



TERRY E. BRANSTAD, GOVERNOR

DEPARTMENT OF HUMAN SERVICES

CHARLES M. PALMER, DIRECTOR

July 2, 1996

GENERAL LETTER NO. 8-I-17

ISSUED BY: Bureau of Eligibility/HIPP, Division of Medical Services

SUBJECT: Employees' Manual, Title 8, Chapter I, *Medical Institutions*, Title page, new; Contents, pages 1 and 2, new; and pages 1 through 69, new.

Summary

This general letter transmits the revised chapter 8-I, *Medical Institutions*, which contains policy information from VIII-E, *Medical Institutions*, and VIII-E(1), *Client Participation*.

There are no policy changes within this chapter.

Medical Assistance for Refugees, which was previously VIII-I, was moved to Title 6, Chapter D(1), as per General Letter 6-D(1)-1, dated March 19, 1996.

Effective Date

August 1, 1996

Material Superseded

Obsolete the following interpretative memos:

- ◆ MS-VIII-92-5, "Resource Determination When Both Spouses Are Living in a Medical Facility."
- ◆ MS-V-90-6, "SSI Eligibility For a Person in an SNF."
- ◆ MS-V-91-6, "Lump Sums in Facility Cases."

Additional Information

Refer questions about this general letter to your regional benefit payment administrator.



TERRY E. BRANSTAD, GOVERNOR

DEPARTMENT OF HUMAN SERVICES

CHARLES M. PALMER, DIRECTOR

September 10, 1996

GENERAL LETTER NO. 8-I-18

ISSUED BY: Bureau of Eligibility/HIPP, Division of Medical Services

SUBJECT: Employees' Manual, Title 8, Chapter I, *Medical Institutions*, page 57, revised.

Summary

This revised page from 8-I, *Medical Institutions*, reflects changes made to the maximum rates that Medicaid will pay facilities.

Effective Date

Upon receipt.

Material Superseded

Remove page 57, dated July 2, 1996, from Employees' Manual, Title 8, Chapter I, and destroy it.

Additional information

Refer questions about this general letter to your regional benefit payment administrator.



TERRY E. BRANSTAD, GOVERNOR

DEPARTMENT OF HUMAN SERVICES

CHARLES M. PALMER, DIRECTOR

December 31, 1996

GENERAL LETTER NO. 8-I-19

ISSUED BY: Bureau of Eligibility/HIPP, Division of Medical Services

SUBJECT: Employees' Manual, Title 8, Chapter I, *Medical Institutions*, pages 25, 26, 34 through 39, and 41 through 44, revised; page 26a new.

Summary

Pages 25, 26, 34-39, and 41 through 44, are revised to reflect the COLA increase in the community spouse monthly maintenance needs allowance to \$1,975.50 per month.

Page 26a adds IABC directions for medical assistance income trust cases.

Page 42 and 43 are revised to add directions for completing vendor adjustments.

Effective Date

January 1, 1997

Material Superseded

Remove pages 25, 26, 34-39, and 41-44, all dated July 2, 1996, from Employees' Manual, Title 8, Chapter I, and destroy them.

Additional information

Refer questions about this general letter to your regional benefit payment administrator.



TERRY E. BRANSTAD, GOVERNOR

DEPARTMENT OF HUMAN SERVICES

CHARLES M. PALMER, DIRECTOR

March 25, 1997

GENERAL LETTER NO. 8-I-20

ISSUED BY: Bureau of Eligibility/HIPP, Division of Medical Services

SUBJECT: Employees' Manual, Title 8, Chapter I, *Medical Institutions*, pages 19, 23, 24, and 57, revised.

Summary

Page 57 is revised to reflect the increase in the maximum payment to skilled nursing facilities, effective February 1, 1997.

Pages 19 and 23 are being corrected.

Effective Date

Upon receipt.

Material Superseded

Remove the following pages from Employees' Manual, Title 8, Chapter I, and destroy them:

<u>Page</u>	<u>Date</u>
19, 23, 24	July 2, 1996
57	September 19, 1996

Additional Information

Refer questions about this general letter to your regional benefit payment administrator.



June 24, 1997

GENERAL LETTER NO. 8-I-21

ISSUED BY: Bureau of Eligibility/HIPP, Division of Medical Services

SUBJECT: Employees' Manual, Title 8, Chapter I, *Medical Institutions*, Contents (page 2), revised; pages 26a, 36, 37, 38, 43, and 57 through 68, revised.

Summary

Page 26a is revised to update the statewide average charges to private pay residents. The statewide average charges are used to determine the payments to be made to a beneficiary of a medical assistance income trust.

Pages 37 and 38 are revised to update the standard use for computing the maintenance needs of other dependents living with the community spouse based on the new poverty levels released in the Federal Register.

Other changes on pages 43 and 57 through 68 relate to changes related to the fiscal agent, Consultec, taking over the facility payment system (including payments to RCF residents). Essentially the fiscal agent uses information in the SSRD file to process these claims. Changes to that file that are not made before IABC cutoff will need to go to Quality Assurance for updating. This also includes changes in the *Case Activity Reports* and when they are sent to the DHS worker.

Effective Date

July 1, 1997

Material Superseded

Remove the following from Employees' Manual, Title 8, Chapter I, and destroy them.

<u>Page</u>	<u>Date</u>
Contents (page 2)	July 2, 1996
26a, 37, 38	December 31, 1996
57	March 25, 1997
57-69	July 2, 1996

Additional Information

Refer questions about this general letter to your regional benefit payment administrator.



TERRY E. BRANSTAD, GOVERNOR

DEPARTMENT OF HUMAN SERVICES

CHARLES M. PALMER, DIRECTOR

October 14, 1997

GENERAL LETTER NO. 8-I-22

ISSUED BY: Bureau of Eligibility/HIPP, Division of Medical Services

SUBJECT: Employees' Manual, Title 8, Chapter I, *Medical Institutions*, page 57, revised.

Summary

This page has been revised to reflect the increase in the maximum payment to nursing facilities effective July 1, 1997.

Effective Date

Upon receipt.

Material Superseded

Remove the following from Employees' Manual, Title 8, Chapter I, and destroy it.

<u>Page</u>	<u>Date</u>
57	June 24, 1997

Additional Information

Refer questions about this general letter to your regional benefit payment administrator.



TERRY E. BRANSTAD, GOVERNOR

DEPARTMENT OF HUMAN SERVICES

CHARLES M. PALMER, DIRECTOR

December 16, 1997

GENERAL LETTER NO. 8-I-23

ISSUED BY: Bureau of Eligibility/HIPP, Division of Medical Services

SUBJECT: Employees' Manual, Title 8, Chapter I, *Medical Institutions*, pages 2 and 34 through 39, revised.

Summary

Page 2 is revised to reflect changes in coinsurance paid by Medicare beneficiaries for 1998.

Pages 34 through 39 are revised to reflect the COLA increase in the community spouse monthly maintenance needs allowance to \$2,019.00 per month.

Effective Date

January 1, 1998

Material Superseded

Remove the following pages from Employees' Manual, Title 8, Chapter I, and destroy them:

<u>Page</u>	<u>Date</u>
2	July 2, 1996
34, 35	December 31, 1996
36-38	June 24, 1997
39	December 31, 1996

Additional information

Refer questions about this general letter to your regional benefit payment administrator.



January 6, 1998

GENERAL LETTER NO. 8-I-24

ISSUED BY: Bureau of Eligibility/HIPP, Division of Medical Services

SUBJECT: Employees' Manual, Title 8, Chapter I, *Medical Institutions*, pages 5, 14, 17, 21, 23, 48, and 55, revised.

Summary

Pages 5, 14, 23, 48, and 55 are revised to change the references from "FIP-related" Medicaid coverage to "FMAP" in compliance with delinking the Medicaid program from FIP eligibility standards.

Pages 17 and 21 are revised to clarify the treatment of income and resources for each person in a couple when both spouses are in a medical facility but in different facilities or when one spouse participates in an HCBS waiver and the other spouse is in a medical facility.

Effective Date

Delinking changes are effective retroactive to December 1, 1997.

Other changes are effective upon receipt.

Material Superseded

Remove the following pages from Employees' Manual, Title 8, Chapter I, and destroy them:

<u>Page</u>	<u>Date</u>
5, 14 17, 21	July 2, 1996
23	March 25, 1997
48, 55	July 2, 1996

Additional information

Refer questions about this general letter to your regional benefit payment administrator.



TERRY E. BRANSTAD, GOVERNOR

DEPARTMENT OF HUMAN SERVICES

CHARLES M. PALMER, DIRECTOR

June 2, 1998

GENERAL LETTER NO. 8-I-25

ISSUED BY: Bureau of Eligibility/HIPP, Division of Medical Services

SUBJECT: Employees' Manual, Title 8, Chapter I, *Medical Institutions*, pages 26a, 37, and 38, revised.

Summary

Page 26a is revised to update the statewide average charges to private pay residents. The statewide average charges are used to determine the payments to be made to a beneficiary of a medical assistance income trust.

Pages 37 and 38 are revised to update the standard used for computing the maintenance needs of other dependents living with the community spouse based on the new poverty levels released in the Federal Register.

Effective Date

July 1, 1998

Material Superseded

Remove the following from Employees' Manual, Title 8, Chapter I, and destroy them.

<u>Page</u>	<u>Date</u>
26a,	June 24, 1997
37, 38	December 16, 1997

Additional Information

Refer questions about this general letter to your regional benefit payment administrator.



