



Executive Summary: The Court ruled that notices issued by the Florida Department of Children and Families (DCF) violate the due process rights of individuals whose Family-Related Medicaid coverage is terminated based on DCF's determination that the enrollee's income exceeds the eligibility limits. The Court ordered DCF to:

1. Immediately cease terminating Medicaid coverage for these individuals until it provides constitutionally adequate notice containing specified information; and
2. Within 60 days, provide a constitutionally adequate termination notice to all class members whose Medicaid coverage was terminated between March 31, 2023, and January 6, 2026, and has not been reinstated. The notice must contain specified information and provide an opportunity to appeal while maintaining Medicaid coverage during the appeal process.

Plaintiffs: Chianne D., C.D., A.V., Kimber Taylor, and K.H., on behalf of themselves and individuals similarly situated

Defendants: Shevaun Harris, Secretary for the Florida Agency for Health Care Administration (AHCA) (initially Jason Weida) and Taylor Hatch, Secretary for the Department of Children and Families (DCF) (initially Shevaun Harris)

Claims: Plaintiffs alleged that the notices issued by DCF for the purpose of notifying Medicaid enrollees that their coverage is being terminated fail to provide timely, effective notice of the basis for the agency's decision and a meaningful opportunity for a fair hearing. Plaintiffs asserted that the notices must specify the income relied upon by DCF, the applicable income standard, and the Medicaid category in which the individual was evaluated, as well as any other Medicaid category for which they may be eligible. Plaintiffs initially asserted two counts: Count I - Violation of Constitutional Due Process, and Count II - Violation of the Medicaid Act. Plaintiffs subsequently dismissed Count II, and the case was decided solely on the basis of Constitutional Due Process.

Defenses: Defendants alleged that the notices satisfy the baseline requirements of due process and are reasonably calculated, under all the circumstances, to apprise Medicaid recipients of the termination of their coverage and an opportunity to object. Defendants asserted that due process does not require termination notices to recite individualized facts or explain applicable laws, because the public is presumed to know them and recipients can obtain additional information from the DCF call center or local office.

Key Dates and Filings:

August 22, 2023 - [Verified Class Action Complaint for Declaratory and Injunctive Relief](#)

January 18, 2024 - [First Amended Complaint](#)

April 23, 2024 - [Order Granting Motion for Class Certification](#)

July 11, 29, 30, 31, and August 1-2, 2024 - Bench trial

July 28, 2025 - [Second Amended Complaint](#)

January 6, 2026 - [Findings of Fact & Conclusions of Law](#)

February 5, 2026 - Notice of Appeal by Defendants to Eleventh Circuit



Chianne D. v. Harris
Key Findings

As of March 2024, the class consisted of 497,918 members. (p. 123 ¶ 352)

DCF's notices are "vague, confusing, and often inaccurate and misleading," and do not provide reasonable notice of termination decisions. (p. 206)

The State has had notice of concerns regarding the vague and confusing nature of its notices since at least 2018. (p. 252 n.88)

Even experienced DCF witnesses struggled to interpret the meaning of provisions of notices reviewed at trial. (p. 215)

The notices are "unequivocally not an objectively reasonable form of notice." (p. 218)

The state cannot satisfy due process by placing the burden on individuals to affirmatively seek out the reasons for their termination. (p. 231)

The evidence showed that "most calls to the call center are blocked before an individual can even be placed in a queue," and those "who succeed in speaking to an agent may or may not receive accurate or helpful information." (p. 233-34) (emphasis in original)

The Court noted that "egregious errors" were made by DCF agents in calls with certain witnesses, and given the limited training of call center agents, the antiquated computer system being used, and the complexity of Medicaid eligibility requirements, "mistakes by call center agents . . . are very likely common occurrences." (p. 234 n.81)

The Court had "no difficulty" finding that Plaintiffs have established ongoing irreparable harm warranting injunctive relief. (p. 243)

The confusion, frustration, stress, anxiety and lost time experienced by Plaintiffs and witnesses, as well as the lack of ability to plan for the loss of health care coverage, all constitute irreparable harm. (pp. 245-46)

The Court carefully considered the state's arguments regarding the costs of imposing injunctive relief, and concluded "that they do not outweigh the irreparable harm caused to Class Members by the loss of Medicaid benefits without constitutionally adequate notice." (p. 249)

The court expressly "reject[ed] any suggestion that the State must be allowed to continue violating the constitutional rights of its citizens because compliance is too expensive." (p. 250)

The question of whether the notices are constitutionally adequate is not a close call. (p. 268)

"Injunctive relief is entirely warranted and necessary in this case." (p. 269)