

**STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT
MEDICAL ASSISTANCE PROGRAM**

State/Territory: IOWA

**ORGANIZATION AND FUNCTIONS OF THE
DIVISION OF MEDICAL SERVICES**

The Division of Medical Services contains these operating Bureaus:

1. Bureau of Eligibility Services

This Bureau is responsible for the development of policy and procedure for eligibility in the Medicaid Assistance Program. It is also responsible for the development of operating instructions for county offices to use in determining recipient eligibility and benefit levels. The Bureau provides interpretations of policy and procedure to county offices, the public, and other interested persons. The Bureau participates with other Bureaus of the Division and the Department in meetings, participates with other members of the Department in staff training activities, and maintains liaison with other state agencies having responsibilities in the medical and health area related to the Medicaid Assistance Program.

2. Bureau of Contract Management and Reimbursement

This Bureau has responsibility for oversight of fiscal agent operations to ensure compliance with the contract between the Department of Human Services and the fiscal agent. This Bureau is also responsible for maintaining the integrity of the Iowa Medicaid Management Information System and approving and facilitating system changes necessitated by program policy changes or changes requested to enhance the system. This Bureau also has responsibility for the recipient hotline, support of the Medical Assistance Advisory Council (MAAC), buy-in program, Medicaid quality control and other contract oversight and assistance as might be requested by other bureaus within the Division of Medical Services. The Bureau will also compile and distribute information relative to payment, provider enrollment and distribution as may be required from time to time.

3. Bureau of Health Care Purchasing and Quality Management

The Bureau of Health Care Purchasing and Quality Management has responsibility for policy development and quality oversight of all treatment services purchased on behalf of Iowa Medicaid beneficiaries. This includes services reimbursed directly through the state fiscal agent as well as contracts with managed physical and behavioral health care organizations. The Bureau incorporates three units: Health Insurance Purchasing with responsibility for the *hawk-i* program, HIPP and state employees health insurance; Long-term Care and Specialty Populations which includes SNFs, ICFs, ICFs-MR, home health, rehabilitative services and waiver programs; and Managed Care and Clinical Services which includes health maintenance organizations, prepaid health plan, hospitals, clinic and individual practitioner services.

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