

Date: April 25, 2025

From: Carelon Behavioral Health

Subject: Continuity of Care (COC)

Effective February 1, 2025, Carelon Behavioral Health (Carelon), in partnership with Simply Healthcare Plans, Inc. (Simply) began serving the healthcare needs of members seeking Behavior Analysis (BA) services. During the Continuity of Care (COC) period, providers are able to bill and receive reimbursement for BA services, regardless of pre-existing contracts or agreements. Simply Healthcare Plans has extended the COC period an additional 30 days, the COC period will now end on June 2, 2025.

The COC period was implemented to facilitate a smooth transition and ensure continuity of care for individuals receiving BA services. As we approach the end of this period, we urge all providers to take the necessary steps to finalize any pending transitions and, if applicable, adhere to care coordination guidelines and transition of members to an in-network BA provider.

Key actions for providers:

- Review cases to ensure compliance with the upcoming changes.
 - A referral for BA therapy by a qualified physician or practitioner and must include:
 - A physician's order for Behavior Analysis services and,
 - A CDE: Diagnostic Evaluation completed by a medical doctor specializing in developmental behavioral pediatrics, neurodevelopmental pediatrics, pediatric neurology, adult or child psychiatry, or child psychiatry, or a child psychologist.
 - Comprehensive Diagnostic Evaluation (CDE)
 - A comprehensive diagnostic evaluation (CDE) performed according to national evidence-based practice standards. CDEs may be performed by a multidisciplinary team or individual practitioner. In any case, the CDE must be led by a licensed practitioner working within their medical, developmental, or psychological scope(s) of practice. The CDE must include assessment findings and treatment recommendations appropriate to the recipient. For example, the CDE may include data from behavioral reports by parents, guardians, and/or teachers; diagnostic testing related to recipients' development, behavior, hearing, and/or vision; genetic testing; and/or other neurological and/or medical testing.
 - Both the order and the CDE must be signed by the qualified physician or practitioner
 - For a request for services an updated treatment plan with member specific information and data is required
 - The plan and data should be no older than 30 days at the time of submission
 - The plan should contain current Vineland and BASC scores and administration dates
 - Authorization Request form filled out
 - IEP/504 (if applicable)
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- Update care plans ensuring they align with the new coordination standards.
- Engage with your interdisciplinary teams to confirm roles and responsibilities in the care plan.
- Inform clients and families regarding any changes or updates in their care plans and address any questions they may have.
- Ensure all documentation is up-to-date and reflects the finalization of the transitional care period.

We understand that transitions can be challenging, and we are here to support you. We thank you for your dedication and cooperation in providing exceptional care. Should you have any questions, please do not hesitate to reach out to the FL-dedicated Provider Relations team at provider.relations.FL@carelon.com

Please see additional provider resources at:

[Forms and Guides for FL | Carelon Behavioral Health](#) BA Provider Resources

BA - Provider Orientation

BA - Frequently Asked Questions (FAQ for In Network Providers)

BA - Frequently Asked Questions (FAQ for Out of Network Providers)

BA - Billing and Reimbursement during COC Period

BA - Authorization Request Form

R Codes Billing Guidelines

[Florida AHCA Behavior Analysis Coverage Policy](#): Rule 59G – 4.125, according to Chapter 120, Florida Statutes