# STATEWIDE PROVIDER AND HEALTH PLAN CLAIM DISPUTE RESOLUTION PROGRAM

### 2023 Annual Report

Agency for Health Care Administration 2727 Mahan Drive Tallahassee, Florida 32308 (850) 412-4401 www.ahca.myflorida.com



# **Statewide Provider and Health Plan Claim Dispute Resolution Program**

## Annual Report for Data Collected January 1, 2023, through June 30, 2023.

Pursuant to the provisions of section 408.7057, Florida Statutes (F.S.), the Agency for Health Care Administration (Agency) is required to submit a report to the Governor and the Legislature by February 1st of each year on the status of the Statewide Provider and Health Plan Claim Dispute Resolution Program. Section 408.7057(2)(g)2., F.S., specifically requires the report to enumerate claims dismissed, defaults issued and failures to comply with Agency final orders issued under this section.

#### **Program Description**

The Statewide Provider and Health Plan Claim Dispute Resolution Program was established by the 2000 Florida Legislature to provide assistance to contracted and non-contracted providers and managed care organizations for resolution of claim disputes that were not resolved by the provider and the managed care organization. The statute requires the Agency to contract with a resolution organization to timely review and consider claim disputes and submit its recommendation to the Agency. The Agency's responsibility is to issue a final order adopting the recommendation of the resolution organization.

Initially the program was designed to resolve only disputes between providers, health maintenance organizations (HMOs), prepaid health clinics (PHCs), exclusive provider organizations (EPOs) and prepaid health plans (PHPs). In 2002, the Legislature expanded the program to include other insurers offering major medical expense insurance policies and preferred provider organizations (PPOs). In 2022, the Legislature further expanded the program to include pharmacies. These revisions continue to strengthen the ability of the resolution organization to enforce review timeframes and the timely submission of information requested. The types of claims eligible under the program are further defined in Rule 59A-12.030, F.A.C., consistent with statutory provisions.

The cost of the program is borne by users of the dispute program. The entity that does not prevail in the Agency's final order must pay the associated review costs. In cases where both parties prevail in part the review costs must be shared. The review costs are determined by the vendor and depend largely on the complexity of the cases submitted.

After adopting the rule necessary to implement the program (59A-12.030, Florida Administrative Code (F.A.C.)), the Agency issued a "Request for Proposals", and entered into a contract with MAXIMUS, Federal Inc. to review claim disputes from May 1, 2001, through June 30, 2023.

#### **Eligible Claims**

The following claim disputes can be submitted by physicians, hospitals, institutions, pharmacies, other licensed health care providers, HMOs, PHCs, EPOs, PHPs, major medical expense health insurance policies offered by a group or an individual health insurer, and PPOs.

- Claim disputes for services rendered after October 1, 2000 (the effective date of the initial legislation).
- ➤ Claim disputes related to payment amounts only (provider disputes payment amounts received, or HMO disputes payback amounts). Claim disputes related exclusively to late payment are not eligible.
- ➤ Hospitals and physicians are required to aggregate claims (for one or more patients for same insurer) by type of service to meet certain thresholds:

- Hospital Inpatient Claims (contracted providers)	\$25,000
- Hospital Inpatient Claims (non-contracted providers)	\$10,000
- Hospital Outpatient Claims (contracted providers)	\$10,000
- Hospital Outpatient Claims (non-contracted providers)	\$3,000
- Physicians (professional services)	\$500
- Rural Hospitals	None
- Other Providers	None

#### **Ineligible Claims**

- Claims for less than the minimum amounts listed above for each type of service.
- Claim disputes that are the basis for an action pending in State/Federal court.
- Claim disputes that are subject to an internal binding managed care organization's resolution process for contracts entered into prior to October 1, 2000
- Claims solely related to late payment and/or late processing.
- Interest payment disputes
- Medicare claim disputes that are part of a Medicare Managed Care internal grievance or that qualify for a Medicare reconsideration appeal.
- > Medicaid claim disputes that are part of a Medicaid Fair Hearing
- Claims related to health plans not regulated by the State of Florida
- > Claims filed more than 12 months after a final determination by a health plan or provider.

