

Florida Medicaid Pregnancy Notification Form and provider reimbursement

This communication applies to the Medicaid programs for Simply Healthcare Plans, Inc. (Simply) and Clear Health Alliance (CHA).

The *Florida Medicaid Pregnancy Notification Form* facilitates communication between the member's provider and the health plan when a pregnancy is identified. This form helps identify risk factors in the earliest stages of pregnancy to help improve birth outcomes.

Providers completing the form will need to include current and accurate member demographics, basic pregnancy information, and any high-risk pregnancy indicators for the patient.

The *Florida Medicaid Pregnancy Notification Form* and cover sheet can be found on our provider websites. Complete the form and cover sheet and submit to the health plan via fax at **877-577-0117** to notify us that you have identified a Simply or CHA member who is pregnant. The form and cover sheet can be found [here](#). Make sure your group's tax ID is entered to facilitate timely payment.

Obstetricians (OBs) are eligible for a \$25 incentive per completed form with an accompanying cover sheet. Payment will be issued to the provider group quarterly. Forms and cover sheets must be submitted to the health plan via fax at **877-577-0117**. At this time, forms submitted via Availity* will not qualify for the incentive.

Contact us

Availity Chat with Payer is available during normal business hours. Get answers to your questions about eligibility, benefits, authorizations, claims status, and more. To access Availity Essentials, go to [Availity.com](#) and select the appropriate payer space tile from the drop-down. Then, select **Chat with Payer** and complete the pre-chat form to start your chat.

For additional support, visit the *Contact Us* section at the bottom of our provider website for the appropriate contact.

Email is the quickest and most direct way to receive important information from Simply Healthcare Plans, Inc. (Simply) and Clear Health Alliance (CHA).

To start receiving email from us (including some sent in lieu of fax or mail), submit your information using the QR code to the right or via our online form (Simply: <https://bit.ly/3Cm6b8s>, CHA: <https://bit.ly/2ZoU8so>).

Simply:



CHA:



* Availity, LLC is an independent company provider administrative support services on behalf of the health plan.