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State/Territory Name: Florida

State Plan Amendment (SPA) #: 24-0011

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) Form CMS-179
- 3) Approved SPA Pages

DEPARTMENT OF HEALTH & HUMAN SERVICES

Centers for Medicare & Medicaid Services

601 E. 12th St., Room 355

Kansas City, Missouri 64106



Medicaid and CHIP Operations Group

October 28, 2025

Brian Meyer
Deputy Secretary for Medicaid
Agency for Health Care Administration
2727 Mahan Drive, Mail Stop #8
Tallahassee, Florida 32301

Re: Florida State Plan Amendment (SPA) 24-0011

Dear Deputy Secretary Meyer:

Enclosed please find a corrected approval package for your Florida State Plan Amendment (SPA) submitted under transmittal number 24-0011. This SPA updates Florida's home health benefit to include Family Home Health Aide services. The enhancement allows home health agencies to receive reimbursement for services provided by an eligible provider relative caring for a medically fragile child, was originally approved on October 15, 2025. The approval package sent to Florida included the following errors:

- The incorrect version of Attachment 3.1-A, Page 11 was included in the original approval package.

The enclosed corrected package contains the original signed letter, the approved Form CMS-179, and the corrected SPA pages to be incorporated into the Florida State Plan.

If you have any questions, please contact Kia Carter-Anderson at (404) 562-7431 or via email at Kia.Carter-Anderson@cms.hhs.gov.

Sincerely,

A black rectangular box redacting the signature of Nicole McKnight.

Nicole McKnight
On Behalf of Courtney Miller, MCOG Director

Enclosures

cc: Shanise Jackson

DEPARTMENT OF HEALTH & HUMAN SERVICES

Centers for Medicare & Medicaid Services
601 E. 12th St., Room 355
Kansas City, Missouri 64106



Medicaid and CHIP Operations Group

October 15, 2025

Brian Meyer
Deputy Secretary for Medicaid
Agency for Health Care Administration
2727 Mahan Drive, Mail Stop #8
Tallahassee, Florida 32301

Re: Florida State Plan Amendment (SPA) 24-0011

Dear Deputy Secretary Meyer:

The Centers for Medicare & Medicaid Services (CMS) reviewed your Medicaid State Plan Amendment (SPA) submitted under transmittal number 24-0011. This amendment updates Florida's home health benefit to include Family Home Health Aide services. The enhancement allows home health agencies to receive reimbursement for services provided by an eligible provider relative caring for a medically fragile child.

We conducted our review of your submittal according to statutory requirements in Title XIX of the Social Security Act and implementing regulation 42 CFR 440.70. This letter informs you that Florida's Medicaid SPA TN 24-0011 was approved on October 15, 2025, effective October 1, 2024.

Enclosed are copies of Form CMS-179 and approved SPA pages to be incorporated into the Florida State Plan.

If you have any questions, please contact Kia Carter-Anderson at (404) 562-7431 or via email at Kia.Carter-Anderson@cms.hhs.gov.

Sincerely,

A solid black rectangular box redacting the signature of Nicole McKnight.

Nicole McKnight
On Behalf of Courtney Miller, MCOG Director

Enclosures

cc: Shanise Jackson

**TRANSMITTAL AND NOTICE OF APPROVAL OF
STATE PLAN MATERIAL
FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES**

1. TRANSMITTAL NUMBER <u>2</u> <u>4</u> — <u>0</u> <u>0</u> <u>1</u> <u>1</u>	2. STATE <u>FL</u>
3. PROGRAM IDENTIFICATION: TITLE OF THE SOCIAL SECURITY ACT ☒ XIX ☐ XXI	
4. PROPOSED EFFECTIVE DATE <u>October 1, 2024</u>	
5. FEDERAL STATUTE/REGULATION CITATION <u>42 CFR 440.70</u>	6. FEDERAL BUDGET IMPACT (Amounts in WHOLE dollars) a FFY <u>202425</u> \$ <u>0</u> b FFY <u>2025-26</u> \$ <u>0</u>
7. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT <u>Attachment 3.1-A page 11, 11b, 11c 25a, 28, 28a Attachment 3.1-B page 11, 11a, 11b, 11c 28a, 29, 29a Attachment 4.19-B page 32</u>	8. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable) <u>Attachment 3.1-A page 11, 11b, 28, 28a Attachment 3.1-B page 11, 11a, 11b, 29, 29a Attachment 4.19-B page 32</u>