TERRY E. BRANSTAD, GOVERNOR

DEPARTMENT OF HUMAN SERVICES

CHARLES M. PALMER, DIRECTOR

June 23, 1998

GENERAL LETTER NO. 8-I-26

ISSUED BY: Bureau of Eligibility/HIPP, Division of Medical Services

SUBJECT: Employees' Manual, Title 8, Chapter I, *Medical Institutions*, page 26a, revised.

Summary

Page 26a is revised to correct the dates for the statewide average charges to private pay residents. The statewide average charges are used to determine the payments to be made to a beneficiary of a medical assistance income trust.

Effective Date

July 1, 1998

Material Superseded

Remove the following from Employees' Manual, Title 8, Chapter I, and destroy them.

<u>Page</u>	<u>Date</u>
26a	June 2, 1998

Additional Information

Refer questions about this general letter to your regional benefit payment administrator.



TERRY E. BRANSTAD, GOVERNOR

DEPARTMENT OF HUMAN SERVICES

CHARLES M. PALMER, DIRECTOR

August 4, 1998

GENERAL LETTER NO. 8-I-27

ISSUED BY: Bureau of Eligibility/HIPP, Division of Medical Services

SUBJECT: Employees' Manual, Title 8, Chapter I, *Medical Institutions*, page 57, revised.

Summary

This page has been revised to reflect the increase in the maximum payment to nursing facilities effective July 1, 1998.

Effective Date

Upon receipt.

Material Superseded

Remove from Employees' Manual, Title 8, Chapter I, page 57, dated October 14, 1997, and destroy it.

Additional Information

Refer questions about this general letter to your regional benefit payment administrator.



November 3, 1998

GENERAL LETTER NO. 8-I-28

ISSUED BY: Bureau of Eligibility, Division of Medical Services

SUBJECT: Employees' Manual, Title 8, Chapter I, *Medical Institutions*, Contents (pages 1 and 2), revised; pages 3, 4, 38, 57, and 58, revised, and 4a, 58a, and 58b, new.

Summary

Pages 3 and 4 are revised to include clarification that FMAP-related Medicaid recipients and MAC recipients may qualify for coverage of nursing facility care. The revision also includes clarification that client participation is calculated in the same manner that it is calculated for all nursing facility residents.

Page 38 is revised to update example calculations.

Pages 57 and 58 are revised to include directions regarding how and when to update the IABC file and the SSRD file when a nonfacility Medicaid recipient enters a nursing facility or when a nursing facility resident changes level of care.

Effective Date

Upon receipt.

Material Superseded

Remove the following pages from Employees' Manual, Title 8, Chapter I, and destroy them:

<u>Page</u>	<u>Date</u>
Contents (page 1)	July 2, 1996
Contents (page 2)	June 24, 1997
3, 4	July 2, 1996
38	June 2, 1998
57	August 24, 1998
58	June 24, 1997

Additional Information

Refer questions about this general letter to your regional benefit payment administrator.



TERRY E. BRANSTAD, GOVERNOR

DEPARTMENT OF HUMAN SERVICES

CHARLES M. PALMER, DIRECTOR

December 15, 1998

GENERAL LETTER NO. 8-I-29

ISSUED BY: Bureau of Eligibility/HIPP, Division of Medical Services

SUBJECT: Employees' Manual, Title 8, Chapter I, *Medical Institutions*, pages 2, 4a, 34 through 39, and 55, revised.

Summary

Page 2 is revised to reflect changes in coinsurance paid by Medicare beneficiaries for 1998.

Pages 34 through 39 are revised to reflect the COLA increase in the community spouse monthly maintenance needs allowance to \$2,049.00 per month.

On January 1, 1999, the Department will implement the Iowa Plan for Behavioral Health. The Iowa Plan integrates treatment for mental health and substance abuse and combines two previously separate managed care programs:

- ◆ The Mental Health Access Plan (MHAP).
- ◆ The Iowa Managed Substance Abuse Care Plan (IMSACP).

Effective December 31, 1998, the MHAP and IMSACP programs will be terminated.

Due to the transition from MHAP and IMSACP to the Iowa Plan, pages 4a and 55, are revised to change references to "MHAP" or "IMSACP" to the "Iowa Plan."

Effective Date

January 1, 1999

Material Superseded

Remove the following pages from Employees' Manual, Title 8, Chapter I, and destroy them:

<u>Page</u>	<u>Date</u>
2	December 16, 1997
4a	November 3, 1998
34, 35, 36	December 16, 1997
37, 38	June 2, 1998
39	December 16, 1997
55	January 6, 1998

Additional information

Refer questions about this general letter to your regional benefit payment administrator.



THOMAS J. VILSACK, GOVERNOR
SALLY J. PEDERSON, LT. GOVERNOR

DEPARTMENT OF HUMAN SERVICES
CHARLES M. PALMER, DIRECTOR

January 19, 1999

GENERAL LETTER NO. 8-I-30

ISSUED BY: Bureau of Eligibility Services, Division of Medical Services

SUBJECT: Employees' Manual, Title 8, Chapter I, *Medical Institutions*, pages 25, 26, 26a, 58a, and 58b, revised.

Summary

The fiscal agent recently informed the Department that it is able to pursue third-party liability against long-term-care insurance policies, not indemnity-type policies, and other third-party payors and supplemental insurance. Indemnity-type policies continue to count as income.

Page 25, regarding clients with medical assistance income trusts, is revised. For persons with a medical assistance income trust, code only the 300% payment into IABC to determine eligibility and client participation. Forward an SIQ form to the Third-Party Liability Unit regarding the vendor payment portion of the trust.

Page 58a is revised to reflect the increase in the maximum payment to swing-bed hospital (skilled) effective January 1, 1999.

Page 58b is revised to clarify which cases should be referred to a fiscal agent with a *Supplemental Insurance Questionnaire* (SIQ). Refer cases for persons with long-term care insurance policies and trusts that pay for medical costs with a SIQ form with the information on the third-party payors.

Effective Date

Swing-bed rate changes are effective January 1, 1999.

Other changes are effective upon receipt.

Implementation

For cases that have these payments included in the client participation calculation, revise the case at the time of the annual review. Remove the income from the BCW2 calculation and forward a completed SIQ to TPL.

Material Superseded

Remove the following pages from Employees' Manual, Title 8, Chapter I, and destroy them:

<u>Page</u>	<u>Date</u>
25, 26	December 31, 1996
26a	June 23, 1998
58a, 58b	November 3, 1998

Additional Information

Contact your regional benefit payment administrator if you need additional information.



THOMAS J. VILSACK, GOVERNOR
SALLY J. PEDERSON, LT. GOVERNOR

DEPARTMENT OF HUMAN SERVICES
JESSIE K. RASMUSSEN, DIRECTOR

June 1, 1999

GENERAL LETTER NO. 8-I-31

ISSUED BY: Bureau of Eligibility/HIPP, Division of Medical Services

SUBJECT: Employees' Manual, Title 8, Chapter I, *Medical Institutions*, pages 23 through 26, 26a, 37, and 38, revised.

Summary

Page 23 is revised to add clarification of VA lump-sum, aid and attendance and unusual medical expense payments.

Page 26a is revised to update the statewide average charges to private pay residents for fiscal year 2000. The statewide average charges are used to determine the payments to be made to a beneficiary of a medical assistance income trust.

Pages 37 and 38 are revised to update the standard used for computing the maintenance needs of other dependents living with the community spouse based on the 1999 poverty levels released in the Federal Register.

Effective Date

July 1, 1999

Material Superseded

Remove the following from Employees' Manual, Title 8, Chapter I, and destroy them:

<u>Page</u>	<u>Date</u>
23	January 6, 1997
24	March 25, 1997
25, 26, 26a	January 19, 1999
37, 38	December 15, 1998

Additional Information

Refer questions about this general letter to your regional benefit payment administrator.



THOMAS J. VILSACK, GOVERNOR
SALLY J. PEDERSON, LT. GOVERNOR

DEPARTMENT OF HUMAN SERVICES
JESSIE K. RASMUSSEN, DIRECTOR

July 27, 1999

GENERAL LETTER NO. 8-I-32

ISSUED BY: Bureau of Eligibility Services, Division of Medical Services

SUBJECT: Employees' Manual, Title 8, Chapter I, *Medical Institutions*, page 58a, revised.

Summary

This page has been revised to reflect the following increases in maximum facility payments, effective July 1, 1999:

- ◆ For nursing facilities, \$85.93 per day.
- ◆ For free-standing skilled facilities, \$128.53 per day.
- ◆ For hospital-based skilled facilities, \$242.53 per day.
- ◆ For ICFs/MR, \$255.61 per day.

Effective Date

July 1, 1999.

Material Superseded

Remove from Employees' Manual, Title 8, Chapter I, page 58a, dated January 19, 1999, and destroy it.

Additional Information

Refer questions about this general letter to your regional benefit payment administrator.



THOMAS J. VILSACK, GOVERNOR
SALLY J. PEDERSON, LT. GOVERNOR

DEPARTMENT OF HUMAN SERVICES
JESSIE K. RASMUSSEN, DIRECTOR

October 5, 1999

GENERAL LETTER NO. 8-I-33

ISSUED BY: Bureau of Health Care Purchasing and Quality Management,
Division of Medical Services

SUBJECT: Employees' Manual, Title 8, Chapter I, *Medical Institutions*, pages 57 and 58,
revised.

