



Florida Medicaid Severe Mental Illness (SMI) Designation Update

Effective February 1, 2025, Florida Agency for Health Care Administration implemented a change in how patients with Severe Mental Illness (SMI) are identified¹. This update aims to ensure accurate diagnosis, treatment, and reimbursement for healthcare providers.

Key Changes

Before February 1, 2025, SMI designation was permanent once a qualifying diagnosis was made.

After February 1, 2025, the SMI designation must be verified annually.

Diagnostic Groups and Criteria

Diagnostic Group	Conditions	Claim Types	Verification Criteria
Groups 1 and 2	Schizophrenia/Bipolar disorders	Inpatient/Outpatient/Professional	Any diagnosis in any position within 12-month rolling look-back
Groups 3, 4 and 5	Mood disorders, major depression, anxiety, other mental health disorders	Inpatient/Outpatient/Professional	Primary diagnosis on an inpatient claim within 12-month rolling cycle OR Any diagnosis on an outpatient claim with at least two dates of service between 15–90 days apart OR Any diagnosis on a professional claim with four consecutive dates of service 7–12 days apart
Group 6	Suicide attempt	All claim types	Appropriate diagnosis code in any position within 24-month rolling look-back

Additional Resources for Providers

Providers can reference additional materials and resources on Availity to ensure accurate documentation and coding. Availity offers comprehensive guides and support to help providers navigate the new SMI designation criteria. Visit Availity for more information and assistance.

Contact Information For any questions, please contact FLProviderEngagement@aetna.com

Reference link: 1. [Florida Agency for Health Care Administration Approved Contract Materials](#)