

1 A bill to be entitled
2 An act relating to adult day care services and
3 centers; amending s. 409.908, F.S.; providing a
4 reimbursement system for adult day care services
5 providers under the Medicaid program; defining the
6 term "tiered payment system"; providing reimbursement
7 rates for nonemergency medical transportation services
8 provided by adult day care centers to Medicaid
9 recipients; creating s. 429.924, F.S.; providing
10 purpose of specified provisions; authorizing waivers
11 under specified circumstances; providing annual
12 continuing education requirements for operators of
13 adult day care centers; providing that certain persons
14 qualify for specified course credits; requiring
15 persons and entities providing continuing education
16 courses to furnish specified documents to the
17 Department of Elder Affairs; providing that the
18 continuing education requirements are a condition
19 precedent to the issuance, continuation,
20 reinstatement, or renewal of an adult day care center
21 license; authorizing the department to grant an
22 extension for the education course completion under
23 certain circumstances; prohibiting the department from
24 renewing licenses until the course is completed;

25 providing an effective date.

26
27 Be It Enacted by the Legislature of the State of Florida:

28
29 **Section 1. Subsections (8) and (18) of section 409.908,**
30 **Florida Statutes, are amended to read:**

31 409.908 Reimbursement of Medicaid providers.—Subject to
32 specific appropriations, the agency shall reimburse Medicaid
33 providers, in accordance with state and federal law, according
34 to methodologies set forth in the rules of the agency and in
35 policy manuals and handbooks incorporated by reference therein.
36 These methodologies may include fee schedules, reimbursement
37 methods based on cost reporting, negotiated fees, competitive
38 bidding pursuant to s. 287.057, and other mechanisms the agency
39 considers efficient and effective for purchasing services or
40 goods on behalf of recipients. If a provider is reimbursed based
41 on cost reporting and submits a cost report late and that cost
42 report would have been used to set a lower reimbursement rate
43 for a rate semester, then the provider's rate for that semester
44 shall be retroactively calculated using the new cost report, and
45 full payment at the recalculated rate shall be effected
46 retroactively. Medicare-granted extensions for filing cost
47 reports, if applicable, shall also apply to Medicaid cost
48 reports. Payment for Medicaid compensable services made on

49 | behalf of Medicaid-eligible persons is subject to the
50 | availability of moneys and any limitations or directions
51 | provided for in the General Appropriations Act or chapter 216.
52 | Further, nothing in this section shall be construed to prevent
53 | or limit the agency from adjusting fees, reimbursement rates,
54 | lengths of stay, number of visits, or number of services, or
55 | making any other adjustments necessary to comply with the
56 | availability of moneys and any limitations or directions
57 | provided for in the General Appropriations Act, provided the
58 | adjustment is consistent with legislative intent.

59 | (8) (a) Except as otherwise provided in paragraph (b), a
60 | provider of home-based or community-based services rendered
61 | pursuant to a federally approved waiver shall be reimbursed
62 | based on an established or negotiated rate for each service.
63 | These rates shall be established according to an analysis of the
64 | expenditure history and prospective budget developed by each
65 | contract provider participating in the waiver program, or under
66 | any other methodology adopted by the agency and approved by the
67 | Federal Government in accordance with the waiver. Privately
68 | owned and operated community-based residential facilities which
69 | meet agency requirements and which formerly received Medicaid
70 | reimbursement for the optional intermediate care facility for
71 | the intellectually disabled service may participate in the
72 | developmental services waiver as part of a home-and-community-

73 based continuum of care for Medicaid recipients who receive
74 waiver services.

75 (b)1. A provider of adult day care services rendered
76 pursuant to a federally approved waiver shall be reimbursed
77 pursuant to a tiered payment system. As used in this paragraph,
78 the term "tiered payment system" means a two-tiered payment
79 model that categorizes an adult day care center based on the
80 center's quality of care, facilities, compliance with
81 established standards, and level of service.

82 a. For purposes of reimbursement as a Tier I center, the
83 center must meet all of the basic requirements for a licensed
84 adult day care center as provided in part III of chapter 429,
85 with the exception of the provision of specialized Alzheimer's
86 services, as defined in s. 429.918(2). The reimbursement rate
87 for a Tier I center shall be the minimum rate per day set by the
88 United States Department of Veterans Affairs for adult day
89 health care services, but not less than \$90 per day. The
90 reimbursement rate shall be adjusted on January 1 of each year,
91 except that such adjustment may not exceed the lesser of 3
92 percent or the increase in the Consumer Price Index for All
93 Urban Consumers in the South Region as determined by the Bureau
94 of Labor Statistics of the United States Department of Labor.

95 b. For purposes of reimbursement as a Tier II center, the
96 center must meet all of the requirements of a Tier I center and

97 must be designated as a specialized Alzheimer's services adult
98 day care center, as provided in s. 429.918. The reimbursement
99 rate for a Tier II center shall be the minimum rate per day set
100 by the United States Department of Veterans Affairs for adult
101 day health care services, plus 30 percent rate difference over
102 the standard contracted rate for a Tier I center; however, the
103 reimbursement rate may not be less than \$110 per day. The
104 reimbursement rate shall be adjusted on January 1 of each year,
105 except that such adjustment may not exceed the lesser of 3
106 percent or the increase in the Consumer Price Index for All
107 Urban Consumers in the South Region as determined by the Bureau
108 of Labor Statistics of the United States Department of Labor.

