

HB 1351

2026

A bill to be entitled
An act relating to presumptive Medicaid eligibility for pregnant women; amending s. 409.903, F.S.; authorizing certain entities meeting specified criteria to serve as qualified Medicaid providers for purposes of making presumptive Medicaid eligibility determinations for pregnant women; requiring the Department of Children and Families to ensure that such providers are adequately trained and monitored for compliance when serving in such roles; requiring the Agency for Health Care Administration to provide Medicaid coverage to pregnant women deemed presumptively eligible for the duration of a specified time period; providing that pregnant women deemed presumptively eligible are entitled to coverage of all medically necessary services under the Medicaid program during such eligibility period; requiring that all prior authorizations granted before or during such period remain in effect for the duration of such period; requiring the agency, within a specified timeframe, to seek federal approval to extend the allowable period of presumptive Medicaid eligibility coverage for pregnant women; requiring the agency and the department to initiate certain rulemaking within a specified timeframe; providing an effective date.

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27 Be It Enacted by the Legislature of the State of Florida:
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29 **Section 1. Subsection (5) of section 409.903, Florida
30 Statutes, is amended to read:**

31 409.903 Mandatory payments for eligible persons.—The
32 agency shall make payments for medical assistance and related
33 services on behalf of the following persons who the department,
34 or the Social Security Administration by contract with the
35 Department of Children and Families, determines to be eligible,
36 subject to the income, assets, and categorical eligibility tests
37 set forth in federal and state law. Payment on behalf of these
38 Medicaid eligible persons is subject to the availability of
39 moneys and any limitations established by the General
40 Appropriations Act or chapter 216.

41 (5) A pregnant woman for the duration of her pregnancy and
42 for the postpartum period consisting of the 12-month period
43 beginning on the last day of her pregnancy, or a child under age
44 1, if either is living in a family that has an income that is at
45 or below 185 percent of the most current federal poverty level.
46 Such a person is not subject to an assets test. Further, a
47 pregnant woman who applies for eligibility for the Medicaid
48 program through a qualified Medicaid provider must be offered
49 the opportunity, subject to federal rules, to be made
50 presumptively eligible for the Medicaid program.

51 (a) Qualified Medicaid providers that may conduct
52 presumptive eligibility determinations for Medicaid for pregnant
53 women include, but are not limited to, hospitals participating
54 in the Medicaid program; federally qualified health centers;
55 birth centers; nonprofit maternal and child health
56 organizations, such as healthy start coalitions; clinics
57 operating under the Special Supplemental Nutrition Program for
58 Women, Infants, and Children; and local housing authorities,
59 provided such entities have met the applicable training and
60 certification standards established by the department for such
61 purpose. The department shall ensure such providers are
62 adequately trained and monitored for compliance with federal and
63 state requirements relating to presumptive eligibility
64 determinations.

65 (b) For pregnant women deemed presumptively eligible under
66 this subsection, the agency shall provide such coverage under
67 the Medicaid program for the maximum period allowable under
68 federal law or until a full Medicaid eligibility determination
69 is made, whichever occurs earlier.

70 (c) Pregnant women deemed presumptively eligible under
71 this subsection are entitled to coverage of all medically
72 necessary services under the Medicaid program, including, but
73 not limited to, services provided by specialists and
74 subspecialists needed to comanage high-risk pregnancies,
75 including for issues outside the scope of general obstetrics.

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76 All prior authorization approvals granted before or during the
77 presumptive eligibility period remain valid for the duration of
78 such period to ensure continuity of care and to reduce the risk
79 of adverse maternal or infant health outcomes.

80 **Section 2.** Within 60 days after this act becomes a law,
81 the Agency for Health Care Administration shall seek federal
82 approval to extend the allowable period of presumptive Medicaid
83 eligibility for pregnant women to 180 days under s. 409.903,
84 Florida Statutes, and the agency and the Department of Children
85 and Families, as applicable, shall initiate any necessary
86 rulemaking to implement the amendments made by this act to s.
87 409.903, Florida Statutes.

88 **Section 3.** This act shall take effect July 1, 2026.