Summary

Page 57 is revised to reflect changes in the Iowa Administrative Code for nursing facilities.

This change revises the Medicaid policy to require that a nursing facility accept Medicaid payment as payment in full effective with a resident's beginning date of eligibility. It further provides that the facility must refund any payment received from the resident or family member for the period of time for which the resident is determined to be Medicaid-eligible.

Effective Date

November 1, 1999.

Material Superseded

Remove from Employees' Manual, Title 8, Chapter I, pages 57 and 58, dated November 3, 1998, and destroy them.

Additional Information

Refer questions about this general letter to your regional benefit payment administrator.



THOMAS J. VILSACK, GOVERNOR
SALLY J. PEDERSON, LT. GOVERNOR

DEPARTMENT OF HUMAN SERVICES
JESSIE K. RASMUSSEN, DIRECTOR

December 14, 1999

GENERAL LETTER NO. 8-I-34

ISSUED BY: Bureau of Eligibility, Division of Medical Services

SUBJECT: Employees' Manual, Title 8, Chapter I, *Medical Institutions*, Contents (pages 1 and 2), revised; pages 2, 4, 4a, 5, 6, 25, 26, 34 through 39, and 42, revised; pages 4b and 42a through 42m, new.

Summary

Page 2 is revised to reflect changes in coinsurance paid by Medicare beneficiaries for 2000.

Pages 4 and 5 are revised to specify that the 30-day stay requirement applies only to people in the 300% group.

Page 4a is revised to include expanded SLMB and home health SLMB.

Information regarding medical assistance income trusts is greatly expanded and moves from pages 25 through 26a to pages 42 through 42m. Page 42a includes an update to the statewide average charge for ICF care and PMIC care based on revisions to these numbers effective December 1, 1999.

These pages and pages 34 through 39 are revised to reflect the COLA increase in income for 300% of the SSI benefit for one person and the community spouse monthly maintenance needs allowance to \$2,103.00 per month.

Effective Date

Statewide average changes for nursing care are effective December 1, 1999.

COLA and Medicare coinsurance changes are effective January 1, 2000.

Material Superseded

Remove the following pages from Employees' Manual, Title 8, Chapter I, and destroy them:

<u>Page</u>	<u>Date</u>
Contents (pages 1 and 2)	November 3, 1998
2	December 15, 1998
4	November 3, 1998
4a	December 15, 1998
5	January 6, 1998
6	July 2, 1996
25, 26, 26a	June 1, 1999
34, 35, 36	December 15, 1998
37, 38	June 1, 1999
39	December 15, 1998
42	December 31, 1996

Additional Information

Refer questions about this general letter to your regional benefit payment administrator.



THOMAS J. VILSACK, GOVERNOR
SALLY J. PEDERSON, LT. GOVERNOR

DEPARTMENT OF HUMAN SERVICES
JESSIE K. RASMUSSEN, DIRECTOR

April 18, 2000

GENERAL LETTER NO. 8-I-35

ISSUED BY: Bureau of Eligibility, Division of Medical Services

SUBJECT: Employees' Manual, Title 8, Chapter I, *Medical Institutions*, pages 34 and 58a, revised.

Summary

Page 34 is revised to add the 1999 minimum monthly maintenance needs allowance of \$2049 back into the table.

Page 58a is revised to reflect the increase in the maximum payment to swing-bed hospital (skilled care).

Effective Date

Swing-bed rate changes are effective January 1, 2000.

Material Superseded

Remove the following pages from Employees' Manual, Title 8, Chapter I, and destroy them:

<u>Page</u>	<u>Date</u>
34	December 14, 1999
58a	July 27, 1999

Additional Information

Refer questions about this general letter to your regional benefit payment administrator.



THOMAS J. VILSACK, GOVERNOR
SALLY J. PEDERSON, LT. GOVERNOR

DEPARTMENT OF HUMAN SERVICES
JESSIE K. RASMUSSEN, DIRECTOR

June 20, 2000

GENERAL LETTER NO. 8-I-36

ISSUED BY: Bureau of Eligibility Services, Division of Medical Services

SUBJECT: Employees' Manual, Title 8, Chapter I, *MEDICAL INSTITUTIONS*, Contents (page 2), revised; pages 32, 33, 37, 38, 42, 42a through 42m, revised; and pages 42n, 42o, and 42p, new.

Summary

Page 32 is revised to direct the reader to another manual chapter for policies on counting an annuity.

Pages 42a, 42b, 42c, and 42d are revised to clarify the policy and standardize the language for counting income from a medical assistance income trust.

Page 42b is revised to update the statewide average charges to private-pay residents in specified facilities or waivers for fiscal year 2001. The statewide average charges are used to determine the payments to be made to a beneficiary of a medical assistance income trust.

Pages 42i and 42j are revised to clarify the example.

Page 42m is revised to:

- ◆ Correct the location for referral to the statewide average charge for nursing care chart.
- ◆ Clarify that when a *Supplemental Insurance Questionnaire* is sent indicating there is a medical assistance income trust vendor payment, an effective date needs to be entered on the form.

Effective Date

July 1, 2000

Material Superseded

Remove the following from Employees' Manual, Title 8, Chapter I, and destroy them.

<u>Page</u>	<u>Date</u>
Contents (page 2)	December 14, 1999
32, 33	July 2, 1996
37, 38, 42, 42a-42m	December 14, 1999

Additional Information

Refer questions about this general letter to your regional benefit payment administrator.



THOMAS J. VILSACK, GOVERNOR
SALLY J. PEDERSON, LT. GOVERNOR

DEPARTMENT OF HUMAN SERVICES
JESSIE K. RASMUSSEN, DIRECTOR

August 8, 2000

GENERAL LETTER NO. 8-I-37

ISSUED BY: Bureau of Eligibility Services, Division of Medical Services

SUBJECT: Employees' Manual, Title 8, Chapter I, *MEDICAL INSTITUTIONS*, page 8, 9, 10, 58a, 58b, 59, and 66, revised.

Summary

Page 58a is revised to reflect the following increases in maximum facility payments:

- ◆ For nursing facilities, \$88.50 per day, effective July 1, 2000.
- ◆ For free-standing skilled facilities, \$163.41 per day, effective February 1, 2000.
- ◆ For hospital-based skilled facilities, \$346.20 per day, effective February 1, 2000.
- ◆ For ICFs/MR, \$260.54 per day, effective July 1, 2000.
- ◆ For ventilator care in a skilled facility, the add-on is \$100 per day, effective July 1, 2000.

Other pages are revised to update form numbers and references.

Effective Date

July 1, 2000

Material Superseded

Remove the following from Employees' Manual, Title 8, Chapter I, and destroy them.

<u>Page</u>	<u>Date</u>
8-10	July 2, 1996
58a	April 18, 2000
58b	January 19, 1999
59, 66	June 24, 1997

Additional Information

Refer questions about this general letter to your regional benefit payment administrator.



THOMAS J. VILSACK, GOVERNOR
SALLY J. PEDERSON, LT. GOVERNOR

DEPARTMENT OF HUMAN SERVICES
JESSIE K. RASMUSSEN, DIRECTOR

November 7, 2000

GENERAL LETTER NO. 8-I-38

ISSUED BY: Bureau of Eligibility Services, Division of Medical Services

SUBJECT: Employees' Manual, Title 8, Chapter I, *MEDICAL INSTITUTIONS*, Contents (pages 1 and 2) revised; pages 21 through 26, 41, 42, 42a through 42i, 42l, 42m, 42n, 58a, 58b, and 60, revised.

Summary

Page 22 is revised to clarify that payments from insurance benefits used to pay for care are available for client participation.

Pages 23 and 24 are revised to clarify how to apply insurance benefits to the nursing facility care.

Page 41 is revised to clarify which insurance premiums can't be deducted.

Pages 42 and 42a are revised to clarify how the execution and funding of a medical assistance income trust affects the date of eligibility.

Pages 42e, 42f, 42n, and 58b are revised to reflect the change in the procedure for payments from a medical assistance income trust. Submitting form 470-2826, *Supplemental Insurance Questionnaire* (SIQ), will no longer indicate the vendor payment made by the trustee. The vendor payment will be entered in the IABC system.

Page 42l is revised to clarify that payments from indemnity policies are third-party liability and are available for client participation and to delete references to nursing facility insurance.

Page 60 is revised to update figures in the example.

Implementation Instructions for Medical Assistance Trust Cases

For cases that currently have these vendor payments, an SIQ must be submitted to show that there is no longer a third-party vendor payment. To avoid confusion to the recipients and providers, a printout of the cases currently on assistance with the amount of \$1536 unearned income, most likely indicating a medical assistance income trust, is being provided.

Workers should terminate the SIQ and make the entries on the BCW2 in IABC to show the medical assistance income trust payment on all cases identified. If additional cases are later identified while processing changes, COLA, or annual reviews, change them at that time.

Ensure that the name and the state identification number are on the SIQ form. Write TERMINATED and the effective date of termination across the top of the form. The effective date of termination must be the same month that the trust vendor payment is entered on the BCW2 to be added to client participation. Send the SIQ to the Third-Party Liability Section, Division of Medical Services, in central office.

Effective Date

Upon receipt.

