

**59G-5.010 Provider Enrollment.**

(1) Unless otherwise specified in Chapter 59G-4, F.A.C., all providers and billing agents are required to enroll in the Medicaid program and submit a completed Florida Medicaid Provider Enrollment Application, AHCA Form 2200-0003 (December 2004). AHCA Form 2200-0003 is available from the fiscal agent and incorporated in this rule by reference. AHCA Form 2200-0003 is the application to be completed by applicants.

(2) To enroll in the Medicaid program, all providers must meet the provider qualifications specified in federal and state laws and regulations and the program-specific provider qualifications specified in Chapter 59G-4, F.A.C.

(3) Out-of-state providers who render services to Florida Medicaid recipients may enroll in the Florida Medicaid program as out-of-state providers and receive reimbursement when one of the following requirements is met:

(a) An emergency arising from an accident or illness occurs while the recipient is out of state;

(b) The health of the recipient will be endangered if the care and services are postponed until the recipient returns to Florida;

(c) The recipient is a non-Title IV-E Florida foster or adoption-subsidy child who is living out-of-state and is covered under the Florida Medicaid program; or

(d) The medically necessary care and services are unavailable in Florida, and the out-of-state services have been prior authorized pursuant to this rule by Florida Medicaid.

(4) Providers located in Georgia or Alabama who regularly provide services to Florida recipients, meet the provider requirements in all federal and state laws and regulations, and meet the program-specific provider requirements in Chapter 59G-4, F.A.C., may enroll as Florida Medicaid providers.

(5) Out-of-state freestanding clinical laboratories certified under the Clinical Laboratory Improvement Amendments of 1988 (CLIA) and licensed by the state of Florida may enroll as Florida Medicaid providers.

(6) Enrollment of a Medicaid provider applicant is effective no earlier than the date of the approval of the provider application. "Approved application" means an accurately and fully completed application with all the requirements which includes background screenings and onsite inspections resolved and completed with approval of the agency or its designee.

*Rulemaking Authority 409.919 FS. Law Implemented 409.902, 409.907, 409.9071, 409.908 FS. History—New 9-22-93, Formerly 10P-5.010, Amended 7-8-97, 9-8-98, 7-5-99, 7-10-00, 5-7-03, 7-7-05.*