



Public Safety Department
Emergency Medical Services
Health Services Section
2101 47th Terrace East
Bradenton, FL 34203
Phone: (941) 749-3505
www.mymanatee.org

June 28, 2024

Community Physicians of Uninsured Residents in Manatee County - Community-Based Care

Dear Participating Physicians,

Thank you for the health care services you provide to low-income, uninsured residents of Manatee County. We are pleased to announce that for Fiscal Year 2025 (FY25), Manatee County will once again be able to provide healthcare funding.

Please carefully review the requirements for FY25, as these procedures will increase efficiency, decrease errors, and help expedite reimbursement.

This year, partnering physician practices may choose to utilize the designated Health Information Exchange (HIE), Centralis; however, this will not be a requirement as in previous years. The HIE will still be used to share relevant patient information safely and will be available to verify patient eligibility, but these services will be free of charge to partnering physician practices.

Physician/Provider Reimbursement Process beginning October 1, 2024:

- Manatee County must receive a signed Physician Acknowledgement Form and updated W-9 before providers can submit claims.
- Electronic claims submission through Centralis is the preferred method, as it allows for a timelier and more streamlined process.
- Claims must have a service date after October 1, 2024, and be for approved patients and medically necessary services.
- Physician/Provider billing services will utilize Centralis to confirm patient eligibility before submitting claims.
- Physician/Provider billing services will have 150 days from the service date to submit claims; claims received after that timeframe will be rejected.
- Claims submitted for consideration of payment must contain the date of service and provider title, i.e., MD, DO, NP, or PA.
- Manatee County will only process claims for patients with the status of "Approved" in Centralis; no other claims should be submitted.

Submission of claims does not guarantee payment as it is contingent upon the availability of healthcare funds.

- Manatee County will NOT accept bulk claims for processing. Manatee County will sample large quantities of batched claims received for program compliance. If the sample shows a rejection of 20% or more, the entire shipment of claims will be returned to the physician/provider without further action.
- Duplicate claims should not be submitted; all such claims will be destroyed.
- Payment claim status may be requested after 90 days from submission via Centralis, telephone, fax, or secure email to ensure HIPAA-compliant communications.
- Manatee County will seek reimbursement from providers for patients previously in an "Approved" status, for whom payments were made and whose status changed to any other code indicating possible coverage by Medicaid, insurance, or other third-party payers.

To increase program efficiency, Manatee County requests that Physicians/Providers submit eligible claims for reimbursement consideration as soon as possible. Physician funds for FY25 are limited to \$2,500,000, and all claims are processed in the order received.

We thank you for your care and services and look forward to working with you in FY25.

For questions related to this letter or the plan, don't hesitate to contact the Health Services Section at (941) 749-3505 or healthservices@mymanatee.org.

Sincerely,

A handwritten signature in black ink, appearing to read 'J. Kaepernik', with a stylized flourish at the end.

Jennifer Kaepernik, MBA
Health Care Services Program Manager
Emergency Medical Services
Public Safety Department
PO Box 1000
Bradenton, FL 34206-1000

Healthservices@mymanatee.org

PHYSICIAN ACKNOWLEDGEMENT FORM

1. I have read and agree to the terms of the physician/provider reimbursement process described above.
2. I understand reimbursement funds for fiscal year FY25 are limited to \$ 2,500,000.
3. I understand reimbursement will be paid on a first-come, first-serve basis.
4. I understand that only claims with dates of service on or after October 1, 2024, for approved patients can be submitted.
5. I understand that if there are any changes to the representatives below, I must notify Manatee County.
6. I designate the following representative(s) to communicate with the County regarding claims:

(Agency/Practice, Name & Address)

(Agency Representative, Name Print)

(Email Address)

(Authorized Signature)

(Phone Number)

(Physician, Name Print)

(Physician Signature)

(Billing/Office Manager, Name Print)

(Phone Number; Email Address)

Return the completed Physicians Acknowledgement Form and W-9 to:

Public Safety Department
Manatee County Government
Attn: Health Services
PO Box 1000
Bradenton, FL 34206-1000
Healthservices@mymanatee.org