Revision: HCFA-PM-93-1

January 1993

(BPD)

State/Territory: \_\_\_\_

IOWA

Citation 4.39
Secs.
1902 (a) (28) (D) (i)
and 1919 (e) (7) of
the Act;
P.L. 100-203
(Sec. 4211 (c));
P.L. 101-508

(Sec. 4801(b)).

## <u>Preadmission Screening and Annual</u> <u>Resident Review in Nursing Facilities</u>

- (a) The Medicaid agency has in effect a written agreement with the State mental health and mental retardation authorities that meet the requirements of 42 (CFR) 431.621(c).
- (b) The State operates a preadmission and annual resident review program that meets the requirements of 42 CFR 483.100-138.
- (c) The State does not claim as "medical assistance under the State Plan" the cost of services to individuals who should receive preadmission screening or annual resident review until such individuals are screened or reviewed.
- (d) With the exception of NF services furnished to certain NF residents defined in 42 CFR 483.118 (c) (1), the state does not claim as "medical assistance under the State plan" the cost of NF services to individuals who are found not to require NF services.
- (e) ATTACHMENT 4.39 specifies the State's definition of specialized services.

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## 4.39 (Continued)

- (f) Except for residents identified in 42 CFR 483.118(c)(1), the State mental health or mental retardation authority makes categorical determinations that individuals with certain mental conditions or levels of severity of mental illness would normally require specialized services of such an intensity that a specialized services program could not be delivered by the State in most, if not all, NFs and that a more appropriate placement should be utilized.
- (g) The State describes any categorical determinations it applies in <u>ATTACHMENT</u> 4.39-A.

TN No. <u>MS-93-22</u> Supersedes

TN No. NONE