

## Protecting and Improving the Health of Iowans

Kim Reynolds, Governor

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## IPN Sliding Fee Scale Update:

During an IPN meeting held earlier this year, public comment was provided to the Iowa Department of Public Health (IDPH) regarding implementation of a more efficient manner in collecting co-pays; specifically moving from a sliding fee system, to an additional optional flat fee service model that utilizes a minimum percentage fee, allowing for provider choice of fee models

IDPH would like to announce that approval from SAMHSA has been obtained to modify the state's Substance Abuse Block Grant FFY 2020-2021 Application for the use of the block grant through enhancing the process of collecting co-pays for SABG-funded clients. This means that Contractors can now choose between one of two models for collecting client assessed co-pays:

- Utilize the established sliding-fee scale model that determines assessed client reimbursement based on income and family size
- Utilize the new flat fee-for-service model that uses a single, minimum percentage fee client reimbursement, regardless of income and family size

To be clear, this is an optional approach to collecting co-pays for clients that meet the established financial eligibility guidelines of being at or below 200% of the Federal Poverty Level guidelines. The belief is this change of charging each client a minimum flat-fee or amount (equal to the lowest amount currently assessed) could result in a significant reduction in administrative time spent establishing and tracking payment plans, sending out billing notices, and attempting to obtain reimbursement for services. IDPH will require interested IPN funded providers to submit updated policies and procedures for approval prior to utilizing this option.

IDPH believes this approach will potentially reduce the number of clients that choose not to pursue treatment due to out-of-pocket costs, reduce clients leaving treatment services early, and will decrease barriers to access in critical SUD treatment and recovery services.

IDPH has assured SAMHSA that this proposed change will:

- Not have an negative impact on the States' required MOE's
- Not impact SABG-funded contractors contracted amount of funding
- Be available to all IPN providers who receive state and federal funding
- Be consistent with State Policy and SABG policy
- Not be in conflict or negatively impact payor of last resort regulations

If you have any questions or would like to take part in this opportunity, please contact Kevin Gabbert, IPN Treatment Lead, at kevin.gabbert@idph.iowa.gov.