Material Superseded

Remove the following pages from Employees' Manual, Title 8, Chapter I, and destroy them:

<u>Page</u>	<u>Date</u>
Contents (p. 1)	December 14, 1999
Contents (p. 2)	June 20, 2000
21	January 6, 1998
22	July 2, 1996
23, 24	June 1, 1999
25, 26	December 14, 1999
41	December 31, 1996
42, 42a-42i, 42l-42p	June 20, 2000
58a, 58b	August 8, 2000
60	June 24, 1997

Additional Information

Refer questions about this general letter to your regional benefit payment administrator.



THOMAS J. VILSACK, GOVERNOR
SALLY J. PEDERSON, LT. GOVERNOR

DEPARTMENT OF HUMAN SERVICES
JESSIE K. RASMUSSEN, DIRECTOR

December 5, 2000

GENERAL LETTER NO. 8-I-39

ISSUED BY: Bureau of Eligibility Services, Division of Medical Services

SUBJECT: Employees' Manual, Title 8, Chapter I, *MEDICAL INSTITUTIONS*, pages 2, 5, 11, 12, 18, 24, 34 through 38, 42c, 42e, 42f, 42g, 42i through 42m, 43, 44, and 63, revised.

Summary

This letter transmits revisions to:

- ◆ Add the 2001 Medicare deductibles on page 2.
- ◆ Add the 2001 minimum monthly maintenance needs allowance of \$2,175 on page 34.
- ◆ Update the dollar amounts in client participation examples.
- ◆ Update form numbers and references.

Effective Date

Swing-bed rate changes are effective January 1, 2001.

Material Superseded

Remove the following pages from Employees' Manual, Title 8, Chapter I, and destroy them:

<u>Page</u>	<u>Date</u>
2, 5	December 14, 1999
11, 12, 18	July 2, 1996
24	November 7, 2000
34	April 18, 2000
35, 36	December 14, 1999
37, 38	June 20, 2000
42c, 42e-42g, 42i	November 7, 2000
42j, 42k	June 20, 2000
42l, 42m	November 7, 2000
43	June 24, 1997
44	December 31, 1996
63	June 24, 1997

Additional Information

Refer questions about this general letter to your regional benefit payment administrator.



July 3, 2001

GENERAL LETTER NO. 8-I-40

ISSUED BY: Bureau of Eligibility Services, Division of Medical Services

SUBJECT: Employees' Manual, Title 8, Chapter I, *MEDICAL INSTITUTIONS*, Contents (page 2), revised; pages 1, 2, 8, 9, 10, 11, 23, 31, 37, 41, 43 through 68, revised; and pages 69 through 84, new.

Summary

Effective July 1, 2001, non-state owned nursing facilities are reimbursed for Medicaid residents under a modified price-based case-mix method of payment.

Due to this change, nursing facilities that currently have a both a skilled vendor number and a nursing facility number will now bill for all of their residents under their nursing facility (080) number. These facilities will all be treated as "nursing facilities" for both levels of care. Each facility will have one rate that will be paid for all residents at either level of care.

IM workers will no longer enter moves between skilled level of care and nursing facility levels of care in the same facility. Moves to a skilled (065) vendor number are needed only when the person actually moves to a different facility, such as a hospital-based skilled facility or a swing bed.

Pages 1, 2, 32, 62, 63, 65, 66, 67, 74, and 77 are revised to remove the references to "skilled nursing facility" and replace it with "skilled level of care" where needed.

Page 8 is revised to remove the statement that a level of care determination is needed when a person moves to a bed that is certified for a different level of care.

Page 9 is revised to remove the reference to facilities certified to provide both skilled and nursing facility levels of care.

Page 11 is revised to remove the obsolete example.

Page 31 is revised to allow a diversion for the maintenance needs of the community spouse even when the community spouse is on an HCBS waiver.

Page 37 is revised to update the standard maintenance needs allowance of other dependents living with the community spouse to the current amount.

Page 41 is revised to remove the reference to maximum Medicaid reimbursement rate.

Page 44 is revised to show the new statewide average charges to private-pay residents in specified facilities, waivers, or levels of care for fiscal year 2002. These amounts are used to determine the payments to be made to a beneficiary of a medical assistance income trust.

Pages 43, 45 through 47, and 49 through 53 are revised to show the new 300% figure after the consumer price index correction. (See Manual Letter 14-B(8)-20.)

Page 64 is revised to replace references to “SNF” with “skilled level of care” and to add that nursing facilities will complete *Case Activity Reports* to verify when a resident’s nursing facility stay will be covered by Medicare.

Page 72 is revised to remove the reference to transfer between levels of care at the same facility.

Page 73 is revised to remove the maximum facility reimbursement rates.

Pages 75 and 76 are revised to remove the reference to maximum reimbursement rates and to clarify how payments are made to a facility for reserve bed days while a client is in the hospital.

Page 79 is revised to replace the maximum rates paid for lower level of care to the average rates to be paid for lower level of care.

Page 82 is revised to include that facilities will complete *Case Activity Reports* when a resident is covered by Medicare or Medicare coverage is exhausted.

Effective Date

July 1, 2001

Material Superseded

Remove the following from Employees’ Manual, Title 8, Chapter I, and destroy them.

<u>Page</u>	<u>Date</u>
Contents (p. 2)	November 7, 2000
1	July 2, 1996
2	December 5, 2000
8-10	August 8, 2000
11	December 5, 2000
23	November 7, 2000
31	July 2, 1996
37	December 5, 2000
41, 42a, 42b	November 7, 2000
42c	December 5, 2000
42d	November 7, 2000
42e-42g	December 5, 2000

42h	November 7, 2000
42i-42m	December 5, 2000
42n	November 7, 2000
43, 44	December 5, 2000
45-47	July 2, 1996
48	January 6, 1998
49-56	July 2, 1996
57, 58	October 5, 1999
58a, 58b	November 7, 2000
59	August 8, 2000
60	November 7, 2000
61, 62	June 24, 1997
63	December 5, 2000
64, 65	June 24, 1997
66	August 8, 2000
67, 68	June 24, 1997

Additional Information

Refer questions about this general letter to your regional benefit payment administrator.



STATE OF IOWA

THOMAS J. VILSACK, GOVERNOR
SALLY J. PEDERSON, LT. GOVERNOR

DEPARTMENT OF HUMAN SERVICES
JESSIE K. RASMUSSEN, DIRECTOR

December 11, 2001

GENERAL LETTER NO. 8-I-41

ISSUED BY: Bureau of Eligibility Services, Division of Medical Services

SUBJECT: Employees' Manual, Title 8, Chapter I, *MEDICAL INSTITUTIONS*, pages 2, 34 through 38, 45, 47, 48, 49, and 51 through 55, revised.

Summary

This chapter is revised to:

- ◆ Add the 2002 Medicare deductibles on page 2.
- ◆ Add the 2002 minimum monthly maintenance needs allowance of \$2,232 on page 34.
- ◆ Update the dollar amounts in client participation examples.

Effective Date

January 1, 2002

Material Superseded

Remove the following pages from Employees' Manual, Title 8, Chapter I, and destroy them:

<u>Page</u>	<u>Date</u>
2	July 3, 2001
34, 35, 36	December 5, 2000
37	July 3, 2001
38	December 5, 2000
45, 47, 48, 49, 51-55	July 3, 2001

Additional Information

Refer questions about this general letter to your regional benefit payment administrator.



STATE OF IOWA

THOMAS J. VILSACK, GOVERNOR
SALLY J. PEDERSON, LT. GOVERNOR

DEPARTMENT OF HUMAN SERVICES
JESSIE K. RASMUSSEN, DIRECTOR

July 2, 2002

GENERAL LETTER NO. 8-I-42

ISSUED BY: Unit of Health Support,
Division of Financial, Health and Work Supports

SUBJECT: Employees' Manual, Title 8, Chapter I, *MEDICAL INSTITUTIONS*, pages 35,
37, 38, 43, and 46, revised.

Summary

This chapter is revised to:

- ◆ Correct the year revision date for page 35 from 2000 to 2001.
- ◆ Update the standard deduction for dependents.
- ◆ Update the statewide average charges to private-pay residents in specified facilities or waivers for fiscal year 2003. The statewide average charges are used to determine the payments to be made to a beneficiary of a medical assistance income trust.
- ◆ Clarify an example on page 46.

Effective Date

July 1, 2002

Material Superseded

Remove the following pages from Employees' Manual, Title 8, Chapter I, and destroy them:

<u>Page</u>	<u>Date</u>
35	December 11, 2000
37, 38	December 11, 2001
43, 46	July 3, 2001

Additional Information

Refer questions about this general letter to your area income maintenance supervisor 2.



December 17, 2002

GENERAL LETTER NO. 8-I-43

ISSUED BY: Unit of Health Support, Division of Financial, Health and Work Support

SUBJECT: Employees' Manual, Title 8, Chapter I, MEDICAL INSTITUTIONS, pages 2, 23, 34 through 39, 45, 47, 48, 49, and 51 through 55, 73, and 74, revised.

Summary

This chapter is revised to:

- ◆ Add the 2003 Medicare deductibles.
◆ Add the 2003 minimum monthly maintenance needs allowance of \$2,266.50.
◆ Update the dollar amounts in client participation examples.
◆ Clarify that Supplemental Insurance Questionnaire should not be completed when the insurance payment has been added to the client participation.
◆ Change the dollar amount for the maximum Medicaid rate for community-based ICFs/MR to reflect the July 1, 2002, rate of \$266.47 (80th percentile).

