



# FLORIDA HEALTH JUSTICE PROJECT

## When can you be reimbursed for medical costs after temporarily losing Medicaid?<sup>1</sup>

### To receive reimbursement, you must show:

- The Department of Children and Families (DCF) incorrectly terminated your Medicaid.
- DCF corrected its error and gave you Medicaid back to the date of termination
- During the time you were without Medicaid, you (or someone responsible for you) paid out of pocket for a medically necessary good or service (i.e., prescription drugs, doctor's appointments, hospital visits, etc.)

### To request reimbursement, you should:

- Send the request to the Agency for Health Care Administration (AHCA) within twelve (12) months of the date DCF fixed its error. Your request should include:
  - Proof DCF terminated your Medicaid but later reinstated it. Proof can be a DCF notice that says your Medicaid was terminated and another DCF notice showing Medicaid was reinstated for the same time period.
  - Copies of bills you paid during your time without Medicaid
  - Copies of receipts showing you paid the bill out of pocket
- Your request should be sent to: [Agency for Health Care Administration, 2727 Mahan Drive, MS #58, Tallahassee, FL 32308, ATTN: Direct Reimbursement](#)
- AHCA may send you or your provider a request for additional information. Promptly respond. [Here is a link](#) to the forms AHCA may send.
- If AHCA denies your request, it must do so in writing. If denied, you can request a fair hearing.<sup>2</sup>

### What if I have unpaid medical bills?

- If you have unpaid bills, the provider should submit those bills directly to AHCA for reimbursement.
- With limited exceptions, a provider who accepts Medicaid cannot bill you if you show proof of your Medicaid enrollment.

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<sup>1</sup> The information contained herein is based on Fla. Admin. Code R. 59G-5.110. If you have questions about this process, contact Katy DeBriere at [debriere@floridahealthjustice.org](mailto:debriere@floridahealthjustice.org). Additionally, you can contact AHCA's Florida Medicaid Helpline at: 877-254-1055.

<sup>2</sup> Fair hearings can be requested by calling DCF, mailing a request or going to a DCF office, but it is best to either complete an Online Request [here](#) or by sending an email to [appeal.hearings@myflfamilies.com](mailto:appeal.hearings@myflfamilies.com). If you want advice on your appeal, you can contact a legal aid program in your area ([this link](#) has program contact information). You can submit this [online form](#) to the Florida Health Justice Project at [help@floridahealthjustice.org](mailto:help@floridahealthjustice.org).