Changing Managed Care Organization ("Plan")

New enrollees may change their Medicaid managed care organization (also called "MCO" or "plan") within the first 120 days after enrollment. This is also called "disenrollment."

Disenrollment can be done by going online and creating a Florida Medicaid Member Portal Account; https://members.flmedicaidmanagedcare.com/login?langCd=en or calling 1-877-711-3662 to speak with a Medicaid choice counselor.

This website has useful information about changing plans: https://www.flmedicaidmanagedcare.com/health/enroll.

After 120 days, enrollees may change plans only for "good cause" or during the annual open enrollment period. Generally, "good cause means" that there is a significant problem with the services that the MCO is providing. Some examples include poor quality of care, not being able to access necessary speciality services or unreasonable delay or denial of services.

It is important to note that the Florida rule regarding disenrollment could be changing soon. Please recheck this site for updates.

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