TO: CENTER DIRECTOR
CENTERS FOR MEDICAID & CHIP SERVICES
DEPARTMENT OF HEALTH AND HUMAN SERVICES

5. FEDERAL STATUTE/REGULATION CITATION
42 CFR 440.70

7. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT
Attachment 3.1-A page 11, 11b, 11c 25a, 28, 28a Attachment 3.1-B page 11, 11a, 11b, 11c 28a, 29, 29a Attachment 4.19-B page 32

9. SUBJECT OF AMENDMENT
Home Health Services

10. GOVERNOR'S REVIEW (Check One)

☐ GOVERNOR'S OFFICE REPORTED NO COMMENT

☐ COMMENTS OF GOVERNOR'S OFFICE ENCLOSED

☐ NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL

☒ OTHER, AS SPECIFIED:

11. SIGNATURE OF STATE AGENCY OFFICIAL 	15. RETURN TO Mr. Brian Meyer Deputy Secretary for Medicaid Agency for Health Care Administration 2727 Mahan Drive, Mail Stop #8 Tallahassee, Florida 32308 Attention: Shanise Jackson
12. TYPED NAME Brian Meyer	
13. TITLE Deputy Secretary for Medicaid	
14. DATE SUBMITTED <u>11-26-24</u>	

FOR CMS USE ONLY

16. DATE RECEIVED <u>11/26/2024</u>	17. DATE APPROVED <u>10/15/2025</u>
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PLAN APPROVED - ONE COPY ATTACHED

18. EFFECTIVE DATE OF APPROVED MATERIAL <u>10/01/2024</u>	19. SIGNATURE OF APPROVING OFFICIAL 
20. TYPED NAME OF APPROVING OFFICIAL Nicole McKnight	21. TITLE OF APPROVING OFFICIAL On Behalf of Courtney Miller, MCOG Director

22. REMARKS

On 9/23/25, state authorized Pen & Ink changes, striking Attachment 4.19-B, page 32 from Box #7 and Box #8. On 9/25/25, the state authorized Pen & Ink changes to Box #7, adding Attachment 3.1-A, page 11a, 25a, and striking 11c. And adding Attachment 3.1-B, page 28a, striking 11c. In Box #8, the state authorizes adding Attachment 3.1-A, page 11a. On 10/10/25, the state authorized Pen & Ink changes to Box #7, adding page 11c to 3.1-A and 3.1-B, and striking page 11 from 3.1-B. And in Box #8, striking page 11 from Attachment 3.1-B.

Early and Periodic Screening and Diagnosis of Individuals Under 21 Years of Age and
Treatment of Conditions Found

Home Health Nursing Visits

(7a) Description

Home health nursing services provide care to recipients whose medical conditions, illness, or injury require the care to be delivered in the recipient's place of residence or other community setting. Home health nursing services are provided in accordance with Title 42, Code of Federal Regulations 440.70.

Who Can Receive

Home health nursing services are available to recipients under the age of 21 years who require medically necessary home health visit services.

Who Can Provide

Home Health Nursing services are provided by either:

- Registered nurses or licensed practical nurses who are employed by a home health agency licensed in accordance with state law.
- A registered nurse (RN) licensed and working within the scope of their practice in accordance with state law.

Allowable Benefits

Florida Medicaid reimburses for up to four intermittent home health visits, per day, when prior authorized by the Agency for Health Care Administration (Agency) or its designee.

The four-visit limit is a combined daily limit for both home health nursing and home health aide services.

In accordance with section 1905(a) of the Social Security Act, codified in Title 42 of the United States Code 1396d(a), services that exceed coverage may be approved, if determined medically necessary when prior authorized by the Agency or its designee.