#### **Claim Disputes**

In 2023, 296 claim disputes were filed by hospitals, practitioners, institutions, and other licensed health care providers for consideration. 137 of the 296 claim disputes filed were accepted as eligible claims for review as indicated below. In 2018, the Agency added a provision to the 2018-2023 Statewide Medicaid Managed Care (SMMC) contract. The provision requires that all SMMC plans participate in the arbitration process.

#### **Eligible Claims Accepted for Review**

Case Number	Provider Name	Respondent	Disputed Amount	Case Outcome
FL22-000119	Family Life Counseling Center, LLC I Cassandra M. Burchfield, LMFT	WellCare of Florida, Inc. dba Staywell (Medicaid)	\$165,069.86	Final Order Decision Upheld
FL22-000121	Jackson Memorial Hospital	Ambetter (Sunshine Health)	\$178,178.08	Final Order Amount Awarded \$178,178.08
FL22-000147	AdventHealth Altamonte	WellCare of Florida, Inc. dba Staywell (Medicaid)	\$104,094.19	Final Order Amount Awarded \$104,094.19
FL22-000148	Picket Fences Family Stabilization and Mental Health Services of South Florida	Sunshine State Health Plan, Inc. (Medicaid)	\$42,168.00	Final Order Amount Awarded \$42,168.00
FL22-000151	Cancer Specialist LLC	WellCare of Florida, Inc. dba Staywell (Medicaid)	\$100,800.00	Final Order Amount Awarded \$100,800.00
FL22-000221	Neuroshield Network SE, LLC	Cigna Health Care of Florida, Inc.	\$14,060.96	Dismissed
FL22-000235	Natera, Inc.	Oscar Health Plan	\$8,000.00	Final Order Amount Awarded \$8,000.00
FL22-000236	Natera, Inc.	Oscar Health Plan	\$3,900.00	Final Order Amount Awarded \$3,900.00
FL22-000237	Natera, Inc.	Oscar Health Plan	\$8,000.00	Final Order Amount Awarded \$8,000.00
FL22-000238	Natera, Inc.	Oscar Health Plan	\$3,900.00	Final Order Amount Awarded \$3,900.00
FL22-000239	Natera, Inc.	Oscar Health Plan	\$3,900.00	Final Order Amount Awarded \$3,900.00
FL22-000240	Natera, Inc.	Oscar Health Plan	\$3,900.00	Final Order Amount Awarded \$3,900.00
FL22-000241	Natera, Inc.	Oscar Health Plan	\$3,900.00	Final Order Amount Awarded \$3,900.00
FL22-000242	Natera, Inc.	Oscar Health Plan	\$3,900.00	Final Order Amount Awarded \$3,900.00
FL22-000243	Natera, Inc.	Oscar Health Plan	\$3,900.00	Final Order Amount Awarded \$3,900.00

Case Number	Provider Name	Respondent	Disputed Amount	Case Outcome
FL22-000244	Natera, Inc.	Oscar Health Plan	\$3,900.00	Final Order Amount Awarded \$3,900.00
FL22-000245	Natera, Inc.	Oscar Health Plan	\$3,900.00	Final Order Amount Awarded \$3,900.00
FL22-000246	Natera, Inc.	Oscar Health Plan	\$3,900.00	Final Order Amount Awarded \$3,900.00
FL22-000247	Natera, Inc.	Oscar Health Plan	\$3,900.00	Final Order Amount Awarded \$3,900.00
FL22-000248	Natera, Inc.	Oscar Health Plan	\$3,900.00	Final Order Amount Awarded \$3,900.00
FL22-000249	Natera, Inc.	Oscar Health Plan	\$3,900.00	Final Order Amount Awarded \$3,900.00
FL22-000250	Natera, Inc.	Oscar Health Plan	\$3,900.00	Final Order Amount Awarded \$3,900.00
FL22-000251	Natera, Inc.	Oscar Health Plan	\$3,900.00	Final Order Amount Awarded \$3,900.00
FL22-000252	Natera, Inc.	Oscar Health Plan	\$8,000.00	Final Order Amount Awarded \$8,000.00
FL22-000253	Natera, Inc.	Oscar Health Plan	\$3,900.00	Final Order Amount Awarded \$3,900.00
FL22-000254	Natera, Inc.	Oscar Health Plan	\$3,900.00	Final Order Amount Awarded \$3,900.00
FL22-000255	Natera, Inc.	Oscar Health Plan	\$3,900.00	Final Order Amount Awarded \$3,900.00
FL22-000256	Natera, Inc.	Oscar Health Plan	\$3,900.00	Final Order Amount Awarded \$3,900.00
FL22-000257	Natera, Inc.	Oscar Health Plan	\$3,900.00	Final Order Amount Awarded \$3,900.00
FL22-000258	Natera, Inc.	Oscar Health Plan	\$3,900.00	Final Order Amount Awarded \$3,900.00
FL22-000259	Natera, Inc.	Oscar Health Plan	\$3,900.00	Final Order Amount Awarded \$3,900.00
FL22-000260	Natera, Inc.	Oscar Health Plan	\$3,900.00	Final Order Amount Awarded \$3,900.00
FL22-000261	Natera, Inc.	Oscar Health Plan	\$3,900.00	Final Order Amount Awarded \$3,900.00
FL22-000262	Natera, Inc.	Oscar Health Plan	\$3,900.00	Final Order Amount Awarded \$3,900.00

