



**Q1 I have previously asked this question. I really need an answer before I approach parents with the information. We are an outpatient clinic which is housed in a school. We have several severe kids who are currently on CMS and will change to Sunshine and get authorized through HN1. We currently see them between 1 and 3 hours a week for therapy and with HN1 that will drop to 30-60 minutes per week. I need to let parents know that their therapy services will be drastically cut. I am just wanting to make sure this is accurate. CMS (kids 3 and over) is going to be using HN1 for authorization. I will be letting parents know soon.**

Members will NOT experience any change in their benefits. The CMS population will be managed by Sunshine. It will not be managed by ATA-FL.

**Q2 Recently we were told we could request auth a week before it was up so there was no lag. In the webinar it was said to wait until auth was up to request more. So my kids will have a 1-2 week lag. Is this correct?**

For MMA, SMI and CW members, 3 years and above on October 1, 2021, participating ATA-FL therapy providers should obtain authorizations via the ATA-FL Provider Web Portal at [ataflorida.com/hsportal/](https://ataflorida.com/hsportal/). You may request a new auth immediately after the COC period ends, or the old auth expires, whichever comes first.

**Q3 During the webinar you stated CMS is not included. However, our CMS parents are getting letters stating the opposite. Can you PLEASE confirm?**

CMS is out of scope for ATA-FL. Authorizations (PT/ST/OT) for CMS will be handled via eviCore <https://www.evicore.com/provider>. The Health Plan will maintain responsibility for Network and Claims for CMS. For Sunshine claims you can refer to [SunshineHealth.com/providers/resources/forms-resources.html](https://SunshineHealth.com/providers/resources/forms-resources.html)

**Q4 CMS patients are excluded, but all CMS kids were under Wellcare so how does that work?**

CMS is out of scope for ATA-FL. Authorizations (PT/ST/OT) for CMS will be handled via eviCore <https://www.evicore.com/provider>. The Health Plan will maintain responsibility for Network and Claims for CMS. For Sunshine claims you can refer to [SunshineHealth.com/providers/resources/forms-resources.html](https://SunshineHealth.com/providers/resources/forms-resources.html)

**Q5 Will Claim Payments still come through Payspan? If we currently have electronic payments set up will that transfer over?**

For claims applicable to ATA-FL, you will continue to receive payment from us via electronic funds transfers from VPAY. Since your practice has been with us for several years, you are already registered and currently receiving payments via VPAY, you do not need to do anything additional.

**Q6 Is the HS1/ATA provider portal the same as the sunshine provider portal? If not, what is the link to the sunshine provider portal? Can we use either one for auths or claims submissions?**

For MMA, SMI and CW members, 3 years and above, ATA-FL's PWP can be accessed here [ataflorida.com/hsportal/](https://ataflorida.com/hsportal/). The ATA-FL provider web portal offers providers the ability to verify eligibility, submit authorizations, submit claims, and much more. The link to the Sunshine portal is [SunshineHealth.com/login](https://SunshineHealth.com/login)

**Q7 For CMS patients, will Evicore now approve auths for ST too?**

CMS is out of scope for ATA-FL. Authorizations (PT/ST/OT) for CMS will be handled via eviCore <https://www.evicore.com/provider>. The Health Plan will maintain responsibility for Network and Claims for CMS. For Sunshine claims you can refer to [SunshineHealth.com/providers/resources/forms-resources.html](https://SunshineHealth.com/providers/resources/forms-resources.html)

**Q8 We use office Ally as or billing clearing house for Staywell & CMS patients, will this be possible for sunshine claims or only Sunshine portal is excepted?**

For MMA, SMI and CW members, 3 years and above, ATA-FL's preferred method of claims submission is through our Provider Web Portal. You may register by visiting <https://ataflorida.com/pwp>. Additionally, we offer Direct Data Entry (DDE) through our preferred Clearinghouse, Change Healthcare, using: Professional Payer ID: 65062 or Institutional Payer ID: 12k89. The link to the Sunshine portal is [SunshineHealth.com/login](https://SunshineHealth.com/login)



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**Q9 Regarding Auths & Claim submissions, would we be using Wellcare or Evicaore web portal after 10/1/21?**

CMS authorizations <https://www.evicore.com/provider>. CMS claim submissions would be through Sunshine portal [SunshineHealth.com/login](https://SunshineHealth.com/login)

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**Q10 Hi, if we have using Health Network One to bill for our sunshine members, are the members from Staywell/ Wellcare going to roll over or will we have to use a new platform to bill? Thank you, Nicole Allen ACE Speech & Language**

For Sunshine members 0-2, you will utilize the Sunshine provider Portal. For Sunshine members 3 and above, you may continue to use the ATA-FL provider web portal for claim submissions, or our preferred clearing house Change Healthcare. Claims submission process is located on our ATA-FL website under Provider Resources, in the ATA-FL Provider Manual. For Sunshine members 0-2, you will utilize the Sunshine provider Portal, [SunshineHealth.com/providers/resources/forms-resources.html](https://SunshineHealth.com/providers/resources/forms-resources.html).