109 2. An adult day care center that provides nonemergency
110 medical transportation services to a Medicaid recipient shall be
111 reimbursed for such services at the rates paid by:

112 a. The applicable managed care plan to its contracted
113 nonemergency medical transportation vendor; or

114 b. The nonemergency medical transportation vendor to the
115 nonemergency medical transportation services provider, if the
116 adult day care center directly contracts with the nonemergency
117 medical transportation vendor of a managed care plan.

118 (18) Unless otherwise provided for in the General
119 Appropriations Act or in paragraph (8) (b), a provider of
120 transportation services shall be reimbursed the lesser of the

121 amount billed by the provider or the Medicaid maximum allowable
122 fee established by the agency, except when the agency has
123 entered into a direct contract with the provider, or with a
124 community transportation coordinator, for the provision of an
125 all-inclusive service, or when services are provided pursuant to
126 an agreement negotiated between the agency and the provider. The
127 agency, as provided for in s. 427.0135, shall purchase
128 transportation services through the community coordinated
129 transportation system, if available, unless the agency, after
130 consultation with the commission, determines that it cannot
131 reach mutually acceptable contract terms with the commission.
132 The agency may then contract for the same transportation
133 services provided in a more cost-effective manner and of
134 comparable or higher quality and standards. Nothing in this
135 subsection shall be construed to limit or preclude the agency
136 from contracting for services using a prepaid capitation rate or
137 from establishing maximum fee schedules, individualized
138 reimbursement policies by provider type, negotiated fees, prior
139 authorization, competitive bidding, increased use of mass
140 transit, or any other mechanism that the agency considers
141 efficient and effective for the purchase of services on behalf
142 of Medicaid clients, including implementing a transportation
143 eligibility process. The agency shall not be required to
144 contract with any community transportation coordinator or

145 transportation operator that has been determined by the agency,
146 the Department of Legal Affairs Medicaid Fraud Control Unit, or
147 any other state or federal agency to have engaged in any abusive
148 or fraudulent billing activities. The agency is authorized to
149 competitively procure transportation services or make other
150 changes necessary to secure approval of federal waivers needed
151 to permit federal financing of Medicaid transportation services
152 at the service matching rate rather than the administrative
153 matching rate. Notwithstanding chapter 427, the agency is
154 authorized to continue contracting for Medicaid nonemergency
155 transportation services in agency service area 11 with managed
156 care plans that were under contract for those services before
157 July 1, 2004.

158 **Section 2. Section 429.924, Florida Statutes, is created**
159 **to read:**

160 429.924 Continuing education requirements for operators.—

161 (1) The purpose of this section is to establish the
162 requirements and standards for a continuing education course for
163 operators managing the day-to-day operations of licensed adult
164 day care centers in this state. An operator who cannot comply
165 with the continuing education requirements of this section due
166 to active duty in the military may submit a written request for
167 a waiver to the department.

168 (2) In addition to any existing adult day care center

169 staff training required by department rule or established under
170 this part, an operator must complete every year an 8-hour
171 continuing education course developed and offered by the Florida
172 Adult Day Services Association and approved by the department.
173 The course must include training in the following subject areas:
174 (a) One hour on compliance with the Agency for Health Care
175 Administration.
176 (b) One hour on Alzheimer's disease and related disorders.
177 (c) One hour on the state comprehensive emergency
178 management plan.
179 (d) One hour on anti-fraud, abuse, and neglect.
180 (e) One hour on nonemergency medical transportation.
181 (f) One hour on daily management.
182 (g) One hour on staff compliance with Participant Care
183 Standards, rule 59A-16.103, Florida Administrative Code.
184 (h) One hour on the Health Insurance Portability and
185 Accountability Act.
186 (3) The continuing education course described in
187 subsection (2) may be offered in person or online. Upon
188 completion of the online course, an operator must pass a
189 department-approved online examination with a minimum score of
190 80 percent. An operator attending an in-person course is exempt
191 from the examination requirement. A person who teaches an
192 approved course of instruction, or lectures in any approved

193 course, and who attends the entire course qualifies for the same
194 number of classroom hours as a person who takes and successfully
195 completes such course. Credit is limited to the number of hours
196 actually taught or lectured unless the person attends the entire
197 course.

198 (4) Each person or entity providing a course for
199 continuing education credit must furnish, within 30 days after
200 completion of the course, in a form satisfactory to the
201 department or its designee, a roster showing the adult day care
202 center license numbers and the names of the operators who have
203 successfully completed the continuing education course and who
204 request the continuing education credits.

205 (5) (a) An operator's compliance with the continuing
206 education requirements of this section is a condition precedent
207 to the issuance, continuation, reinstatement, or renewal of an
208 adult day care center license. The department may, for good
209 cause shown, grant an operator an extension of time during which
210 the continuing education course must be completed, except that
211 any such extension may not exceed 1 year.

212 (b) Unless the department has granted an operator an
213 extension under paragraph (a), the department may not issue a
214 renewal license to an adult day care center whose operator fails
215 to complete the requirements of this section until the operator
216 successfully completes the continuing education course.

HB 1057

2025

217

Section 3. This act shall take effect July 1, 2025.