



RON DESANTIS  
GOVERNOR

MARY C. MAYHEW  
SECRETARY

0301446314



PRV-0043-R/XX/0301446314/1  
PEMBROKE PINES FIRE DEPT  
9500 PINES BLVD/BUILDING B  
PEMBROKE PINES FL 33024-0000



000276

December 8, 2020

**RE: Florida Medicaid Provider ID: 0850632**

Dear Provider:

### **ACTION REQUIRED**

Per Sections 1902(a) and 1932(d) of the Social Security Act (Act), each provider furnishing items or services to, or ordering, prescribing, referring, or certifying eligibility for, services for individuals eligible to receive assistance under Florida Medicaid state plan, a waiver to the plan, or as an enrollee in a managed care health plan, must enroll, and to periodically renew, the enrollment with the Agency for Health Care Administration (Agency).

This letter serves as notice that the current Florida Medicaid provider agreement between the provider identified above and the Agency will expire **03/06/2021**. In order to continue participating in the Florida Medicaid program, the provider must complete the renewal process prior to that date.

**Failure to complete the renewal process prior to 03/06/2021 will lead to suspension of Medicaid payments and termination of the provider's ID resulting in non-payment for services rendered after that date.**

The renewal application is available online in the secure Florida Medicaid Web Portal under the Quick Links dialog box. The renewal application will display the information currently on the provider's Florida Medicaid file. The provider can submit any necessary corrections and upload supporting documentation, including proof of an eligible background screening for Florida Medicaid.

It is recommended that the provider submit the renewal application as soon as possible to allow sufficient time for processing prior to the expiration of the current agreement.

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Tallahassee, FL 32308  
AHCA.MyFlorida.com



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PRV0043R 05/14



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Name: PEMBROKE PINES FIRE DEPT  
Medicaid Provider ID: 0850632  
Date: 12/08/2020  
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Important information on provider renewal, including the disclosure of owners and managing employees on the renewal application and background screening requirements, is available on the Florida Medicaid Web Portal located at [www.mymedicaid-florida.com](http://www.mymedicaid-florida.com).

For questions related to this letter or the online renewal application, please contact the Provider Enrollment Call Center at 1-800-289-7799, option 4.

Sincerely,

Gay L. Munyon, Chief  
Medicaid Fiscal Agent Operations

