




How Are Florida's Different Home Care Providers Regulated?




 TYPE OF PROVIDER  TYPE OF REGULATION 	Home Health Agency (HHA)		Nurse Registry	Homemaker and Companion Organization	Hiring an Independent Caregiver
	State Licensed Only	State Licensed and Medicare or Medicaid Certified			
1. What services can be legally provided?	Homemaker ¹ Companion ² Home health aide Certified nursing assistant (CNA) <i>(Note: Some home health agencies only provide the above services)</i> Nursing (LPN, RN) Therapy: Physical, Speech, Occupational Home Medical Equipment Social Work Dietetics & Nutrition <i>(Therapy, social work, dietetics & nutrition are generally not provided, except for those getting certified for Medicare or Medicaid.)</i>	Homemaker Companion Home health aide Certified nursing assistant (CNA) Nursing (LPN, RN) *Therapy: Physical, Speech, Occupational *Home Medical Equipment *Social Work *Dietetics & Nutrition <i>(Note: Certified agencies are required to provide skilled services, at least nursing, most also provide therapy).</i>	Homemaker Companion Home health aide Certified nursing Assistant (CNA) Nursing (LPN, RN) <i>(Note: Some Nurse Registries do not provide nurses)</i>	Homemaker Companion	A licensed health care professional may provide services within the scope of his or her professional license. A home health aide or certified nursing assistant may provide hands-on personal care. Homemaker Companion
2. Can this provider offer hands-on personal care to patients?	Yes , by home health aides and certified nursing assistants.	Yes , by home health aides and certified nursing assistants.	Yes , by home health aides and certified nursing assistants.	No . Homemakers and companions cannot provide hands-on personal care.	Yes , but only by home health aides and certified nursing assistants. (An individual is not entitled to perform home health services without the required professional license or certification.)

¹ A homemaker performs household chores such as housekeeping, meal planning and preparation, and provides shopping assistance and routine household activities.




² A companion spends time with or cares for another individual but cannot provide any hands-on personal care, may accompany such individual on trips and outings, and may prepare and serve meals to the individual.

Approximately 70% of the home health agencies provide these additional services and meet additional federal requirements for Medicare certification.




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3. Is background screening of personnel providing in-home service required?	Yes	Yes	Yes	Yes	No
4. Is background screening of the administrator and chief financial officer required?	Yes	Yes	Yes	Yes	No
5. Are there minimum standards for patient services?	Yes	Yes	Yes	No	No
6. Are there training or competency tests required of non-licensed personnel?	Yes	Yes	Yes	No	No
7. Are there minimum requirements for the	Yes	Yes	Yes	No	Not applicable




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8. Is insurance coverage required?	Yes. Liability and malpractice insurance is required up to \$250,000 per claim.	Yes. Liability and malpractice insurance is required up to \$250,000 per claim.	No. Nurse registries only have independent contractors.	No	No
9. How are services obtained?	The patient contracts with the home health agency for services. The home health agency provides services through its own employees or contracted personnel.	The patient contracts with the home health agency for services. The home health agency provides services through its own employees or contracted personnel.	The patient contacts the nurse registry for the referral of an independent contractor that will provide services.	The client contracts with homemaker / companion organization for services. The homemaker / companion organization provides services through employees or contracted personnel.	The patient or family contacts and makes individual arrangements with the worker.
10. What are the primary funding sources?	Private insurance and personal funds (limited Medicaid Waivers available)	Medicare, Medicaid, private insurance and personal funds (limited Medicaid waivers available)	Private insurance and personal funds (limited Medicaid waivers available)	Private insurance and personal funds (limited Medicaid waivers available)	Private insurance and personal funds
11. Is nursing supervision required?	No. Supervisory visits are made only with the patient's approval and payment.	Yes. Supervisory visits by an RN are required. The RN must visit at least every two weeks if the patient is receiving skilled care. If the care is limited to home health aide or certified nursing	No, but if a home health aide or certified nursing assistant is referred, the nurse registry must advise that an RN is available to	No	No




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		assistant, then the supervisory visit must be at least every 60 days.	make visits to the patient's home for an additional cost.		
12. Is a director of nursing or a supervising nurse required?	Yes, if professional nursing services are being provided. No, if the agency only provides non-skilled services (home health aides, certified nursing assistants, homemakers, companions) or just therapy (physical, occupational or, speech).	Yes	No	No	No
13. Are there general quality assurance requirements?	Yes, but only for agencies that are required to have a director of nursing.	Yes	No	No	No
14. Is a nurse on-call during hours of patient service?	Yes. If nursing services are provided, a director of nursing and a 24-hour on-call nurse are required.	Yes. If nursing services are provided, a director of nursing and a 24-hour on-call nurse are required.	No	No	No
15. Are there unannounced on-site inspections?	Yes, at least once every three years.	Yes, at least once every three years.	Yes, at least once every two years.	No	No




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16. Are providers required to notify patients/client how to report complaints, including dissatisfaction with a service provider?	Yes. On or before the first day of services, the agency must inform the client and his/her immediate family or representative of the right to report complaints to AHCA at 1-888-419-3456, how to report abuse, neglect or exploitation at 1-800-962-2873 and how to report Medicaid fraud at 1-888-966-7226.	Yes. The requirements are the same as for a "state licensed only" home health agency. (View these at left.)	Yes. The requirements are the same as for a "state licensed only" home health agency. (View these at left.)	Yes. The requirements are the same as for a "state licensed only" home health agency. (View these at left.)	No
17. Are there state investigations of complaints?	Yes	Yes	Yes	Yes, but there are very few specific requirements.	Yes, but this would likely be limited to the unauthorized practice of a health care profession.
18. Is a health statement for each person providing in-home services required?	No	No	Yes	No	No
19. Is an office required to be open and staffed a minimum number of hours per day?	Yes, eight hours a day, Monday through Friday, except for legal and religious holidays.	Yes, eight hours a day, Monday through Friday, except for legal and religious holidays.	Yes, eight hours a day, Monday through Friday, except for legal and religious holidays.	No	No

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20. Are penalties enforced for non-compliance with laws and regulations?	Yes. Fines can be imposed by classes based on impact to patients. There can also be a moratorium on admissions and the revocation or denial of the license.	Yes. Fines can be imposed by classes based on impact to patients. There can also be a moratorium on admissions and the revocation or denial of the license.	Yes. Fines can be imposed by classes based on impact to patients. There can also be a moratorium on admissions and the revocation or denial of the license.	Yes. Fines can be imposed for unlicensed activity. A moratorium on admissions or a revocation or denial of registration is possible.	Not applicable
21. Is staff training required on Alzheimer's disease and other disorders related to dementia?	Yes	Yes	No	No	No
22. Are there required agreements with the patient on the services that will be delivered and the payment amount?	Yes	Yes. The patient has the right to participate in the planning of his/her care, to receive a copy of the plan of care and to be informed prior to starting services if Medicare or Medicaid will pay for the services.	Yes	No	No
23. Is a licensing or registration fee required?	Yes. A state license is required with a fee of \$1,705 for two years.	Yes. A state license is required with a fee of \$1,705 for two years.	Yes. A state license is required with a fee of \$2,000 for two years.	Yes. A state registration is required with a fee of \$50 for two years.	No

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24. Are emergency management provisions required for events like hurricanes?	Yes	Yes	Yes	No	No