Red Tape Review Rule Report

(Due: September 1, 2025)

| Department | Health and | Date: | September 1, 2025 | Total Rule | 17 |
|------------|-------------|-------------|------------------------------|-------------|----------|
| Name: | Human | | | Count: | |
| | Services | | | | |
| | 441 | Chapter/ | 79 | Iowa Code | 249A |
| IAC #: | | SubChapter/ | | Section | |
| | | Rule(s): | | Authorizing | |
| | | | | Rule: | |
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PLEASE NOTE, THE BOXES BELOW WILL EXPAND AS YOU TYPE

What is the intended benefit of the rule?

This rule chapter provides information for providers about Iowa's Medicaid program, including:

- Provider reimbursement methodology
- Provider sanctions
- Medical record maintenance
- Reviews and audits
- Provider agreements
- The Medical Assistance Advisory Council
- Requirements for prior-authorization, pre-admission review, and pre-procedure surgical review
- Provider enrollment
- Requirements for participating laboratories
- Requirements for providers prescribing controlled substances

Is the benefit being achieved? Please provide evidence.

Yes. As of June 23, 2025, Iowa Medicaid has 72,358 participating providers representing 69 distinct provider types.

What are the costs incurred by the public to comply with the rule?

Providers may incur administrative costs to comply with this rule chapter.

What are the costs to the agency or any other agency to implement/enforce the rule?

The Department incurs personnel and other administrative costs to enforce this rule chapter.

Do the costs justify the benefits achieved? Please explain.

Yes. As of June 23, 2025, Iowa Medicaid has 72,358 participating providers representing 69 distinct provider types.

Are there less restrictive alternatives to accomplish the benefit? \square YES \boxtimes NO If YES, please list alternative(s) and provide analysis of less restrictive alternatives from other states, if applicable. If NO, please explain.

No. Rules are both required and appropriate as they provide valuable information about how health care providers can participate in the Iowa Medicaid program in order to be reimbursed for services provided to Iowa Medicaid members.

Does this chapter/rule(s) contain language that is obsolete, outdated, inconsistent, redundant, or unnecessary language, including instances where rule language is duplicative of statutory language? [list chapter/rule number(s) that fall under any of the above categories]

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There is little content in this rule chapter that is duplicative of Iowa Code or federal regulations. Many rules do encompass language that is included in provider manuals or state plan; however, because of the high potential for appeals, the vast majority of this content will remain in this rule chapter.

The chapter does contain some outdated terminology, system references, and policy information that will require technical corrections.

441—79.16 described an outdated program, so the content will be deleted and the rule will be reserved.

RULES PROPOSED FOR REPEAL (list rule number[s]):

441—79.16 is being reserved.

RULES PROPOSED FOR RE-PROMULGATION (list rule number[s] or include rule text if available):

441—79.1 through 15 and 17 are being repromulgated.

*For rules being re-promulgated with changes, you may attach a document with suggested changes.

METRICS

| Total number of rules repealed: | 1 |
|---|-------|
| Proposed word count reduction after repeal and/or re-promulgation | 9,613 |
| Proposed number of restrictive terms eliminated after repeal and/or re-promulgation | 374 |

ARE THERE ANY STATUTORY CHANGES YOU WOULD RECOMMEND INCLUDING CODIFYING ANY RULES?

No.