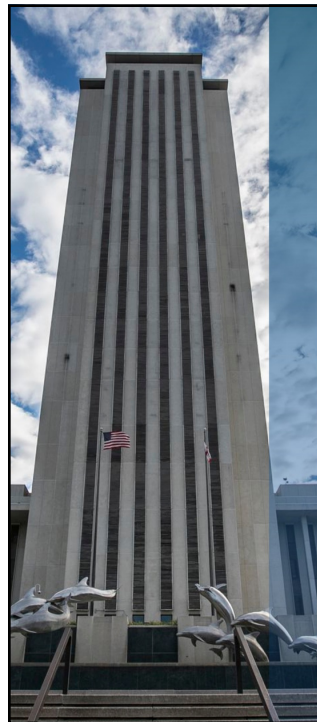
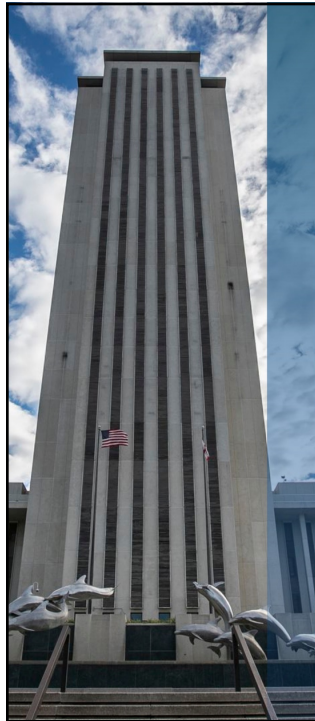




Turning the 2026 Record Into a Sharper 2027 Agenda

- What Tallahassee did — and did not do — in 2026
- The bills and budget decisions that matter to home care
- What the outcomes mean for providers and patients
- Where HCAF should focus in 2027





A Busy Session Produced a Narrow Set of Enacted Measures

- 1,691 general bills filed
 - 192 passed both chambers
 - 11.4% passage rate
- 331 health care bills filed
 - 34 passed both chambers
 - 10.2% passage rate
- 228 measures approved by Gov. DeSantis
 - 8 vetoed by July 21
 - 1 concurrent resolution (property tax amendment)



Chamber Alignment Determined the 2026 Outcome

- The regular session ended March 13 without a budget, requiring an extended session
- House-Senate disagreements and intraparty divisions narrowed the number of viable policy vehicles
- Many health bills never received a first hearing; several House-passed bills died without Senate action
- A late-session surge moved bills, but final concurrence became a bottleneck





Four Issues Defined the Session for Home Care

- **Consumer clarity and oversight:** Who is providing care, under what license, and with what disclosure?
- **Workforce capacity and scope:** Delegation, licensure portability, training, and hiring compliance
- **Payment and administrative burden:** PDN rates, parity, prior authorization, denials, and claims payment
- **Access for high-need populations:** Medically fragile children, working people with disabilities, seniors, and memory-care residents



Access & Workforce Advanced — But Reimbursement Did Not

- **Enacted legislation:**
 - **HB 915:** Medicaid eligibility for working individuals with disabilities
 - **HB 1121:** Aging and disability services coordination and oversight
 - **SB 1246:** Nursing education capacity and employer partnerships
 - **SB 340:** Human trafficking education for initial nurse licensure
 - **SB 1404:** Memory-care training and regulatory updates
 - **SB 578:** Statewide Alzheimer's awareness and outreach
- **Bottom Line:** 2026 strengthened adjacent infrastructure; it did not resolve the home care payment and workforce gaps that most directly constrain access





HB 915: Expanding Medicaid Access for Working Floridians With Disabilities

- Creates/expands Medicaid eligibility for working individuals with disabilities under specified income and premium rules
- Signed May 21, 2026; effective July 1, 2026
- **Provider Relevance:** May help people with disabilities maintain essential coverage while participating in the workforce
- **Access Implication:** Continuity depends on clear eligibility administration and adequate provider networks
- **Bottom Line:** Coverage eligibility is meaningful only when beneficiaries can find and retain in-home care providers



HB 1121: Updating Florida's Aging and Disability Services System

- Revises aging and disability services administration, accountability, and program coordination
- Signed May 11, 2026; effective July 1, 2026
- **Provider Relevance:** Affects the public infrastructure serving older adults and people with disabilities who rely on community-based supports
- **Bottom Line:** HCAF will monitor whether system-level changes translate into faster, more reliable access at home
 - Implementation, referral pathways, reporting expectations, and any effect on wait lists or service transitions



