



OCT 27 2017

Mikki Stier
Medicaid Director
Iowa Department of Human Services
100 Army Post Road
Des Moines, IA 50315

Dear Ms. Stier:

I am pleased to inform you that the Centers for Medicare & Medicaid Services (CMS) is approving Iowa's request to amend its Medicaid section 1115 demonstration, "Iowa Health and Wellness Plan" (Project Number 11-W-00289/5). This amendment is approved effective October 26, 2017. The amendment includes a waiver of the three month retroactive eligibility period, which will apply to all Iowa Medicaid beneficiaries, except for pregnant women (and during the 60-day period beginning on the last day of the pregnancy) and infants under one year of age. Beneficiaries will continue to receive Medicaid coverage effective the first day of the month in which their Medicaid application was filed, or as otherwise allowed by the state plan. Additionally, the three month retroactive eligibility waiver will only apply to new applications or new beneficiaries who join an existing household, for applications filed or requested on or after November 1, 2017. For beneficiaries who do not complete the redetermination process and are subsequently disenrolled, Iowa provides a 90-day reconsideration period, in accordance with 42 CFR 435.916. If a beneficiary is found eligible during that period, he or she will have their coverage backdated to when the beneficiary was disenrolled to ensure there is no gap in coverage.

To support more seamless coverage, particularly for those who access emergency services, the state will continue to operate its presumptive eligibility (PE) program, which provides some eligibility groups with Medicaid coverage for a limited time while the formal Medicaid eligibility determination is being made. The PE program offers immediate coverage to individuals likely to be Medicaid eligible before there has been a full Medicaid determination in the following groups:

- Children under 19;
- Pregnant women;
- Parents and caretakers of children under 19;
- Individuals ages 19-64 (new adult group);
- Former foster care children under age 26; and
- Individuals screened and diagnosed through the Breast and Cervical Cancer Early Detection Program (BCCEDP) and needing treatment for breast or cervical cancer.

Additionally, Iowa will continue to provide outreach and education about how to apply for and receive Medicaid coverage to the public, existing beneficiaries, and providers who serve vulnerable populations that may be impacted by this change, such as those providing nursing facility or other long-term services and supports. This will ensure that eligible individuals apply for and receive Medicaid coverage in a timely manner, as well as ensure that providers understand how to assist these individuals in gaining coverage.

The approval of the waiver of retroactive eligibility promotes the objectives of title XIX by encouraging beneficiaries to obtain and maintain health coverage, even when healthy. This will increase continuity of care by reducing gaps in coverage when beneficiaries churn on and off Medicaid or sign up for Medicaid only when sick. Specifically, for those who are aged, blind or disabled, or who may need long-term services and supports through Medicaid, this waiver will encourage beneficiaries to apply for Medicaid expeditiously when they believe they meet the criteria for eligibility to ensure primary or secondary coverage through Medicaid to receive these services if the need arises. This waiver also promotes the alignment between Medicaid and commercial coverage to facilitate smoother beneficiary transition. The state's application notes that with the availability of Medicaid expansion and premium tax credits, affordable coverage options have been available in Iowa for those complying with the individual mandate, thus eliminating the need for retroactive coverage.

Additionally, to affirm our commitment to protect vulnerable populations, pregnant women (and during the 60-day period beginning on the last day of the pregnancy) and infants under age 1 will not be subject to the retroactive eligibility waiver. As mentioned above, PE will continue to be available for many Medicaid beneficiaries and, combined with education and outreach the state will offer, these activities will also support the most vulnerable beneficiaries to ensure they have access to timely and necessary Medicaid coverage.

CMS' approval of the demonstration amendment is conditioned upon compliance with the enclosed set of waivers and special terms and conditions (STC) defining the nature, character, and extent of anticipated federal involvement in the project. The award is subject to our receiving your written acknowledgement of the award and acceptance of these STCs within 30 days of the date of this letter. A copy of the STCs and associated waivers is enclosed.

Your project officer for this demonstration is Ms. Jennifer Kotesich. She is available to answer any questions concerning your section 1115 demonstration. Ms. Kotesich's contact information is as follows:

Centers for Medicare & Medicaid Services
Center for Medicaid and CHIP Services
Mail Stop: S2-01-16
7500 Security Boulevard
Baltimore, MD 21244-1850
E-mail: Jennifer.Kotesich@cms.hhs.gov

Official communications regarding program matters should be sent simultaneously to Ms. Kotesich and to Mr. James Scott, Associate Regional Administrator, in our Kansas City Regional Office. Mr. Scott's contact information is as follows:

Centers for Medicare & Medicaid Services

Richard Bolling Federal Building

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601 East 12th Street
Room 355
Kansas City, MO 64106-2808
Email: James.Scott1@cms.hhs.gov

If you have questions regarding this approval, please contact Ms. Judith Cash, Acting Director, State Demonstrations Group, Center for Medicaid & CHIP Services, at (410) 786-9686.

Sincerely,

A handwritten signature in black ink, appearing to read "Brian Neale".

Brian Neale
Director

Enclosures

cc: James Scott, Associate Regional Administrator, CMS Kansas City Regional Office