Effective Date

January 1, 2003

Material Superseded

Remove the following pages from Employees' Manual, Title 8, Chapter I, and destroy them:

Table with 2 columns: Page, Date. Lists pages 2, 23, 34, 35, 36, 37, 38, 39, 45, 47, 48, 49, 51-55, 73, 74 and their respective superseding dates.

Additional Information

Refer questions about this general letter to your area income maintenance supervisor 2.



STATE OF IOWA

THOMAS J. VILSACK, GOVERNOR
SALLY J. PEDERSON, LT. GOVERNOR

DEPARTMENT OF HUMAN SERVICES
KEVIN W. CONCANNON, DIRECTOR

May 27, 2003

GENERAL LETTER NO. 8-I-44

ISSUED BY: Unit of Health Support, Division of Financial, Health and Work Support

SUBJECT: Employees' Manual, Title 8, Chapter I, **MEDICAL INSTITUTIONS**, pages 4, 4a, 4b, 7, 12, 37, 38, 40, 43, 46, 71, 72, 73, 75, and 76, revised; and page 40a, new.

Summary

This chapter is revised to:

- ◆ Clarify policy on children in an institution by referring the reader to Chapter 8-D, **RESOURCES**.
- ◆ Remove references to home-health specified low-income Medicare beneficiary (HH-SLMB).
- ◆ Clarify that the facility must obtain authorization for skilled care payment when the recipient resides in an out-of-state facility.
- ◆ Correct the reference to use the *Health Services Application* when a SSI recipient loses SSI benefits due to entry to a medical institution.
- ◆ Correct examples for dependent allowance.
- ◆ Clarify the allowance of health insurance premiums as an unmet medical deduction.
- ◆ Add examples for unmet medical deductions.
- ◆ Update the statewide average charges for care and update example.
- ◆ Correct references to show that requests for correction to the payment system must be sent to the Field Operations Support Unit.
- ◆ Update the maximum reimbursement rate for community based ICF/MR.
- ◆ Change reserve bed payment from 75% to 42%.

Effective Date

The statewide average charges and the maximum reimbursement rate for community based ICF/MR are effective July 1, 2003.

All other changes are effective upon receipt.

Material Superseded

Remove the following pages from Employees' Manual, Title 8, Chapter I, and destroy them:

<u>Page</u>	<u>Date</u>
4, 4a, 4b	December 14, 1999
7	July 2, 1996
12	December 5, 2000
37, 38	December 17, 2002
40	July 2, 1996
43, 46	July 2, 2002
71, 72	July 3, 2001
73	December 17, 2002
75, 76	July 3, 2001

Additional Information

Refer questions about this general letter to area income maintenance supervisor 2.



December 16, 2003

GENERAL LETTER NO. 8-I-45

ISSUED BY: Bureau of Financial Support Programs,
Division of Financial, Health and Work Supports

SUBJECT: Employees' Manual, Title 8, Chapter I, *MEDICAL INSTITUTIONS*, pages 2,
34 through 39, 45, 47, 48, 49, and 51 through 55, revised.

Summary

This chapter is revised to:

- ◆ Add the 2004 Medicare deductibles.
- ◆ Correct examples.
- ◆ Add the 2004 minimum monthly maintenance needs allowance of \$2,319.00.
- ◆ Update the dollar amounts in client participation examples.

Effective Date

January 1, 2004

Material Superseded

Remove the following pages from Employees' Manual, Title 8, Chapter I, and destroy them:

<u>Page</u>	<u>Date</u>
2, 34, 35, 36	December 17, 2002
37, 38	May 27, 2003
39, 45, 47, 48, 49, 51-55	December 17, 2002

Additional Information

Refer questions about this general letter to area income maintenance supervisor 2.



STATE OF IOWA

THOMAS J. VILSACK, GOVERNOR
SALLY J. PEDERSON, LT. GOVERNOR

DEPARTMENT OF HUMAN SERVICES
KEVIN W. CONCANNON, DIRECTOR

March 23, 2004

GENERAL LETTER NO. 8-I-46

ISSUED BY: Bureau of Financial Support, Division of Financial, Health and Work Supports

SUBJECT: Employees' Manual, Title 8, Chapter I, *MEDICAL INSTITUTIONS*, pages 37 and 38, revised.

Summary

This chapter is revised to update the standard used for computing the maintenance needs of other dependents living with the community spouse. These are based on the new federal poverty levels.

Effective Date

April 1, 2004

Material Superseded

Remove the following pages from Employees' Manual, Title 8, Chapter E, and destroy them:

<u>Page</u>	<u>Date</u>
37, 38	December 16, 2003

Additional Information

Refer questions about this general letter to your service area income maintenance supervisor 2.



July 6, 2004

GENERAL LETTER NO. 8-I-47

ISSUED BY: Bureau of Financial Support Programs,
Division of Financial, Health and Work Supports

SUBJECT: Employees' Manual, Title 8, Chapter I, *MEDICAL INSTITUTIONS*, pages 23,
33, 43 through 48, 50, 71, 73, 75, and 76, revised.

Summary

These changes:

- ◆ Clarify the diversion to a community spouse who is receiving waiver services.
- ◆ Update the statewide average costs and charges for medical facilities.
- ◆ Delete the hospital-based Medicare-certified skilled nursing facility level and non-hospital-based Medicare-certified skilled facility level from the levels of care listed for disposition of Miller trusts. People receiving specialized care are now allowing to use the average cost of that care as the threshold for releasing income from the trust.
- ◆ Add references to the forms needed when approving an ICF/MR.
- ◆ Clarify bed-hold payments for nursing facility residents receiving skilled care.

Effective Date

July 1, 2004

Material Superseded

Remove the following pages from Employees' Manual, Title 8, Chapter I, and destroy them:

<u>Page</u>	<u>Date</u>
23	December 17, 2002
33	June 20, 2002
43	May 27, 2003
44	July 3, 2001
45	December 16, 2003
46	May 27, 2003
47, 48	December 16, 2003
50	July 3, 2001
71, 73, 75, 76	May 27, 2003

Additional Information

Refer questions about this general letter to your income maintenance supervisor 2.



STATE OF IOWA

THOMAS J. VILSACK, GOVERNOR
SALLY J. PEDERSON, LT. GOVERNOR

DEPARTMENT OF HUMAN SERVICES
KEVIN W. CONCANNON, DIRECTOR

October 15, 2004

GENERAL LETTER NO. 8-I-48

ISSUED BY: Bureau of Financial Support Programs,
Division of Financial, Health and Work Supports

SUBJECT: Employees' Manual, Title 8, Chapter I, *MEDICAL INSTITUTIONS*, Contents (page 2), revised; Contents (page 3), new; pages 1, 8, 9, 10, 21, 22, 56, 71 through 74, 76, and 81 through 84, revised; and pages 85 through 94, new.

Summary

This chapter is revised to add procedures for income maintenance workers to process facilities through the Individualized Services Information System (ISIS).

Effective Date

October 15, 2004

Material Superseded

Remove the following pages from Employees' Manual, Title 8, Chapter I, and destroy them:

<u>Page</u>	<u>Date</u>
Contents (page 2)	July 3, 2001
1, 8-10	July 3, 2001
21, 22	November 7, 2000
56	July 3, 2001
71	July 6, 2004
72	May 27, 2003
73	July 6, 2004
74	December 17, 2002
76	July 6, 2004
81-84	July 3, 2001

Additional Information

Refer questions about this general letter to your income maintenance supervisor 2.



STATE OF IOWA

THOMAS J. VILSACK, GOVERNOR
SALLY J. PEDERSON, LT. GOVERNOR

DEPARTMENT OF HUMAN SERVICES
KEVIN W. CONCANNON, DIRECTOR

December 17, 2004

GENERAL LETTER NO. 8-I-49

ISSUED BY: Bureau of Financial Support Programs,
Division of Financial, Health and Work Supports

SUBJECT: Employees' Manual, Title 8, Chapter I, *MEDICAL INSTITUTIONS*, pages 34
through 39 and 47 through 59, revised.

Summary

This chapter is revised to:

- ◆ Add the 2005 minimum monthly maintenance needs allowance of \$2,377.50.
- ◆ Update the dollar amounts in client participation examples for cost-of-living adjustment.
- ◆ Revise the treatment of the Medicare buy-in refund to be counted as nonrecurring lump sum.

Effective Date

January 1, 2005

Material Superseded

Remove the following pages from Employees' Manual, Title 8, Chapter I, and destroy them:

<u>Page</u>	<u>Date</u>
34, 35, 36	December 16, 2003
37, 38	March 23, 2004
39	December 16, 2003
47, 48	July 6, 2004
49	December 16, 2003
50	July 6, 2004
51-53	December 16, 2003
54	December 17, 2002
55	December 16, 2003
56	October 15, 2004
57-59	July 3, 2001

Additional Information

Refer questions about this general letter to your income maintenance supervisor 2.



STATE OF IOWA

THOMAS J. VILSACK, GOVERNOR
SALLY J. PEDERSON, LT. GOVERNOR

DEPARTMENT OF HUMAN SERVICES
KEVIN W. CONCANNON, DIRECTOR

July 8, 2005

GENERAL LETTER NO. 8-I-50

ISSUED BY: Bureau of Financial Support Programs, Division of Financial, Health and Work Supports

SUBJECT: Employees' Manual, Title 8, Chapter I, *MEDICAL INSTITUTIONS*, Contents (pages 1 and 2), revised; pages 2, 4, 8 through 12, 23, 40a, 41, 42, 43, 45, 46, 54, 55, 56, 64, 66, 67, 71 through 74, 78 through 91, and 94, revised; and page 40b, new.

