By Senator Bradley

6-00438A-26

2026648

A bill to be entitled

An act relating to Medicaid reimbursement for private duty nursing services; amending s. 409.962, F.S.; defining the term "pediatric continuing care integrated community" for purposes of the state Medicaid program; amending s. 409.975, F.S.; defining the terms "geographic area" and "prevailing hourly rate"; requiring Medicaid managed care plans to reimburse licensed home health agencies for private duty nursing services provided in a community residential group home at a certain rate; prohibiting Medicaid managed care plans from reducing reimbursement for such services under certain circumstances; requiring Medicaid managed care plans to negotiate rates with affiliated businesses at least annually; requiring the Agency for Health Care Administration to seek federal approval within a specified timeframe; requiring the agency to implement the changes made by the act upon federal approval; providing effective dates.

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

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Section 1. Effective July 1, 2026, present subsections (13) through (18) of section 409.962, Florida Statutes, are redesignated as subsections (14) through (19), respectively, and a new subsection (13) is added to that section, to read:

409.962 Definitions.—As used in this part, except as otherwise specifically provided, the term:

6-00438A-26 2026648

(13) "Pediatric continuing care integrated community" means a group of affiliated and integrated businesses that, as of July 1, 2026, are licensed or certified by the agency or the Agency for Persons with Disabilities and collectively provide coordinated care for Medicaid-eligible persons younger than 21 years of age who are medically fragile, including those who are technology dependent. The term includes all of the following entities under common ownership:

- (a) A community residential group home licensed under chapter 393 providing residential care for medically complex children.
- (b) A home health agency licensed under part III of chapter 400 providing private duty nursing services by registered nurses or licensed practical nurses.
- (c) A prescribed pediatric extended care center licensed under part VI of chapter 400.
- (d) A home medical equipment provider licensed under part VII of chapter 400.
- (e) A health care clinic licensed under part X of chapter 400 providing speech-language therapy, physical therapy, or occupational therapy.
- Section 2. Subsection (7) is added to section 409.975, Florida Statutes, to read:
- 409.975 Managed care plan accountability.—In addition to the requirements of s. 409.967, plans and providers participating in the managed medical assistance program shall comply with the requirements of this section.
- (7) REIMBURSEMENT FOR SERVICES IN PEDIATRIC CONTINUING CARE INTEGRATED COMMUNITIES.—

6-00438A-26 2026648

(a) As used in this subsection, the term:

- 1. "Geographic area" means the region or metropolitan statistical area in which the pediatric continuing care integrated community is located.
- 2. "Prevailing hourly rate" means the usual and customary contracted hourly rate paid by Medicaid managed care plans to providers for private duty nursing services in the same geographic area during the current calendar year, which rate is negotiated at least annually between the Medicaid managed care plans and the provider of private duty nursing within the community residential group home.
- (b) Medicaid managed care plans shall reimburse home health agencies licensed under part III of chapter 400 for private duty nursing services, including services provided by registered nurses and licensed practical nurses, provided in a community residential group home at 100 percent of the prevailing hourly rate paid for private duty nursing services in the geographic area, regardless of the number of plan members who share a dwelling space within the community residential group home.
- (c) Reimbursement may not be reduced based on the number of Medicaid-eligible persons receiving private duty nursing services in the same dwelling space, or on the same day, within the community residential group home.
- (d) Managed care plans and the affiliated businesses shall negotiate rates at least annually for medical services provided within the pediatric continuing care integrated community.
- Section 3. Within 30 days after the effective date of this act, the Agency for Health Care Administration shall seek any necessary federal approval, including through any necessary

6-00438A-26 2026648 88 state plan amendment or Medicaid waiver, to implement the changes $\underline{\text{made}}$ by this act. The agency shall implement this act 89 upon receipt of federal approval. 90 Section 4. Except as otherwise provided in this act, this 91 92 act shall take effect upon becoming a law.