Iowa Medicaid Fraud, Waste, and Abuse Task Force

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Overview

July 1, 2026 - Gov. Reynolds has signed an **executive order** establishing the Iowa Medicaid Fraud Elimination Task Force for the purpose of eradicating Medicaid fraud, waste, and abuse, and ensuring funds are used to support the needs of Iowans who qualify for benefits.

July 15, 2026 - First task force meeting held with Iowa Attorney General Brenna Bird

Task force is focused on:

- Investing in program integrity technology using recovered funds
- Supporting MCO provider network management
- Establishing quality initiatives focused on high-risk services and electronic visit verification; and enhance methods for the public to report suspected Medicaid fraud

Fraud Trends in Iowa

- $109 million recovered since SFY 2021
- Iowa's case outcomes have remained stable over the past three years, even as overall case volume shifted.
- Case volume in 2026 dropped significantly, but the ratio of declines, open cases, and referrals stayed consistent—indicating strong triage and review processes.
- Iowa is monitoring whether reduced volume reflects better early screening, reporting shifts, or changes in federal investigative thresholds.

Ongoing Work

Provider Revalidation Initiative (July 1, 2026 – June 30, 2028):
Iowa Medicaid is conducting a statewide Provider Revalidation Initiative with the following objectives:

- Complete revalidation for all enrolled providers.
- Improve the accuracy of provider enrollment data.
- Reduce administrative burden by leveraging Medicare screening results when applicable.
- Strengthen long-term program integrity through improved enrollment and oversight.

Ongoing communications for the public on how to report Fraud, Waste, and Abuse through channels such as social media, newsletters, and email.


Questions
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