

AGENCY FOR HEALTH CARE ADMINISTRATION
After the Fact Request Form Under 35K

Requestor Name:	Devona Pickle	Date:	06/13/2022
Division/Bureau:	Medicaid/Medicaid Policy	Vendor Name:	Quentin Van Meter, MD, d/b/a Van Meter Pediatric Endocrinology
Phone:	850-412-4646	Dollar Amount:	Not to exceed \$34,650.00 in combination with PR12154138
E-mail address:	Devona.Pickle@ahca.myflorida.com	Dates of Service:	4/15/22-6/30/22

Reason for Occurrence (brief explanation):

On April 20, 2022, the Bureau of Medicaid Policy received a request for a time-sensitive analysis of service coverage. While such requests are typically for a single service or good, this particular request called for a simultaneous analysis of three distinct services. Per the Agency's promulgated rule, the Agency must consider multiple factors, including recommendations or assessments by clinical or technical experts on the subject or field. Dr. Van Meter was approached regarding the Agency's consultation need and agreed to work with the Agency within those timeframes. Due to the enhanced scope of the project, the Agency sought subject matter expertise from outside of the Agency.

Dr. Van Meter completed his MFMP registration on May 24, 2022. However, he was not successful in updating his W-9 form until 6/13/22, despite multiple attempts. Dr. Van Meter worked with MFMP staff to resolve the issue. The consultant received confirmation of the acceptance of his W-9 on June 3, 2022. Because the consultant had not completed all components of the MFMP enrollment, we were unable to use the Agency's policy (4007) regarding urgent purchases.

Why it was in the best interest of the State to Proceed:

Consultant services were used prior to issuance of the purchase requisition in order to ensure the time-sensitive analysis was comprehensive and complete by May 5, 2022.

Actions to be taken to Prevent Reoccurrence:

Consider whether the Agency's policy (4007) can be utilized to avoid an ATF request. We will continue to work with consultants to promptly enroll them in advance of receipt of services.

Division/Office Approval

Supervisor's Name: (Required)	Ann Dalton
Signature: (Physical or email approval)	Approved via email on 6/13/2022

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Purchasing Office Approval
Approved: YES <input checked="" type="checkbox"/> NO: <input type="checkbox"/>
Comments:
Purchasing Office Approver: <i>Ashley Balkcom</i> 6/14/22

Invoice must be sent with ATF form. Supervisor approval is required, but may be in electronic form (email).

Submit all requests by email to: MFMP_Help@ahca.myflorida.com