Case Number	Provider Name	Respondent	Disputed Amount	Case Outcome
FL22-000263	Natera, Inc.	Oscar Health Plan	\$3,900.00	Final Order Amount Awarded \$3,900.00
FL22-000264	Natera, Inc.	Oscar Health Plan	\$3,900.00	Final Order Amount Awarded \$3,900.00
FL22-000265	Natera, Inc.	Oscar Health Plan	\$3,900.00	Final Order Amount Awarded \$3,900.00
FL22-000266	Natera, Inc.	Oscar Health Plan	\$3,900.00	Final Order Amount Awarded \$3,900.00
FL22-000267	Natera, Inc.	Oscar Health Plan	\$3,900.00	Final Order Amount Awarded \$3,900.00
FL22-000268	Natera, Inc.	Oscar Health Plan	\$3,900.00	Final Order Amount Awarded \$3,900.00
FL22-000269	Natera, Inc.	Oscar Health Plan	\$3,900.00	Final Order Amount Awarded \$3,900.00
FL22-000271	Natera, Inc.	Oscar Health Plan	\$3,900.00	Final Order Amount Awarded \$3,900.00
FL22-000272	Natera, Inc.	Oscar Health Plan	\$3,900.00	Final Order Amount Awarded \$3,900.00
FL22-000280	Natera, Inc.	Oscar Health Plan	\$3,900.00	Final Order Amount Awarded \$3,900.00
FL22-000281	Natera, Inc.	Oscar Health Plan	\$3,900.00	Final Order Amount Awarded \$3,900.00
FL22-000282	Natera, Inc.	Oscar Health Plan	\$3,900.00	Final Order Amount Awarded \$3,900.00
FL22-000283	Natera, Inc.	Oscar Health Plan	\$3,900.00	Final Order Amount Awarded \$3,900.00
FL22-000285	Natera, Inc.	Oscar Health Plan	\$3,900.00	Final Order Amount Awarded \$3,900.00
FL22-000286	Treasure Coast Prosthetic & Orthotic Services	Amerihealth Caritas Florida, Inc. (Medicaid)	\$3,900.00	Dismissed
FL22-000287	Natera, Inc.	Oscar Health Plan	\$3,900.00	Final Order Amount Awarded \$3,900.00
FL22-000290	Natera, Inc.	Oscar Health Plan	\$8,000.00	Final Order Amount Awarded \$8,000.00
FL22-000291	Natera, Inc.	Oscar Health Plan	\$3,900.00	Final Order Amount Awarded \$3,900.00
FL22-000292	Natera, Inc.	Oscar Health Plan	\$3,900.00	Final Order Amount Awarded \$3,900.00