SB 1246: Investing in Florida's Nursing Pipeline

- Expands the LINE fund's dollar-for-dollar matching program
- Allows health care partners to contribute:
 - Funding
 - Employees' time as instructors or clinical preceptors
 - Training or clinical space
 - Educational and simulation equipment
- Supports scholarships, internships, faculty recruitment, simulation centers, enrollment growth, and licensure success
- Prioritizes proposals containing monetary contributions
- Allows awards to continue for up to 3 academic years
- Signed May 22, 2026; effective July 1, 2026
- **Bottom Line:** Home care employers should seek a visible role in academic partnerships so new capacity includes community-based nursing, not only institutional settings



SB 340: Adding Human Trafficking Education to Initial Nurse Licensure

- Requires a two-hour human trafficking course for new RN and LPN applicants
- Aligns initial licensure with existing continuing-education content
- Signed May 21, 2026; effective July 1, 2026
- **Provider Action:** Update recruiting and credential-verification checklists; incorporate the requirement into onboarding guidance
- **Bottom Line:** A modest licensure change can still create avoidable onboarding friction if agencies and applicants are not prepared



SB 1404: Strengthening Memory-Care Training and Standards

- Requires an ALF to obtain a separate memory-care services license if it serves memory-care residents or advertises specialized memory or dementia care
- Directs AHCA to establish standards by June 1, 2027, covering staffing, training, admissions, safety, physical space, resident contracts, services, and advertising
- Requires resident contracts to identify the specific memory-care services being provided
- **Provider Relevance:** Agencies serving residents should monitor the forthcoming AHCA rules for changes affecting coordination, contracts, and documentation
- **Bottom Line:** Florida is making memory care a separately licensed ALF service with defined standards — not merely a marketing claim



SB 578: Building a Statewide Alzheimer's Awareness Initiative

- Directs the Department of Elder Affairs to contract for statewide information, digital resources, and mobile outreach
- Requires annual evaluation by the Alzheimer's Disease Advisory Committee
- Signed May 21, 2026; effective July 1, 2026
- **Provider Relevance:** Providers can help connect families to accurate information and identify gaps between awareness and service access
- **Bottom Line:** Awareness should become a doorway to care — not another referral loop families cannot navigate



SB 1068/HB 1013: Consumer Safety & Transparency

- Requires nurse registries and homemaker companion service providers to provide written disclosures at intake and annually
- Restricts misleading terms in business names, advertising, websites, and promotional materials
- Adds inspection/oversight provisions and revises low-risk provider treatment
- HB 1013 passed the House 115-0; SB 1068 died in Senate Health Policy without a hearing
- **Bottom Line:** The policy case has bipartisan House validation; the 2027 challenge is Senate ownership and a stronger record of consumer confusion or harm



SB 902/HB 733: Department of Health Legislative Package

- Would have authorized nurses to delegate Schedule IV seizure-rescue medication administration to trained Family Home HealthAides serving medically fragile children
- The broader Department of Health package accumulated provisions from multiple sectors
- Both chambers acted, but Senate amendments were not concurred in by the House before adjournment
- **Result:** The delegation change did not become law
- **Bottom Line:** A narrower 2027 vehicle may improve the odds of passing a time-sensitive, child-safety workforce solution



SB 580/HB 555: Local Caregiver Licensing

- Would authorize local governments to license home caregivers
 - Palm Beach County Caregiver ID Badge ordinance
- HCAF supported an exemption for employees of licensed home health agencies
- The bills were not heard in committee
- **Provider Risk:** Overlapping local requirements could create a regulatory patchwork, fragment hiring, compliance, and service delivery across counties or cities
- **Bottom Line:** HCAF steadfastly opposes local caregiver licensing for in-home caregivers employed by a licensed home health agency



SB 788/HB 1057: ALF Oversight, Care Coordination, and Provider Access

- Proposed expanded agency data access, greater licensing transparency, updated adverse-incident reporting requirements, and creation of an Assisted Living Task Force
- Would have required third-party service providers, including home health agencies, to submit timely written care notes
- HCAF supported an amendment prohibiting senior living communities from conditioning a licensed home health agency's access to residents on the payment of fees to third-party credentialing or verification vendors
- HB 1057 passed the House; SB 788 did not receive a Senate committee hearing
- **Bottom Line:** If similar language returns, agencies may need to modify workflows, EHR systems, and staff training



