

**April 2025**

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***Attention Home Health Care Providers***  
**Florida Blue Medicare Billing Guidelines to Be Updated**

To maintain alignment with the Centers for Medicare and Medicaid Services (CMS), we are updating our *Provider Billing Guidelines*, specifically for Traditional Medicare and Non-Participating Providers in Florida Blue Medicare Advantage Under Home Health Prospective Payment System (HH PPS) and Notice of Admission (NOA). The change is **effective May 1, 2025** and impacts primarily Florida Blue Medicare and Home Health Agencies contracted directly with Florida Blue Medicare.

With this update, Florida Blue will no longer accept the “Request for Anticipated Payment” (RAP) process. Instead, Florida Blue will implement use of the CMS one-time NOA process.

**Note:** For home health agencies associated with **Care Centrix**, no changes are outlined at this time.

For more about this revision and to avoid billing issues, refer after May 1, 2025 to our latest Billing Guidelines for Home Health Prospective Payment System. This information will be found in our [\*\*Provider Manual’s Billing Guidelines’ Home Health Agencies\*\*](#) section of the **Claim Submission/Billing Guidelines** PDF.