Case Number	Provider Name	Respondent	Disputed Amount	Case Outcome
FL22-000293	Natera, Inc.	Oscar Health Plan	\$3,900.00	Final Order Amount Awarded \$3,900.00
FL22-000294	Natera, Inc.	Oscar Health Plan	\$3,900.00	Final Order Amount Awarded \$3,900.00
FL22-000295	Natera, Inc.	Oscar Health Plan	\$3,900.00	Final Order Amount Awarded \$3,900.00
FL22-000296	Natera, Inc.	Oscar Health Plan	\$3,900.00	Final Order Amount Awarded \$3,900.00
FL22-000297	Natera, Inc.	Oscar Health Plan	\$3,900.00	Final Order Amount Awarded \$3,900.00
FL22-000298	Natera, Inc.	Oscar Health Plan	\$3,900.00	Final Order Amount Awarded \$3,900.00
FL22-000299	Natera, Inc.	Oscar Health Plan	\$3,900.00	Final Order Amount Awarded \$3,900.00
FL22-000300	Natera, Inc.	Oscar Health Plan	\$3,900.00	Final Order Amount Awarded \$3,900.00
FL22-000301	Natera, Inc.	Oscar Health Plan	\$8,000.00	Final Order Amount Awarded \$8,000.00
FL22-000302	Natera, Inc.	Oscar Health Plan	\$3,900.00	Final Order Amount Awarded \$3,900.00
FL22-000303	Natera, Inc.	Oscar Health Plan	\$8,000.00	Final Order Amount Awarded \$8,000.00
FL22-000304	Natera, Inc.	Oscar Health Plan	\$3,900.00	Final Order Amount Awarded \$3,900.00
FL22-000305	Natera, Inc.	Oscar Health Plan	\$3,900.00	Final Order Amount Awarded \$3,900.00
FL22-000306	Natera, Inc.	Oscar Health Plan	\$3,900.00	Final Order Amount Awarded \$3,900.00
FL22-000307	Natera, Inc.	Oscar Health Plan	\$8,000.00	Final Order Amount Awarded \$8,000.00
FL22-000308	Natera, Inc.	Oscar Health Plan	\$3,900.00	Final Order Amount Awarded \$3,900.00
FL22-000309	Natera, Inc.	Oscar Health Plan	\$3,900.00	Final Order Amount Awarded \$3,900.00
FL22-000310	Natera, Inc.	Oscar Health Plan	\$3,900.00	Final Order Amount Awarded \$3,900.00
FL22-000311	Natera, Inc.	Oscar Health Plan	\$3,900.00	Final Order Amount Awarded \$3,900.00

Case Number	Provider Name	Respondent	Disputed Amount	Case Outcome
FL22-000312	Natera, Inc.	Oscar Health Plan	\$3,900.00	Final Order Amount Awarded \$3,900.00
FL22-000313	Natera, Inc.	Oscar Health Plan	\$3,900.00	Final Order Amount Awarded \$3,900.00
FL22-000314	Natera, Inc.	Oscar Health Plan	\$3,900.00	Final Order Amount Awarded \$3,900.00
FL22-000315	Natera, Inc.	Oscar Health Plan	\$3,900.00	Final Order Amount Awarded \$3,900.00
FL22-000316	Natera, Inc.	Oscar Health Plan	\$3,900.00	Final Order Amount Awarded \$3,900.00
FL22-000317	Natera, Inc.	Oscar Health Plan	\$3,900.00	Final Order Amount Awarded \$3,900.00
FL22-000318	Natera, Inc.	Oscar Health Plan	\$8,000.00	Final Order Amount Awarded \$8,000.00
FL22-000319	Natera, Inc.	Oscar Health Plan	\$8,000.00	Final Order Amount Awarded \$8,000.00
FL22-000331	Natera, Inc.	Oscar Health Plan	\$8,000.00	Final Order Amount Awarded \$8,000.00
FL22-000332	Jackson Memorial Hospital	Ambetter (Sunshine Health)	\$1,008,183.87	Final Order Amount Awarded \$1,008,183.87
FL22-000336	Natera, Inc.	Oscar Health Plan	\$3,900.00	Health Plan Opted-Out
FL22-000368	Natera, Inc.	AvMed, Inc.	\$157,945.86	Dismissed
FL22-000369	Mount Sinai Medical Center	AvMed, Inc.	\$196,708.59	Final Order Decision Upheld
FL22-000370	Mount Sinai Medical Center	AvMed, Inc.	\$63,569.02	Final Order Decision Upheld
FL22-000444	Jackson Memorial Hospital	Simply Healthcare Plans Inc. dba Clear Health Alliance (Medicaid)	\$127,809.78	Final Order Amount Awarded \$127,809.78
FL22-000445	Neuroshield Network SE, LLC	Florida Blue	\$34,286.66	Health Plan Opted-Out
FL22-000448	Neuroshield Network SE, LLC	Aetna Health, Inc.	\$29,513.26	Dismissed
FL22-000451	Neuroshield Network SE, LLC N	Florida Blue	\$5,822.17	Health Plan Opted-Out
FL22-000453	Neuroshield Network SE, LLC	Cigna Health Care of Florida, Inc.	\$4,259.82	Final Order Amount Awarded \$4,259.82
FL22-000454	Neuroshield Network SE, LLC	Florida Blue	\$10,200.00	Health Plan Opted-Out
FL22-000461	Jackson Memorial Hospital	Sunshine State Health Plan (Medicaid)	\$87,151.04	Dismissed

