

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

STATE: IOWA

1.4 State Medical Care Advisory Committee (42 CFR 431.12(b))

There is an advisory committee to the Medicaid agency director on health and medical care services established in accordance with and meeting all the requirements of 42 CFR 431.12.

- The State enrolls recipients in MCO, PIHP, PAHP, and/or PCCM programs. The state assures that it complies with 42 CFR 438.104(c) to consult with the Medical Care Advisory Committee in the review of marketing materials.

Tribal Consultation Requirements

Section 1902(a)(73) of the Social Security Act (the Act) requires a State in which one or more Indian Health Programs or Urban Indian Organizations furnish health care services to establish a process for the State Medicaid agency to seek advice on a regular, ongoing basis from designees of Indian health programs, whether operated by the Indian Health Service (IHS), Tribes or Tribal organizations under the Indian Self-Determination and Education Assistance Act (ISDEAA), or Urban Indian Organizations under the Indian Health Care Improvement Act (IHCA). Section 2107(e)(I) of the Act was also amended to apply these requirements to the Children’s Health Insurance Program (CHIP). Consultation is required concerning Medicaid and CHIP matters having a direct impact on Indian health programs and Urban Indian organizations.

Please describe the process the State uses to seek advice on a regular, ongoing basis from federally-recognized tribes, Indian Health Programs and Urban Indian Organizations on matters related to Medicaid and CHIP programs and for consultation on State Plan Amendments, waiver proposals, waiver extensions, waiver amendments, waiver renewals and proposals for demonstration projects prior to submission to CMS. Please include information about the frequency, inclusiveness and process for seeking such advice.

- The State of Iowa sends all federally-recognized tribes, Indian Health Programs and Urban Indian Organizations within the CMS Region 7 an electronic notification for all Medicaid and CHIP programs regarding state plan amendments, waiver proposals, waiver extensions, waiver amendments, waiver renewals and proposals for demonstration projects prior to submission to CMS in order for tribal leaders to provide feedback.

These tribal notifications will be sent at least 30 days prior to submission to CMS and will give a comprehensive summary/outline of the purpose of the state plan amendment and/or waiver request or renewal; and the notification will describe a method for the Tribes to provide comments/questions within a reasonable

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timeframe for responding (i.e., 30 days). If the state plan amendment is needing to be submitted to CMS under circumstances that would require less than 30 days notice, the State would notify tribes as soon as possible and still give the tribes as much time as possible for a response. An example would be if there is a legislative mandate that would take effect immediately and the State would be required to submit sooner than a 30 day timeframe.

The State will provide a comprehensive summary of all correspondence or other written documentation of contacts, face-to-face meetings, etc. to CMS.

Please describe the consultation process that occurred specifically for the development and submission of this State Plan Amendment, when it occurred and who was involved.

Following is an excerpt from an e-mail from Shoshonis Brown of the Meskwaki Settlement in Tama, Iowa regarding the consultation process that occurred regarding the development of this submission:

“I do remember speaking with you at the CMS-IHS Medicare & Medicaid Outreach and Education Training in Mayetta, Kansas. I actually was able to speak with you on August 18, 2010 during the Iowa Medicaid and Hawk-I breakout session and briefly before we adjourned for the training. We discussed many topics and I do remember you requesting some type of communication with our Tribal Health Clinic and the State Medicaid office. I informed you at that time that I was only a benefits coordinator and I could forward the request on to my supervisor. Since then I have received email notifications from you and have forwarded them on to my supervisor. “

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is **0938-1098**. The time required to complete this information collection is estimated to average 1 hour per response, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: CMS, 7500 Security Boulevard, Attn: PRA Reports Clearance Officer, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850.

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