Exclusions

Florida Medicaid does not reimburse for the following:

- Services furnished by related providers, caretaker relatives, household members, or any person with custodial or legal responsibility for the recipient
- Services provided in any of the following locations:
 - Hospitals
 - Intermediate care facility for individuals with intellectual disabilities
 - Nursing facilities
 - Prescribed pediatric extended care centers
 - Residential facilities or assisted living facilities when the services duplicate those provided by the facility

Early and Periodic Screening and Diagnosis of Individuals Under 21 Years of Age and
Treatment of Conditions Found

Home Health Aide Visits

(7b) Description

Home health aide services provide care to recipients whose medical conditions, illness, or injury require the care to be delivered in the recipient's place of residence or other community setting. Home health aide services are provided in accordance with Title 42, Code of Federal Regulations 440.70.

Who Can Receive

Home health aide services are available to recipients under the age of 21 years who require medically necessary home health visit services.

Who Can Provide

Home Health Aide services are provided by:

- A home health agency licensed in accordance with state law.

Allowable Benefits

Florida Medicaid reimburses for up to four intermittent home health aide visits, per day, when prior authorized by the Agency for Health Care Administration (Agency) or its designee.

The four visit limit is a combined daily limit for both home health nursing and home health aide services.

In accordance with section 1905(a) of the Social Security Act, codified in Title 42 of the United States Code 1396d(a), services that exceed coverage may be approved, if determined medically necessary when prior authorized by the Agency or its designee.

Exclusions

Florida Medicaid does not reimburse for the following:

- Services furnished by related providers, caretaker relatives, household members, or any person with custodial or legal responsibility for the recipient
- Services provided in any of the following locations:
 - Hospitals
 - Intermediate care facility for individuals with intellectual disabilities
 - Nursing facilities
 - Prescribed pediatric extended care centers
 - Residential facilities or assisted living facilities when the services duplicate those provided by the facility

(7) Home Health Services

Medically necessary home health services are covered when there is an order for home health services and the recipient is under the care of a physician, advanced practice registered nurse, or physician assistant.

For the initiation of home health services, a face-to-face encounter related to the primary reason the client requires home health services must occur not more than ninety (90) days before or thirty (30) days after the start of services. The face-to-face encounter must be conducted by a physician, nurse practitioner, clinical nurse specialist, certified nurse midwife or physician assistant. The face-to-face encounter must be related to the primary reason the beneficiary requires the home health service.

Florida allows all eligible providers to enroll as Home Health Agencies, to ensure freedom of choice of providers in accordance with 42 CFR 440.70.

Electronic Visit Verification (EVV) for Home Health Services

Florida became compliant with the Electronic Visit Verification System (EVV) requirements for home health services on 2/15/23, in accordance with section 12006 of the 21st Century CURES Act.

Other Medical Care or Remedial Care Provided by Other Practitioners:

- (6d) AIDE TO MEDICALLY FRAGILE CHILDREN—Aides to Medically Fragile Children are authorized to perform services within their scope of practice in accordance with State Law. Aides to Medically Fragile Children must be employed by an agency licensed in accordance with state law and supervised by a licensed Registered Nurse working within the scope of their practice, in accordance with state law.
- a. Aide to Medically Fragile Children services do not:
 - 1. Replace Private Duty Nursing (PDN) services.
 - 2. Supplant Home Health Services.

Amendment 2024-0011
Effective 10/01/2024
Supersedes New
Approved 10/15/2025

Home Health Nursing Visits(7a) Description

Home health nursing services provide care to recipients whose medical conditions, illness, or injury require the care to be delivered in the recipient's place of residence or other community setting. Home health nursing services are provided in accordance with Title 42, Code of Federal Regulations 440.70.

Who Can Receive

Home health nursing services are available to recipients age 21 years and older who require medically necessary home health visit services.

Who Can Provide

Home Health nursing services are provided by either:

- Registered nurses or licensed practical nurses who are employed by a home health agency licensed in accordance with state law.
- Registered nurses (RN) licensed and working within their scope of practice in accordance with state law.

Allowable Benefits

Florida Medicaid reimburses for the following when prior authorized by the Agency for Health Care Administration or its designee:

- Up to four intermittent home health visits, per day, for pregnant recipients
- Up to three intermittent home health visits, per day, for non-pregnant recipients

The three and four visit limits are a combined limit for both home health nursing and home health aide services.