Case Number	Provider Name	Respondent	Disputed Amount	Case Outcome
FL22-000462	Natera, Inc.	Oscar Health Plan	\$3,900.00	Dismissed
FL22-000463	Natera, Inc.	Oscar Health Plan	\$3,900.00	Dismissed
FL22-000464	Natera, Inc.	Oscar Health Plan	\$3,900.00	Dismissed
FL22-000465	Natera, Inc	Oscar Health Plan	\$3,900.00	Dismissed
FL22-000466	Natera, Inc	Oscar Health Plan	\$3,900.00	Dismissed
FL22-000467	Natera, Inc	Oscar Health Plan	\$3,900.00	Dismissed
FL22-000468	Natera, Inc	Oscar Health Plan	\$3,900.00	Dismissed
FL22-000469	Natera, Inc	Oscar Health Plan	\$3,900.00	Dismissed
FL22-000470	Natera, Inc	Oscar Health Plan	\$3,900.00	Dismissed
FL22-000533	Natera, Inc.	Oscar Health Plan	\$3,900.00	Health Plan Opted-Out
FL23-000001	The Patriot Group	Blue Cross Blue Shield of Florida, Inc.	\$93,598.93	Health Plan Opted-Out
FL23-000069	Neuroshield Network SE, LLC	Cigna Health Care of Florida, Inc.	\$37,840.79	Dismissed
FL23-000070	Neuroshield Network SE, LLC	Cigna Health Care of Florida, Inc.	\$5,933.78	Dismissed
FL23-000071	Neuroshield Network SE, LLC	Humana Health Plan, Inc.	\$39,442.42	Dismissed
FL23-000072	Jackson Memorial Hospital	Simply Healthcare Plans, Inc.	\$92,465.74	Final Order Amount Awarded \$27,794.26
FL23-000077	Neuroshield Network SE, LLC	Bright Health Plan	\$32,893.22	Final Order Amount Awarded \$32,893.22
FL23-000078	Neuroshield Network SE, LLC	AvMed, Inc.	\$24,177.37	Dismissed
FL23-000079	Florida Neurospine Services, Inc.	Cigna Health Care of Florida, Inc.	\$54,901.10	Final Order Amount Awarded \$54,901.10
FL23-000080	Digestive Medicine Histology Lab	Cigna Health Care of Florida, Inc.	\$102,506.89	Final Order Amount Awarded \$102,506.89
FL23-000081	Panama Pharmacy	United Healthcare of Florida, Inc.	\$34.44	Final Order Amount Awarded \$34.44
FL23-000082	South Florida Oncology and Hematology Consultants, LLC	Bright Health Plan	\$236,616.00	Final Order Amount Awarded \$236,616.00
FL23-000083	Jackson Memorial Hospital	Simply Healthcare Plans, Inc. (Medicaid)	\$102,493.23	Dismissed
FL23-000084	University of Miami Hospital and Clinics	Molina Healthcare of Florida, Inc.	\$34,996.00	Final Order Amount Awarded \$34,996.00
FL23-000085	University of Miami Hospital and Clinics	Molina Healthcare of Florida, Inc. (Medicaid)	\$23,044.80	Dismissed
FL23-000086	University of Miami Hospital and Clinics	Molina Healthcare of Florida, Inc. (Medicaid)	\$9,642.83	Final Order Amount Awarded \$9,642.83
FL23-000087	Lehigh Regional Medical Center	Vivda Health (Medicaid)	\$4,171.38	Final Order Decision Upheld
FL23-000088	University of Miami Hospital and Clinics	Molina Healthcare of Florida, Inc. (Medicaid)	\$27,523.97	Final Order Amount Awarded \$21,790.80