Summary

This chapter is revised to:

- ◆ Update the deductibles and coinsurance amounts for hospital and skilled care.
- ◆ Clarify policy on SSI benefit changes for a person who enters a medical institution.
- ◆ Clarify how client participation is affected by Medicare coverage of skilled care.
- ◆ Update the statewide average charges for care used in determining income payments from a Medical Assistance Income Trust and update the trust examples.
- ◆ Update amounts in the Medical Assistance Income Trust examples.
- ◆ Clarify special processing procedures for facility claims that are over two years old.
- ◆ Refer workers to ISIS "My Reports" for rates in ICF/MR.
- ◆ Update the ISIS enrollment process for facilities.
- ◆ Change references to "IFMC" to "the IME Medical Services Unit," except in regard to ISIS milestones and response options.
- ◆ Change the name of form 470-3924 to *Request for ISIS Changes*.

Effective Date

July 1, 2005

Material Superseded

Remove the following pages from Employees' Manual, Title 8, Chapter I, and destroy them:

<u>Page</u>	<u>Date</u>
Contents (page 1)	November 7, 2000
Contents (page 2)	October 15, 2004
2	December 16, 2003
4	May 27, 2003
8, 9, 10	October 15, 2004
11	July 3, 2001
12	12
23	July 6, 2004
40a	May 27, 2003
41	July 3, 2001
42	November 7, 2000
43, 45, 46	July 6, 2004
54, 55, 56	December 17, 2004
64, 66, 67	July 3, 2001
71-74	October 15, 2004
78-80	July 3, 2001
81-91, 94	October 15, 2004

Additional Information

Refer questions about this general letter to your area income maintenance supervisor 2.



STATE OF IOWA

THOMAS J. VILSACK, GOVERNOR
SALLY J. PEDERSON, LT. GOVERNOR

DEPARTMENT OF HUMAN SERVICES
KEVIN W. CONCANNON, DIRECTOR

December 16, 2005

GENERAL LETTER NO. 8-I-51

ISSUED BY: Bureau of Medical Supports, Division of Financial, Health and Work Supports

SUBJECT: Employees' Manual, Title 8, Chapter I, **MEDICAL INSTITUTIONS**, Contents (page 2), revised; pages 2, 3, 4a, 7, 8, 15, 22, 23, 31, 34 through 39, 45, 47 through 55, 68, and 84, revised.

Summary

This chapter is revised to:

- ◆ Update the Medicare deductibles and coinsurance amounts.
- ◆ Update the minimum monthly maintenance needs allowance for a community spouse and examples of spousal situations.
- ◆ Add that excluded interest and dividends are countable in determining client participation.
- ◆ Clarify use of the 470-0042, *Case Activity Report*, in determining the entity that will determine the level of care.
- ◆ Remove some language under the section, "Who Is Not Eligible." Medicaid coverage is now available to people ages 22 through 64 who enter a state mental health institute.
- ◆ Remove references for client participation of MHI residents, including the section, "Client Participation for QMBs in MHI."
- ◆ Delete references on treatment of a spouse entering a facility before September 1989.
- ◆ Correct a cross-reference.
- ◆ Revise ISIS responses.

Effective Date

The maintenance needs allowance for a community spouse is effective January 1, 2006.

All other revisions are effective upon receipt.

Material Superseded

Remove the following pages from Employees' Manual, Title 8, Chapter I, and destroy them:

<u>Page</u>	<u>Date</u>
Contents (page 2)	July 8, 2005
2	July 8, 2005
3	November 3, 1998
4a, 4b, 7	May 27, 2003
8	July 8, 2005
15	July 2, 1996
22	October 15, 2004
23	July 8, 2005
31	July 3, 2001
34-39	December 17, 2004
45	July 8, 2005
47-53	December 17, 2004
54, 55	July 8, 2005
68-70	July 3, 2001
84	July 8, 2005

Additional Information

Refer questions about this general letter to your area income maintenance administrator.



STATE OF IOWA

THOMAS J. VILSACK, GOVERNOR
SALLY J. PEDERSON, LT. GOVERNOR

DEPARTMENT OF HUMAN SERVICES
KEVIN W. CONCANNON, DIRECTOR

July 14, 2006

GENERAL LETTER NO. 8-I-52

ISSUED BY: Bureau of Medical Supports
Division of Financial, Health and Work Supports

SUBJECT: Employees' Manual, Title 8, Chapter I, *MEDICAL INSTITUTIONS*, Contents (page 1), revised; and pages 13, 14, 24, 26 through 29, 31, 32, 35 through 40, 40b, 43, 45, 46, 49, and 51 through 57, revised.

Summary

This chapter is revised to:

- ◆ Increase the ongoing personal needs allowance to \$50 for people residing in nursing facilities and to revise examples.
- ◆ Update the statewide average charges to private-pay residents and to revise examples. The statewide average charges are used to determine the payments to be made to a beneficiary of a medical assistance income trust.
- ◆ Update the standard used for computing the maintenance needs of other dependents living with the community spouse based on the new poverty levels released in the Federal Register.
- ◆ Clarify vendor adjustments.
- ◆ Correct examples for client participation and payments made at lower level of care.

Effective Date

The personal needs allowance increase and statewide average charges are effective July 1, 2006.

All other revisions are effective upon receipt.

Material Superseded

Remove the following pages from Employees' Manual, Title 8, Chapter I, and destroy them:

<u>Page</u>	<u>Date</u>
Contents (page 1)	July 8 2005
13	July 2, 1996
14	January 6, 1998
24	December 5, 2000
26	November 7, 2000
27-29	July 2, 1996
31	December 16, 2005
32	June 20, 2000
35-39	December 16, 2005
40	May 27, 2003
40b, 43	July 8, 2005
45	December 16, 2005
46	July 8, 2005
49, 51-55	December 16, 2005
56	July 8, 2005
57	December 17, 2004

Additional Information

Refer questions about this general letter to your area income maintenance administrator.



STATE OF IOWA

THOMAS J. VILSACK, GOVERNOR
SALLY J. PEDERSON, LT. GOVERNOR

DEPARTMENT OF HUMAN SERVICES
KEVIN W. CONCANNON, DIRECTOR

July 28, 2006

GENERAL LETTER NO. 8-I-53

ISSUED BY: Bureau of Medical Supports,
Division of Financial, Health and Work Supports

SUBJECT: Employees' Manual, Title 8, Chapter I, *MEDICAL INSTITUTIONS*, page 43,
revised.

Summary

This chapter is revised to correct the dates for which the statewide average charges to private pay residents apply.

Effective Date

Upon receipt.

Material Superseded

Remove from Employees' Manual, Title 8, Chapter I, page 43, dated July 14, 2006, and destroy it.

Additional Information

Refer questions about this general letter to your area income maintenance administrator.



February 16, 2007

GENERAL LETTER NO. 8-I-54

ISSUED BY: Bureau of Medical Supports,
Division of Financial, Health and Work Supports

SUBJECT: Employees' Manual, Title 8, Chapter I, *MEDICAL INSTITUTIONS*, Contents (pages 1, 2, and 3), revised; pages 2, 7 through 11, 23, 28 through 40, 40a, 40b, 42, 43, 45, 47 through 56, 71, 72, and 91, revised; and pages 40c, 95, and 96, new.

Summary

This chapter is revised to:

- ◆ Update the Medicare deductibles and coinsurance amounts.
- ◆ Update the minimum monthly maintenance needs allowance for a community spouse.
- ◆ Implement the process used for level of care determinations.
- ◆ Clarify the level of care appeal process.
- ◆ Add a link for the worker to reference third party payments when the client receives nursing facility insurance benefits.
- ◆ Clarify VA benefits for people admitted to nursing facilities.
- ◆ Clarify deductions allowed when calculating client participation.
- ◆ Clarify that as long as income is deposited into the Miller trust before the end of the month received, the person can qualify for Medicaid for that month.
- ◆ Correct information on Medicare buy-in for people with medical assistance income trusts.
- ◆ Clarify how additional income affects client participation.
- ◆ Revise the instructions for approving retroactive facility payment. Workers no longer need to pend a case in ABC before requesting that the facility stay be added to ISIS.
- ◆ Add information on what happens when ownership of a facility changes.

Effective Date

The Medicare deductibles and coinsurance amounts and the new minimum monthly maintenance needs allowance are effective January 1, 2007.

All other revisions are effective upon receipt.

Material Superseded

Remove the following pages from Employees' Manual, Title 8, Chapter I, and destroy them:

<u>Page</u>	<u>Date</u>
Contents (p. 1)	July 14, 2006
Contents (p.2)	December 16, 2005
Contents (p. 3)	October 15, 2004
2, 7, 8	December 16, 2005
9-11	July 8, 2005
23	December 16, 2005
28, 29	July 14, 2006
30	July 2, 1996
31, 32	July 14, 2006
33	July 6, 2004
34	December 16, 2005
35-40	July 14, 2006
40a	July 8, 2005
40b	July 14, 2006
42	July 8, 2005
43	July 28, 2006
45	July 14, 2006
47, 48	December 16, 2004
49	July 14, 2006
50	December 16, 2005
51-56	July 14, 2006
71, 72, 91	July 8, 2005

Additional Information

Refer questions about this general letter to your area income maintenance administrator.