Service limitations for Early and Periodic Screening and Diagnosis of Individuals Under 21 Years of Age and Treatment of Conditions (EPSDT) recipients are listed in the EPSDT section.

Exclusions

Florida Medicaid does not reimburse for the following:

- Services furnished by related providers, caretaker relatives, household members, or any person with custodial or legal responsibility for the recipient
- Services provided in any of the following locations:
 - Hospitals
 - Intermediate care facility for individuals with intellectual disabilities
 - Nursing facilities
 - Prescribed pediatric extended care centers
 - Residential facilities or assisted living facilities when the services duplicate those provided by the facility

Home Health Aide Visits(7b) Description

Home health aide services provide care to recipients whose medical conditions, illness, or injury require the care to be delivered in the recipient's place of residence or other community setting. Home health aide services are provided in accordance with Title 42, Code of Federal Regulations 440.70.

Who Can Receive

Home health aide services are available to recipients age 21 years and older who require medically necessary home health visit services.

Who Can Provide

Home Health Aide services are provided by:

- A home health agency licensed in accordance with state law.

Allowable Benefits

Florida Medicaid reimburses for the following when prior authorized by the Agency for Health Care Administration or its designee:

- Up to four intermittent home health visits, per day, for pregnant recipients
- Up to three intermittent home health visits, per day, for non-pregnant recipients

The three and four visit limits are a combined limit for both home health nursing and home health aide services.

Service limitations for Early and Periodic Screening and Diagnosis of Individuals Under 21 Years of Age and Treatment of Conditions (EPSDT) recipients are listed in the EPSDT section.

Exclusions

Florida Medicaid does not reimburse for the following:

- Services furnished by related providers, caretaker relatives, household members, or any person with custodial or legal responsibility for the recipient
- Services provided in any of the following locations:
 - Hospitals
 - Intermediate care facility for individuals with intellectual disabilities
 - Nursing facilities
 - Prescribed pediatric extended care centers
 - Residential facilities or assisted living facilities when the services duplicate those provided by the facility

Early and Periodic Screening and Diagnosis of Individuals Under 21 Years of Age and Treatment of Conditions Found

Home Health Nursing Visits

(7a) Description

Home health nursing services provide care to recipients whose medical conditions, illness, or injury require the care to be delivered in the recipient's place of residence or other community setting. Home health nursing services are provided in accordance with Title 42, Code of Federal Regulations 440.70.

Who Can Receive

Home health nursing services are available to recipients under the age of 21 years who require medically necessary home health visit services.

Who Can Provide

Home Health Nursing services are provided by either:

- Registered nurses or licensed practical nurses who are employed by a home health agency licensed in accordance with state law.
- A registered nurse (RN) licensed and working within the scope of their practice in accordance with state law.

Allowable Benefits

Florida Medicaid reimburses for up to four intermittent home health nursing visits, per day, when prior authorized by the Agency for Health Care Administration (Agency) or its designee.

The four-visit limit is a combined limit for both home health nursing and home health aide services.

In accordance with section 1905(a) of the Social Security Act, codified in Title 42 of the United States Code 1396d(a), services that exceed coverage may be approved, if determined medically necessary when prior authorized by the Agency or its designee.

Exclusions

Florida Medicaid does not reimburse for the following:

- Services furnished by related providers, caretaker relatives, household members, or any person with custodial or legal responsibility for the recipient
- Services provided in any of the following locations:
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Early and Periodic Screening and Diagnosis of Individuals Under 21 Years of Age and
Treatment of Conditions Found

Home Health Aide Visits

(7b) Description

Home health aide services provide care to recipients whose medical conditions, illness, or injury require the care to be delivered in the recipient's place of residence or other community setting. Home health aide services are provided in accordance with Title 42, Code of Federal Regulations 440.70.

Who Can Receive

Home health aide services are available to recipients under the age of 21 years who require medically necessary home health visit services.

Who Can Provide

Home Health Aide services are provided by:

- A home health agency licensed in accordance with state law.