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**Q11 Are we still going to use the early steps IFSP as the authorization for birth to 3 yrs old for wellcare and sunshine and cms kids?**

CMS is out of scope for ATA-FL. Authorizations (PT/ST/OT) for CMS will be handled via eviCore <https://www.evicore.com/provider>. The Health Plan will maintain responsibility for Network and Claims for CMS. For Sunshine claims you can refer to [SunshineHealth.com/providers/resources/forms-resources.html](https://SunshineHealth.com/providers/resources/forms-resources.html)

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**Q12 I thought CMS was still going to use Evicore for OT/PT/ST auth but billing goes to Sunshine is this not true?**

CMS is out of scope for ATA-FL. Authorizations (PT/ST/OT) for CMS will be handled via eviCore <https://www.evicore.com/provider>. The Health Plan will maintain responsibility for Network and Claims for CMS. For Sunshine claims you can refer to [SunshineHealth.com/providers/resources/forms-resources.html](https://SunshineHealth.com/providers/resources/forms-resources.html)

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**Q13 Also, do we have to wait until the auth expires to request new auth? This means kids will experience no therapy until the new auth is given.**

For MMA, SMI and CW members, 3 years and above on October 1, 2021, participating ATA-FL therapy providers should obtain authorizations via the ATA-FL Provider Web Portal at [ataflorida.com/hsiportal/](https://ataflorida.com/hsiportal/). You may request a new auth immediately after the COC period ends, or the old auth expires, whichever comes first.

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**Q14 Will the slides/presentation be posted for download?**

Yes, ATA-FL will post the presentation, the recording, as well as all of the webinar questions and our responses.

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**Q15 Currently, Evicore approves authorizations for OT and PT. Where would we submit authorization requests for speech language therapy after Oct. 1st for Staywell patients transitioning to ATA? and those transitioning to Sunshine Health?**

ST, PT and OT services for members who are already 3 years of age or older on October 1, 2021, participating ATA-FL therapy providers should obtain authorizations via the ATA-FL Provider Web Portal at [ataflorida.com/hsiportal/](https://ataflorida.com/hsiportal/). CMS is out of scope for ATA-FL. Authorizations (PT/ST/OT) for CMS will be handled via eviCore <https://www.evicore.com/provider>. The Health Plan will maintain responsibility for Network and Claims for CMS. For Sunshine claims you can refer to [SunshineHealth.com/providers/resources/forms-resources.html](https://SunshineHealth.com/providers/resources/forms-resources.html)

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**Q16 We are working with many kids who currently are able to get 12U/week for therapy services. OT/PT/ST. ATA gives levels and these children will drop to either 30-60 minutes a week. Is that an accurate statement? I need to let our parents know that services will be severely cut.**

Members will NOT experience any change in their benefits. Providers who are contracted with ATA-FL enter into the case rate model and agree to accept the reimbursement rates at the time of contracting. Under our model, case rate level payments during the episode of care are subject to the Provider rendering services to the Member in accordance with the plan of care and submitting all encounter data. Providers are required to submit all evidence of impairment for each case and include any additional documentation that would support their requested level assignment. The sicker the patient, the higher the level of reimbursement. Providers must write the plan of care corresponding to the impairment for that child and should never alter the member's plan of care based on reimbursement rates. Doing so could lead ATAFL to conduct a chart audit on providers who are limiting care to the enrollee.

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**Q17 If a Wellcare auth expires after the 120 days of COC when is the best time to request the new auth? How early can any auth be requested?**

120 COC period applies to NON-PAR providers only. Non-Par with Sunshine for ages 0-2 or NON-PAR with ATA-FL for ages 3 and above. For MMA, SMI and CW members, 3 years and above on October 1, 2021, participating ATA-FL therapy providers should obtain authorizations via the ATA-FL Provider Web Portal at [ataflorida.com/hsportal/](https://ataflorida.com/hsportal/). You may request a new auth immediately after the COC period ends, or the old auth expires, whichever comes first.

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**Q18 Do CMS authorizations still go through Staywell?**

CMS is out of scope for ATA-FL. Authorizations (PT/ST/OT) for CMS will be handled via eviCore <https://www.evicore.com/provider>. The Health Plan will maintain responsibility for Network and Claims for CMS. For Sunshine claims you can refer to [SunshineHealth.com/providers/resources/forms-resources.html](https://SunshineHealth.com/providers/resources/forms-resources.html)

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**Q19 Are there are any changes to the functionality of billing HS1 electronically? We currently bill our ATA-FL authorized patients through the clearinghouse or EMR system uses and im wondering if that will change moving forward**

Please continue to follow the normal claims submission guidelines as documented in the ATA-FL Provider Manual.