SB 74/HB 13: Social Work Licensure Compact

- Would have created the Social Work Licensure Interstate Compact, supporting multistate practice, including telehealth
 - Florida already belongs to medical, nursing, speech therapy, and counseling compacts
- HB 13 passed the House unanimously (116-0); companion SB 74 did not receive a Senate committee hearing
- **Provider Relevance:** Social workers play important roles in assessment, discharge planning, caregiver support, and complex care coordination
- **Access Implication:** License portability could help address specialized and regional workforce shortages
- **Bottom Line:** The proposal will likely return in 2027, with HCAF's support as part of a broader strategy to strengthen the home- and community-based care workforce



SB 1278/HB 197: Universal E-Verify Would Expand Hiring Compliance

- Would extend E-Verify requirements from employers with 25 or more employees to all private employers
- The legislation would affect home health agencies but not nurse registries referring independent contractors
- HB 197 passed the House but stalled in the Senate; competing Republican and Democratic proposals increased the political sensitivity
- **Provider Impact:** Small agencies would face new onboarding and compliance burdens while registries would retain a workforce-model advantage



SB 1278/HB 197: Universal E-Verify Would Expand Hiring Compliance

- Would require Medicaid reimbursement to licensed providers at or above rates paid to family caregivers for comparable non-nursing services, with included annual rate adjustments
- Died in the first committee without a hearing
- **Access Implication:** Rate misalignment can shift capacity away from licensed providers and weaken a sustainable professional workforce
- **Bottom Line:** Necessary, but providers need comparative rate, vacancy, turnover, and unserved-hours data to make the parity case concrete



SB 38/HB 219: Payment Parity for Non-Nursing Services

- Would require Medicaid reimbursement to licensed providers at or above rates paid to family caregivers for comparable non-nursing services, with included annual rate adjustments
- Died in the first committee without a hearing
- **Access Implication:** Rate misalignment can shift capacity away from licensed providers and weaken a sustainable professional workforce
- **Bottom Line:** Necessary, but providers need comparative rate, vacancy, turnover, and unserved-hours data to make the parity case concrete





SB 38/HB 219: Payment Parity for Non-Nursing Services

- Defines pediatric continuing care integrated communities and prevailing hourly rates
- Would require Medicaid managed care plans to reimburse licensed home health agencies for PDN in specified community residential settings at the required rate
- Would require periodic rate negotiations and written certification involving affiliated businesses
- Both bills died in their first committees without hearings
- **Bottom Line:** The core question for 2027 is how to tie rate methodology to documented staffing costs, case acceptance, and missed-care risk



SB 1758/HB 1453/HB 693: Medicaid Work and Oversight Proposals

- Proposed Medicaid work or community engagement requirements for certain adult beneficiaries
- Expanded AHCA authority related to program integrity, retrospective claims reviews, audits, and oversight
- Included additional Medicaid administrative and eligibility provisions intended to strengthen accountability
- **Provider Impact:** Increased risk of interruptions in Medicaid eligibility and continuity of care; greater documentation, verification, and audit exposure; potential payment delays or recoupments resulting from expanded claims oversight
- **Bottom Line:** Medicaid program integrity is key, yet reforms should preserve continuous access to medically necessary home-based care and avoid unnecessary administrative burdens on providers





SB 202/HB 527: Human Review of Claim Denials

- Would require qualified human review rather than relying on automated systems alone for claim denials
- HB 527 passed the House unanimously and died in the Senate without final action
- **Provider Relevance:** Denial quality affects cash flow, staff time, appeals, and willingness to accept complex cases 
- **Patient Implication:** Opaque denials can delay or interrupt authorized care
- **Bottom Line:** A renewed proposal should define meaningful clinical review, transparent reasons, and accountable appeal timelines



SB 1130/HB 1015: Claims-Payment Reform

- Would prohibit insurers from lowering a provider's billing code — and payment — without justification
- Would strengthen prior-authorization requirements
- Would require faster claims payment
- Would give providers stronger rights to challenge improper payment practices
- Died without receiving a committee hearing 
- **Provider Relevance:** Delayed or reduced payments make it harder for home care providers to retain staff and accept new patients 
- **Bottom Line:** The bill sought to make insurer payment decisions faster, fairer, and easier for providers to challenge



SB 1130 / HB 1015: Claims-Payment Reform

- Would create a process for disputes involving denied prior-authorization requests
- Would prohibit contracts from requiring credit-card payment as the only method and protect access to electronic funds transfer
- Died in committee
- **Provider Relevance:** Fees, payment method restrictions, and unresolved authorization disputes erode already-thin margins
- **Bottom Line:** Provider examples should quantify dollars, days, and staff time lost to disputes and payment friction