Allowable Benefits

Florida Medicaid reimburses for up to four intermittent home health aide visits, per day, when prior authorized by the Agency for Health Care Administration (Agency) or its designee.

The four-visit limit is a combined limit for both home health nursing and home health aide services.

In accordance with section 1905(a) of the Social Security Act, codified in Title 42 of the United States Code 1396d(a), services that exceed coverage may be approved, if determined medically necessary when prior authorized by the Agency or its designee.

Exclusions

Florida Medicaid does not reimburse for the following:

- Services furnished by related providers, caretaker relatives, household members, or any person with custodial or legal responsibility for the recipient
- Services provided in any of the following locations:
 - Hospitals
 - Intermediate care facility for individuals with intellectual disabilities
 - Nursing facilities
 - Prescribed pediatric extended care centers
 - Residential facilities or assisted living facilities when the services duplicate those provided by the facility

(7) Home Health Services

Medically necessary home health services are covered when there is an order for home health services and the recipient is under the care of a physician, advanced practice registered nurse, or physician assistant.

For the initiation of home health services, a face-to-face encounter related to the primary reason the client requires home health services must occur not more than ninety (90) days before or thirty (30) days after the start of services. The face-to-face encounter must be conducted by a physician, nurse practitioner, clinical nurse specialist, certified nurse midwife or physician assistant. The face-to-face encounter must be related to the primary reason the beneficiary requires the home health service.

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Amendment: 2024-0011
Effective: 10/01/2024
Supersedes: New
Approved: 10/15/2025

Home Health Nursing Visits(7a) Description

Home health nursing services provide care to recipients whose medical conditions, illness, or injury require the care to be delivered in the recipient's place of residence or other community setting. Home health nursing services are provided in accordance with Title 42, Code of Federal Regulations 440.70.

Who Can Receive

Home health nursing services are available to recipients age 21 years and older who require medically necessary home health visit services.

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Home Health Nursing services are provided by either:

- Registered nurses or licensed practical nurses who are employed by a home health agency licensed in accordance with state law.
- A registered nurse (RN) licensed and working within the scope of their practice in accordance with state law.

Allowable Benefits

Florida Medicaid reimburses for the following when prior authorized by the Agency for Health Care Administration or its designee:

- Up to four intermittent home health visits, per day, for pregnant recipients age 21 years and older
- Up to three intermittent home health visits, per day, for non-pregnant recipients age 21 years and older

The three and four visit limits are a combined limit for both home health nursing and home health aide services.

Service limitations for Early and Periodic Screening and Diagnosis of Individuals Under 21 Years of Age and Treatment of Conditions (EPSDT) recipients are listed in the EPSDT section.

Exclusions

Florida Medicaid does not reimburse for the following:

- Services furnished by related providers, caretaker relatives, household members, or any person with custodial or legal responsibility for the recipient
- Services provided in any of the following locations:
 - Hospitals
 - Intermediate care facility for individuals with intellectual disabilities
 - Nursing facilities
 - Prescribed pediatric extended care centers
 - Residential facilities or assisted living facilities when the services duplicate those provided by the facility

Home Health Aide Visits(7b) Description

Home health aide services provide care to recipients whose medical conditions, illness, or injury require the care to be delivered in the recipient's place of residence or other community setting. Home health aide services are provided in accordance with Title 42, Code of Federal Regulations 440.70.

Who Can Receive

Home health aide services are available to recipients age 21 years and older who require medically necessary home health visit services.

Who Can Provide

Home Health Aide services are provided by:

- A home health agency licensed in accordance with state law.

Allowable Benefits

Florida Medicaid reimburses for the following when prior authorized by the Agency for Health Care Administration or its designee:

- Up to four intermittent home health visits, per day, for pregnant recipients age 21 years and older
- Up to three intermittent home health visits, per day, for non-pregnant recipients age 21 years and older

The three and four visit limits are a combined limit for both home health nursing and home health aide services.

Service limitations for Early and Periodic Screening and Diagnosis of Individuals Under 21 Years of Age and Treatment of Conditions (EPSDT) recipients are listed in the EPSDT section.

Exclusions

Florida Medicaid does not reimburse for the following:

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