59G-1.020 Definition of County of Residence.
For the purpose of county financial participation in the Medicaid Program, the county of residence for inpatient hospital care and nursing home care is determined by the recipient’s address information contained in the federally approved Medicaid eligibility system.

(1) For hospital claims, whether through fee-for-service or managed care, the address is based on the current living or residential address, with the exception of when the resident lives in a nursing home. When a recipient lives in a nursing home, the address is based on the prior address.

(2) For nursing home claims, whether through fee-for-service or managed care, the address is based on the prior address, except when a recipient is admitted to a nursing home directly from a place of residence outside of the State of Florida. If the recipient is admitted to a nursing home from another state, the nursing home address will be used for county billing purposes.

(3) Since address information for children in custody of the Department of Children and Families is unavailable, counties are not responsible for these payments.

Rulemaking Authority 409.919 FS. Law Implemented 409.915 FS. History–New 1-1-77, Formerly 10C-7.31, 10C-7.031, Amended 10-23-12.