STATE OF IOWA

CHESTER J. CULVER, GOVERNOR
PATTY JUDGE, LT. GOVERNOR

DEPARTMENT OF HUMAN SERVICES
KEVIN W. CONCANNON, DIRECTOR

July 20, 2007

GENERAL LETTER NO. 8-I-55

ISSUED BY: Bureau of Medical Supports, Division of Financial, Health and Work Supports

SUBJECT: Employees' Manual, Title 8, Chapter I, *MEDICAL INSTITUTIONS*, Contents (pages 2 and 3), revised; pages 3, 4, 4a, 5, 8, 22, 23, 24, 27, 28, 29, 37, 38, 40, 40a, 40b, 43 through 54, 55, 61, 62, and 82, revised; and pages 54a, 62a, and 62b, new.

Summary

This chapter is revised to:

- ◆ Clarify eligibility policy for medical institutions and the 300% group.
- ◆ Add a reminder to discuss waiver programs with Iowa residents in out of state facilities.
- ◆ Clarify treatment of benefits from insurance policies for institutional care.
- ◆ Revise the personal needs allowance for ICF/MRs, NF/Ns, and PMICs from \$30 to \$50.
- ◆ Revise treatment of \$90 veteran's reduced improved pension to exempt for eligibility and benefit calculation.
- ◆ Add a federal code reference for deduction of personal needs in the month of entry.
- ◆ Update the dependent allowance for nursing facility residents to reflect 2007 federal poverty level.
- ◆ Clarify unmet medical deductions allowed when calculating client participation.
- ◆ Update the statewide average charges for medical facility care.
- ◆ Revise treatment of income and calculation of client participation for people with medical assistance income trusts.
- ◆ Clarify how discharge affects client participation.

Effective Date

The new dependent allowance for nursing facility residents was effective January 1, 2007. Revised personal needs allowance, treatment of \$90 veteran's reduced improved pension, and treatment of trust income was effective July 1, 2007.

All other revisions are effective upon receipt.

Material Superseded

Remove the following pages from Employees' Manual, Title 8, Chapter I, and destroy them:

<u>Page</u>	<u>Date</u>
Contents (pages 2 and 3)	December 16, 2005
3	December 16, 2005
4	July 8, 2005
4a	December 16, 2005
5	December 5, 2000
8	February 16, 2007
22	December 16, 2005
23	February 16, 2007
24, 27	July 14, 2006
28, 29, 37, 38, 40	February 16, 2007
40a-40c	February 16, 2007
43	February 16, 2007
44	July 6, 2004
45	February 16, 2007
46	July 14, 2006
47-55	February 16, 2007
61, 62	July 3, 2001
82	July 8, 2005

Additional Information

Refer questions about this general letter to your area income maintenance administrator.



December 14, 2007

GENERAL LETTER NO. 8-I-56

ISSUED BY: Bureau of Medical Supports,
Division of Financial, Health and Work Supports

SUBJECT: Employees' Manual, Title 8, Chapter I, *MEDICAL INSTITUTIONS*, pages 2, 28, 29, 33 through 38, 40, 44, 48 through 54, 55, 62, and 62a, revised.

Summary

This chapter is revised to:

- ◆ Update the Medicare deductibles and coinsurance amounts.
- ◆ Update the minimum monthly maintenance needs allowance for a community spouse to \$2,610.
- ◆ Clarify treatment of Veterans Affairs income.
- ◆ Clarify unmet medical needs deductions from client participation.
- ◆ Clarify payment allowed from a medical assistance income trust for the needs of the beneficiary and update examples.

Effective Date

The Medicare deductibles and coinsurance amounts, the new minimum monthly maintenance needs allowance, and the medical assistance income trust payment examples are effective January 1, 2008. All other revisions are effective upon receipt.

Material Superseded

Remove the following pages from Employees' Manual, Title 8, Chapter I, and destroy them:

<u>Page</u>	<u>Date</u>
2	February 16, 2007
28, 29	July 20, 2007
33-36	February 16, 2007
37, 38, 40, 44, 48-54, 55, 62, 62a	July 20, 2007

Additional Information

Refer questions about this general letter to your area income maintenance administrator.



STATE OF IOWA

CHESTER J. CULVER, GOVERNOR
PATTY JUDGE, LT. GOVERNOR

DEPARTMENT OF HUMAN SERVICES
KEVIN W. CONCANNON, DIRECTOR

March 14, 2008

GENERAL LETTER NO. 8-I-57

ISSUED BY: Bureau of Medical Supports, Division of Financial, Health and Work Supports

SUBJECT: Employees' Manual, Title 8, Chapter I, *MEDICAL INSTITUTIONS*, pages 37 and 38, revised.

Summary

This chapter is revised to update the dependent allowance for nursing facility residents to reflect 2008 federal poverty level.

Effective Date

The new dependent allowance for nursing facility residents was effective March 1, 2008.

All other revisions are effective upon receipt.

Material Superseded

Remove the following pages from Employees' Manual, Title 8, Chapter I, and destroy them:

<u>Page</u>	<u>Date</u>
37, 38	December 14, 2007

Additional Information

Refer questions about this general letter to your area income maintenance administrator.



June 13, 2008

GENERAL LETTER NO. 8-I-58

ISSUED BY: Bureau of Medical Supports,
Division of Financial, Health and work Supports

SUBJECT: Employees' Manual, Title 8, Chapter I, *MEDICAL INSTITUTIONS*, pages 27,
28, 43, and 46, revised.

Summary

This chapter is revised to:

- ◆ Include intermediate care facilities for the mentally retarded (ICF/MRs) and nursing facilities for persons with mental illness (NF/MIs), as well as nursing facilities (NFs), in the issuance of a supplemental state payment for facility residents with countable income of less than the \$50 personal needs allowance.
- ◆ Update the statewide average charges for medical facility care used for medical assistance income trusts.

Effective Date

July 1, 2008

Material Superseded

Remove the following pages from Employees' Manual, Title 8 Chapter I, and destroy them:

<u>Page</u>	<u>Date</u>
27	July 20, 2007
28	December 14, 2007
43, 46	July 20, 2007

Additional Information

Refer questions about this general letter to your area income maintenance administrator.



STATE OF IOWA

CHESTER J. CULVER, GOVERNOR
PATTY JUDGE, LT. GOVERNOR

DEPARTMENT OF HUMAN SERVICES
EUGENE I. GESSOW, DIRECTOR

October 31, 2008

GENERAL LETTER NO. 8-I-59

ISSUED BY: Bureau of Medical Supports,
Division of Financial, Health and Work Supports

SUBJECT: Employees' Manual, Title 8, Chapter I, **MEDICAL INSTITUTIONS**, Title page, revised; Contents (pages 1 and 2), revised; pages 1 through 96, revised; and pages 97, 98 and 99, new.

Summary

This chapter is revised and reformatted to:

- ◆ Add procedures for direct deposit of a state-funded payment for the difference between the \$50 personal needs allowance and the Medicaid member's income.
- ◆ Clarify policy about income available for client participation. The \$25 annual fee paid to child support recovery is not considered income. There is a \$90 income exemption from Veterans pensions paid to veterans who do not have a spouse or dependent. The Department had previously given a separate \$90 VA personal needs allowance to veteran's residing in facilities who did not receive their full VA pension.
- ◆ Add the new section, "Residents of the Iowa Veterans Home." This section clarifies policy about veterans who do not have a spouse or dependent and those who do have a spouse or dependent.
- ◆ Add clarification to the section, "Income and Resources of Married Persons," when applying for Programs for All-Inclusive Care for the Elderly (PACE) services.
- ◆ Change references throughout chapter from "client," "recipient," or "consumer" to "member" for consistency.

Effective Date

September 1, 2008

Material Superseded

Remove the entire Chapter I from Employees' Manual, Title 8, and destroy it. This includes the following pages:

<u>Page</u>	<u>Date</u>
Title (page)	July 2, 1996
Contents (page 1)	February 16, 2007
Contents (pages 2, 3)	July 20, 2007
1	October 15, 2004
2	December 14, 2007
3, 4, 4a, 5	July 20, 2007
6	December 14, 1999
7	February 16, 2007
8	July 20, 2007
9-11	February 16, 2007
12	July 8, 2005
13, 14	July 14, 2006
15	December 16, 2005
16	July 2, 1996
17	January 8, 1998
18	December 5, 2000
19	March 25, 1997
20	July 2, 1996
21	October 15, 2004
22-24	July 20, 2007
25	November 7, 2000
26	July 14, 2006
26a	June 1, 1999
27, 28	June 13, 2008
29	December 14, 2007
30-32	February 16, 2007
33-36	December 14, 2007
37, 38	March 14, 2008
39	February 16, 2007
40	December 14, 2007
40a, 40b	July 20, 2007
40c	February 16, 2007
41	July 8, 2005
42	February 16, 2007
43	June 13, 2008
44	December 14, 2007
45	July 20, 2007
46	June 13, 2008
47	July 20, 2007
48-54	December 14, 2007

54a	July 20, 2007
55	December 14, 2007
56	February 16, 2007
57	July 14, 2006
58, 59	December 17, 2004
60	July 3, 2001
61	July 20, 2007
62, 62a	December 14, 2007
62b	July 20, 2007
63	July 3, 2001
64	July 8, 2005
65	July 3, 2001
66, 67	July 8, 2005
68-70	December 16, 2005
71, 72	February 16, 2007
73, 74	July 8, 2005
75	July 6, 2004
76	October 15, 2004
77	July 3, 2001
78-81	July 8, 2005
82	July 20, 2007
83	July 8, 2005
84	December 16, 2005
85-90	July 8, 2005
91	February 16, 2007
92, 93	October 15, 2004
94	July 8, 2005
95, 96	February 16, 2007

Additional Information

Refer questions about this general letter to your area income maintenance administrator.



