

**Public Notice**  
**State Plan Amendment (SPA) IA-24-0013**  
**Medicaid Payment Rates for Inpatient Hospital Services**

**Posted:** October 7, 2024

The Iowa Department of Health and Human Services (HHS), pursuant to the requirements outlined in 42 C.F.R. §447.205, hereby gives notice of the following proposed action regarding changes to the reimbursement rates for inpatient hospital services provided by enrolled acute care hospitals under the State Plan under Title XIX of the Social Security Act Medical Assistance Program (Medicaid).

**Summary of Submission:**

Pursuant to page 1 of the currently approved Attachment 4.19-A, which authorizes the inpatient hospital rate rebase and weight calibration every three years. Medicaid State Plan Amendment (SPA) IA-24-0013 is administrative in nature to update the rate effective date and cost report periods to align with the new rebase calculation.

**Estimated Fiscal Impact:**

The estimated increase in Medicaid fee-for-service (FFS) expenditures for State Fiscal Year (SFY) 2025 related to the budget-neutral outpatient hospital service rebase is:

Total Dollars:	\$ 0
Federal Dollars:	\$ 0
State Dollars:	\$ 0

**Public Review and Comments:**

A copy of the SPA-IA-24-0013 and public notice is posted on the HHS website at the following link: <https://hhs.iowa.gov/public-notice/2024-10-07/medicaid-payment-rates>. To reach all stakeholders, non-electronic copies will be made available for review at each local HHS office.

**Submission of Comments:**

Written comments may be sent to Rebecca Wedemeier, Department of Health and Human Services, Iowa Medicaid, 1305 E. Walnut Street, Des Moines, IA 50319 or may be emailed to [rwedeme@dhs.state.ia.us](mailto:rwedeme@dhs.state.ia.us). Please indicate SPA IA-24-0013 in the subject line of the email.

All written and emailed comments must be received no later than November 6, by 4:30 p.m.

Submitted by:

Elizabeth Matney, Medicaid Director