SB 1438 / HB 1229: A New Model for Medically Complex Children

- Would establish a licensure framework for residential homes serving medically complex children
- HB 1229 passed the House; the Senate bill did not receive a hearing
- Home care relevance: new residential models can affect referral patterns, PDN delivery, family choice, and the boundary between home and facility care
- **Access Question:** How to preserve the least restrictive, clinically appropriate setting with adequate family protections
- **Bottom Line:** Guardrails needed to support innovation without displacing safe, family-centered care at home





FY 2026-2027 Budget: Large, But the Home Care Access Signal is Mixed

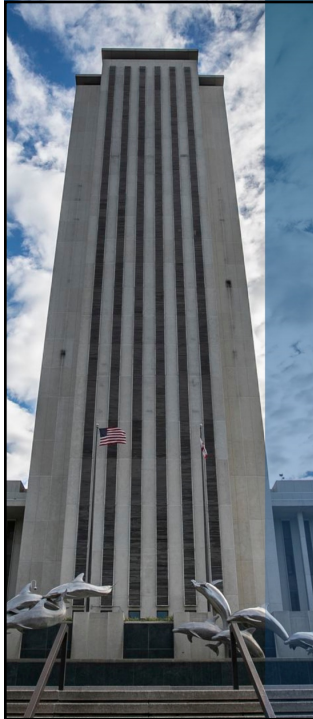
- Legislature's extended-session General Appropriations Act: \$114.5 billion
- Governor's June 29 signed spending plan: \$117.6 billion after nearly \$810 million in line-item vetoes; the difference reflects the state's broader accounting/presentation of the plan
- Pre-veto HHS conference summary: \$49.2 billion across six agencies, including \$38.0 billion for AHCA
- **Bottom Line:** Headline health spending does not by itself answer whether home care rates cover the cost of delivering reliable care



FY 2026-2027 Some Community-Based Funding Preserved

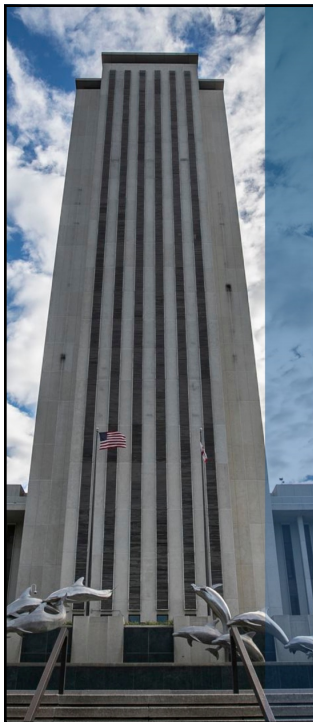
- \$7.5 million for Community Care for the Elderly and Home Care for the Elderly
- \$3 million increase for the Alzheimer's Disease Initiative
- \$38.4 million for PACE expansion
- \$22.8 million for an iBudget provider rate increase
- \$10 million to move eligible individuals from pre-enrollment into waiver service
- **Private Duty Nursing:** The final budget did not include AHCA's requested \$7.1 million PDN funding increase
- **Bottom Line:** Florida invested in community-based programs, but the reimbursement needed to strengthen the PDN workforce and patient access remains unresolved





2027: Legislative Runway is Short and Front-Laded

- **Now-Fall 2026:** Define the problem, evidence, coalition, and draft solution
- **Late 2026-Early 2027:** Delegation meetings, sponsor recruitment, stakeholder negotiations, and bill drafting
- **March 2, 2027:** Regular session begins
- **April 20, 2027:** 50th day and last day for regularly scheduled Senate committee meetings
- **April 30, 2027:** 60th day and scheduled final day of session
- **May-June 2027:** Governor review, veto decisions, and implementation planning



2027 Agenda: Modernize, Reform, and Have the Data

- 2027 priorities should:
 - Directly improved patient access, safety, or continuity at home, and have a clear statutory or budget remedy
 - Be supported with Florida-specific provider and patient evidence
 - Be implemented without disproportionate administrative burden.
- **Bottom Line:** The goal today is not to finalize the agenda; it is to identify the strongest problem statements for months of development

Discussion

What should your Association carry into the 2027 Session?



Thank You!

Denise Bellville, RN, BS
Executive Director
dbellville@homecarefla.org

Kyle Simon
Senior Director of Policy,
Advocacy & Communications
ksimon@homecarefla.org

