFinder.gov. Additional information about Agency initiatives is available via Facebook (AHCAFlorida), Twitter (@AHCA_FL) and youTube (/AHCAFlorida).