SIPP, TGC, and QRTP Authorization Recertification Update

Molina Healthcare of Florida is sharing important guidance for submitting recertification requests for members receiving services through Statewide Inpatient Psychiatric Programs (SIPP), Therapeutic Group Care (TGC), and Qualified Residential Treatment Programs (QRTP) who will be enrolled in the Children's Medical Services (CMS) Plan effective October 1, 2026.

Submitting recertification requests in advance will help support a smooth transition and continuity of care for CMS Plan members.

Provider action required

- Review your current CMS Plan member authorizations and submit recertification requests for services with authorizations scheduled to expire on or after October 1, 2026.
- Include the complete recertification request and all supporting clinical documentation needed to evaluate the member's continued level of care.

When to submit your requests

- **Authorizations expiring October 1 through October 31, 2026:** Submit complete recertification requests beginning September 14, 2026.
- **Authorizations expiring on or after November 1, 2026:** Follow the standard process of submitting recertification requests within two weeks of the authorization expiration date.

How to submit your requests

- **Prior to October 1, 2026:** Submit requests via fax to 866-440-9791, as members may not yet be available in the Availity Essentials Portal.
- **On or after October 1, 2026:** Submit requests through the Availity Essentials Portal using Molina's standard authorization submission process.

Services requiring recertification

Please submit recertification requests for services with authorizations scheduled to expire on or after October 1, 2026.

Important reminders

- Requests for services with dates of service prior to October 1, 2026, should continue to be directed to the member's current health plan.
- Submission of a recertification request does not guarantee approval and remains subject to member eligibility, benefit coverage, medical necessity review, and applicable authorization requirements.
- Submitting complete clinical information with the initial request will help support timely review. Molina may contact your facility if additional information is needed.

Molina values your partnership and appreciates your assistance in supporting continuity of care for CMS Plan members during this transition.

Molina Healthcare of Florida Provider Services