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**Q20 Will all authorizations from ATA be done on levels and serverity and paid out in a lump sum like all other ATA patients?**

For MMA, SMI and CW members, 3 years and above, the rate of reimbursement for your practice will be in accordance with your existing Sunshine Amendment and Plan Addendum under Exhibit 1. For Sunshine claims you can refer to [SunshineHealth.com/providers/resources/forms-resources.html](https://SunshineHealth.com/providers/resources/forms-resources.html)

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**Q21 All CMS members for authorization for Speech, Occupational and Physical have to go through Evicore, So what is the webportal for CMS/Evicore webportal?**

CMS is out of scope for ATA-FL. Authorizations (PT/ST/OT) for CMS will be handled via eviCore <https://www.evicore.com/provider>. The Health Plan will maintain responsibility for Network and Claims for CMS. For Sunshine claims you can refer to [SunshineHealth.com/providers/resources/forms-resources.html](https://SunshineHealth.com/providers/resources/forms-resources.html)

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**Q22 Is ATA/HS1 the payor or Just Auth company. Are you using your Level payment or Fee for Service?**

ATA-FL will manage credentialing, claims payment and utilization management for MMA, SMI and CW members, 3 years and above. The rate of reimbursement for your practice will be in accordance with your existing Sunshine Amendment and Plan Addendum under Exhibit 1. For Sunshine claims you can refer to [SunshineHealth.com/providers/resources/forms-resources.html](https://SunshineHealth.com/providers/resources/forms-resources.html)

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**Q23 Currently we submit claims through our EHR to Office Ally. Do we need to change the way we are billing?**

For MMA, SMI and CW members, 3 years and above, ATA-FL's preferred method of claims submission is through our Provider Web Portal. You may register by visiting <https://ataflorida.com/pwp>. Additionally, we offer Direct Data Entry (DDE) through our preferred Clearinghouse, Change Healthcare, using: Professional Payer ID: 65062 or Institutional Payer ID: 12k89.

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**Q24 How will ATA know whether a patient has a previous authorization from Staywell during the COC period? Do we have to bill on paper with a copy of the authorization?**

The preferred method of claims submission is through our Provider Web Portal. Providers will be required to submit written documentation such as prior existing orders, prior authorizations and treatment plan/ plan of care, in order to receive payment on their claim during the COC period.

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**Q25 What claim modifiers does Sunshine need on EIS, PPEC and now O-2?**

For Sunshine claims you can refer to [SunshineHealth.com/providers/resources/forms-resources.html](https://SunshineHealth.com/providers/resources/forms-resources.html)

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**Q26 Will in-home therapies be covered? Currently, ATA does not authorize in-home services. Additionally, we have been trying to get approved with Sunshine for a very long time. I really need to speak with someone who can help. The paperwork has been in Limbo for over a year.**

In-home therapies will be handled via Sunshine Health. Please reach out to the Sunshine Health contracting team at [SunshineContracting@sunshinehealth.com](mailto:SunshineContracting@sunshinehealth.com)

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**Q27 Where will we access CMS? Will we be paid by levels for all staywell kids starting on 10/1/21?**

For MMA, SMI and CW members, 3 years and above, the rate of reimbursement for your practice will be in accordance with your existing Sunshine Amendment and Plan Addendum under Exhibit 1. CMS is out of scope for ATA-FL. Authorizations (PT/ST/OT) for CMS will be handled via eviCore <https://www.evicore.com/provider>. The Health Plan will maintain responsibility for Network and Claims for CMS. For Sunshine claims you can refer to [SunshineHealth.com/providers/resources/forms-resources.html](https://SunshineHealth.com/providers/resources/forms-resources.html)

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**Q28 Would ST go through Evicore or wellcare portal?**

ATA-FL will manage credentialing, claims payment and utilization management for MMA, SMI and CW members, 3 years and above. CMS is out of scope for ATA-FL. Authorizations (PT/ST/OT) for CMS and then for MMA, SMI, CW members ages 0-2 will be handled via eviCore <https://www.evicore.com/provider>. The Health Plan will maintain responsibility for Network and Claims for CMS and then for MMA, SMI, CW members ages 0-2.

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**Q29 Will you share/post the slides ASAP, even before posting the recording? Can you share a "org chart" showing relationship between ATA, Sunshine, Staywell, etc?**

The webinar presentation is currently pending Health Plan approval. Once approved, we will be posting it to our website. An email blast notification will be sent to all ATA-FL participating providers when the presentation has been published. I can send the provider the attached AHCA notice, so that he understands what took place with Staywell and Sunshine. Please refer to the attached AHCA notice regarding the relationship between Staywell and Sunshine. Additionally, Sunshine has selected ATA-FL as it's mandatory outpatient freestanding ST, PT and OT Network.

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**Q30 When will we know about payments for those patients who are Staywell - how will we be paid during the COC period?**

COC claims will be reimbursed at 100% of the Medicaid fee schedule.

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**Q31 Is claim entry on ATA portal based on Date of Service ... post 10/1/2021 or Date of transition ... so dates prior to 10/1/2021 will also go on the ATA portal?**

As of October 1, 2021, if the member has Sunshine MMA, SMI or CW and the member is 3 years or older, claims will be submitted to ATA-FL for dates of service rendered on or after Oct. 1, 2021.