Case Number	Provider Name	Respondent	Disputed Amount	Case Outcome
FL23-000089	University of Miami Hospital and Clinics	Molina Healthcare of Florida, Inc. (Medicaid)	\$137,288.36	Final Order Amount Awarded \$137,288.36
FL23-000090	UCSF Medical Center at Parnassus	Simply Healthcare Plans, Inc.	\$746,419.00	Final Order Amount Awarded \$731,277.77
FL23-000094	University of Miami Hospital and Clinics	Molina Healthcare of Florida, Inc. (Medicaid)	\$131,831.76	Final Order Decision Upheld
FL23-000095	Digestive Medicine Histology Lab	United Healthcare of Florida, Inc.	\$64,141.78	Health Plan Opted-Out
FL23-000096	University of Miami Hospital and Clinics	Molina Healthcare of Florida, Inc. (Medicaid)	\$709,640.98	Final Order Decision Upheld
FL23-000097	Digestive Medicine Histology Lab	AvMed, Inc.	\$10,879,666.00	Dismissed
FL23-000098	Digestive Medicine Histology Lab	United Healthcare of Florida, Inc.	\$64,141.78	Health Plan Opted-Out
FL23-000099	University of Miami Hospital and Clinics	Molina Healthcare of Florida, Inc.	\$183,000.79	Health Plan Opted-Out
FL23-000100	Family Life Counseling Center, LLC I Cassandra M. Burchfield, LMFT	Sunshine State Health Plan (Medicaid)	\$290,330.12	Final Order Decision Upheld
FL23-000101	Adventhealth Altamonte	United Healthcare of Florida, Inc.	\$161,461.90	Health Plan Opted-Out
FL23-000103	Adventhealth Altamonte	United Healthcare of Florida, Inc.	\$21,070.00	Health Plan Opted-Out
FL23-000105	University of Miami Hospital and Clinics	Molina Healthcare of Florida, Inc	\$173,302.50	Health Plan Opted-Out
FL23-000106	Homestead Manor A Palace Community	AmeriHealth Caritas Florida, Inc. (Prestige) (Medicaid)	\$12,777.03	Dismissed
FL23-000107	Ortho FL LLC	Bright Health Plan	\$14,083.86	Final Order Amount Awarded \$14,083.86
FL23-000108	Digestive Medicine Histology Lab	Aetna Health, Inc.	\$70,056.00	Health Plan Opted-Out
FL23-000109	Children's Critical Care Specialists, PA	Oscar Health Plan	\$8,850.00	Final Order Amount Awarded \$8,850.00
FL23-000110	Advanced Plastic Surgery of Long Island PLLC	Aetna Health, Inc.	\$19,912.94	Health Plan Opted-Out

The remaining claim disputes that were filed were not accepted for the following reasons:

- 2 were withdrawn by the provider.
- > 7 were dismissed as they had missing information.
- ➤ 150 were dismissed as they did not meet eligibility requirements.

The 296 claim disputes involved Aetna Health Plan, Inc., AmeriHealth Caritas Florida, Inc., AvMed, Inc., Blue Cross Blue Shield of Florida, Bright Health Plan, Cigna Health Care of Florida, Inc., Florida Blue, Humana Medical Plans, Inc., Molina Healthcare of Florida, Inc., Oscar Insurance Company, Simply Healthcare Plans, Inc., Simply Healthcare Plans, Inc. d/b/a Clear Health Alliance, Sunshine Health d/b/a Ambetter, Sunshine State Health Plan Inc., UnitedHealthcare of Florida, Inc., Vivda Health Medicaid and WellCare of Florida, Inc. (Staywell).

The claim dispute amounts filed ranged from a low of \$34.44 to a high of \$10,879,666.00. Each claim dispute generally represents several aggregated claims.