

By Senator Davis

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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.

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

Section 1. Subsection (5) of section 409.903, Florida

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Statutes, is amended to read:

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

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

(a) Qualified Medicaid providers that may conduct presumptive eligibility determinations for Medicaid for pregnant women include, but are not limited to, hospitals participating in the Medicaid program; federally qualified health centers; birth centers; nonprofit maternal and child health organizations, such as healthy start coalitions; clinics operating under the Special Supplemental Nutrition Program for Women, Infants, and Children; and local housing authorities,

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provided such entities have met the applicable training and certification standards established by the department for such purpose. The department shall ensure such providers are adequately trained and monitored for compliance with federal and state requirements relating to presumptive eligibility determinations.

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

(c) Pregnant women deemed presumptively eligible under this subsection are entitled to coverage of all medically necessary services under the Medicaid program, including, but not limited to, services provided by specialists and subspecialists needed to comanage high-risk pregnancies, including for issues outside the scope of general obstetrics. All prior authorization approvals granted before or during the presumptive eligibility period remain valid for the duration of such period to ensure continuity of care and to reduce the risk of adverse maternal or infant health outcomes.

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

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