STATE OF IOWA

CHESTER J. CULVER, GOVERNOR
PATTY JUDGE, LT. GOVERNOR

DEPARTMENT OF HUMAN SERVICES
EUGENE I. GESSOW, DIRECTOR

December 19, 2008

GENERAL LETTER NO. 8-I-60

ISSUED BY: Bureau of Medical Supports,
Division of Financial, Health and Work Supports

SUBJECT: Employees' Manual, Title 8, Chapter I, **MEDICAL INSTITUTIONS**,
pages 2, 35, 38, 40 through 43, 54, 55, 56, 59, 60, 62, 69, 70, and 71,
revised; and pages 21 through 34, 36, 37, 39, 44 through 53, 57, 58,
61, 63 through 68, and 72 through 99, reissued to correct a printing
error.

Summary

This chapter is revised to update the:

- ◆ Medicare deductibles and coinsurance amounts.
- ◆ Minimum monthly maintenance needs allowance for a community spouse.
- ◆ Medical Assistance Income Trust payment examples with 300% of the SSI income limit.

Effective Date

January 1, 2009

Material Superseded

Remove the following pages from Employees' Manual, Title 8, Chapter I, and destroy them:

<u>Page</u>	<u>Date</u>
2, 21-99	October 31, 2008

Additional Information

Refer questions about this general letter to your area income maintenance administrator.



June 19, 2009

GENERAL LETTER NO. 8-I-61

ISSUED BY: Bureau of Medical Supports,
Division of Financial, Health and Work Supports

SUBJECT: Employees' Manual, Title 8, Chapter I, **MEDICAL INSTITUTIONS**,
Contents (pages 1 and 2), revised; pages 7 through 10, 23, 25, 26, 41,
42, 47, 49 through 60, 63 through 66, 73, 74, 88, 89, 90, and 92,
revised; and pages 10a, 26a, 66a, 66b, and 74a, new.

Summary

This chapter is revised to:

- ◆ Update the statewide average charges to private-pay residents and revise examples. The statewide average charges are used to determine the payments to be made to a beneficiary of a medical assistance income trust.
- ◆ Add the section, "Client Participation for QMBs in an MHI."
- ◆ Add eligibility and client participation examples for children in PMICs.
- ◆ Clarify the Medicare buy-in policy and add examples.
- ◆ Change references of "IFMC" to "Medical Services" in regards to ISIS milestone and response options.

Effective Date

July 1, 2009

Material Superseded

Remove the following pages from Employees' Manual, Title 8, Chapter I, and destroy them:

<u>Page</u>	<u>Date</u>
Contents (pages 1 and 2)	October 31, 2008
7-10, 23, 25, 26	October 31, 2008
41, 42	December 19, 2008
47, 49-53	October 31, 2008

54-56	December 19, 2008
57, 58	October 31, 2008
59	December 19, 2008
63-66, 73, 74, 88, 89, 90, 92	October 31, 2008

Additional Information

Refer questions about this general letter to your area income maintenance administrator.



STATE OF IOWA

CHESTER J. CULVER, GOVERNOR
PATTY JUDGE, LT. GOVERNOR

DEPARTMENT OF HUMAN SERVICES
CHARLES J. KROGMEIER, DIRECTOR

January 1, 2010

GENERAL LETTER NO. 8-I-62

ISSUED BY: Division of Adult, Children, and Family Services

SUBJECT: Employees' Manual, Title 8, Chapter I, **MEDICAL INSTITUTIONS**, Contents (page 2), revised; pages 2, 8, 46, 52, 53, 71, 73, 74, and 82 through 85, revised.

Summary

This chapter is revised to reflect the following:

- ◆ The increase in the Part A hospital care deductible for 2010 to \$1,100 for the first 60 days.
- ◆ The increase in Part A hospital care daily coinsurance for 2010 for days 61 through 90 to \$275.
- ◆ The increase in the Part A hospital care coinsurance for 2010 lifetime reserve days to \$550.
- ◆ The increase in the Part A skilled level of care the daily coinsurance for 2010 to \$137.50 for days 21 through 100.
- ◆ The Medicare Part B premium amount for 2010 is the same as 2008 for persons who have the Medicare Part B premium deducted from their Social Security check. The following will pay a higher Medicare Part B premium of \$110.50:
 - New Medicare Part B enrollees,
 - Higher income individual who are required to pay an income-related surcharge in addition to the monthly premium,
 - Individuals who do not have their Part B premiums withheld from their social security check, and
 - Individuals for whom Medicaid pays their Medicare Part B premium.
- ◆ Clarify that Medicaid does not pay the Medicare copayment or deductible for Qualified Medicare Beneficiaries (QMB) residing in a Mental Health Institution (MHI) who are over age 21 or who are under age 65.
- ◆ Remove the section on client participation for QMBs in an MHI.
- ◆ Correct a Code of Federal Regulations (CFR) reference for Eligibility of Blind or Disabled Children in Medical Institutions.

- ◆ Remove reference to long-term care insurance payment retained is income to a member.
- ◆ Add form 470-4678, *MAIT Facility Worksheet*, and form 470-4679, *MAIT Waiver Worksheet*.
- ◆ Add form 470-0373, *Voluntary Contribution Agreement*.

Effective Date

January 1, 2010, Medicare premiums, deductibles, and coinsurance are increased.

All other changes are effective upon receipt.

Material Superseded

This material replaces the following pages from Employees' Manual, Title 8, Chapter I:

<u>Page</u>	<u>Date</u>
Contents (page 2)	June 19, 2009
2	December 19, 2008
8	June 19, 2009
46	October 31, 2009
52, 53	June 19, 2009
71	December 12, 2008
73, 74, 74a	June 19, 2009
82-85	October 31, 2009

Additional Information

Refer questions about this general letter to your area income maintenance administrator.



CHESTER J. CULVER, GOVERNOR
PATTY JUDGE, LT. GOVERNOR

DEPARTMENT OF HUMAN SERVICES
CHARLES J. KROGMEIER, DIRECTOR

May 7, 2010

GENERAL LETTER NO. 8-I-63

ISSUED BY: Bureau of Financial, Health, and Work Supports
Division of Adult, Children, and Family Services

SUBJECT: Employees' Manual, Title 8, Chapter I, MEDICAL INSTITUTIONS,
Contents (page 1), revised; and pages 26a, 27 through 38, 41, 44, 63,
and 66b, revised.

Summary

This chapter is revised to:

- Clarify policy on deductions from client participation for the maintenance needs of a spouse and dependents.
Add that medical expenses incurred during a transfer of assets penalty period are not allowable as an unmet medical deduction from client participation.
Remove references to form 470-0041, Adjustment to Facility Payment, and replace them with references to form 470-3924, Request for ISIS Changes.

Effective Date

Medical expenses incurred during a transfer of assets penalty period are not allowable as an unmet medical deduction from client participation effective March 1, 2010.

All other revisions are effective upon receipt.

Material Superseded

This material replaces the following pages from Employees' Manual, Title 8, Chapter I:

Table with 2 columns: Page and Date. Rows include Contents (page 1) dated June 19, 2009; 26a dated June 19, 2008; 27-30, 36, 37 dated October 31, 2008; 38 dated December 19, 2008; 41 dated June 19, 2009; 44 dated October 31, 2008; 63, 66b dated June 19, 2009.

Additional Information

Refer questions about this general letter to your area income maintenance administrator.



STATE OF IOWA

CHESTER J. CULVER, GOVERNOR
PATTY JUDGE, LT. GOVERNOR

DEPARTMENT OF HUMAN SERVICES
CHARLES J. KROGMEIER, DIRECTOR

August 27, 2010

GENERAL LETTER NO. 8-I-64

ISSUED BY: Bureau of Financial, Health, and Work Supports
Division of Adult, Children, and Family Services

SUBJECT: Employees' Manual, Title 8, Chapter I, **MEDICAL INSTITUTIONS**,
Contents (page 2), revised; and pages 5, 10, 13, 39, 47, 48, 49, 52, 53,
60, and 71 through 76, revised.

Summary

This chapter is revised to:

- ◆ Update the statewide average charges to private-pay residents and revise examples. The statewide average charges are used to determine the payments to be made to a beneficiary of a medical assistance income trust.
- ◆ Clarify policy on:
 - Medicaid eligibility for persons in an MHI.
 - Client participation for skilled care.
- ◆ Remove references to QMB paying for Medicare Part and Part B premiums, coinsurance and deductibles when a person is receiving MHI care.
- ◆ Correct typographical errors.

Effective Date

The state wide average charges are effective July 1, 2010.
All other revisions are effective upon receipt.

Material Superseded

This material replaces the following pages from Employees' Manual, Title 8, Chapter I:

<u>Page</u>	<u>Date</u>
Contents (page 2)	January 1, 2010
5	October 31, 2008
10	June 19, 2009
13, 39	October 31, 2008
47	June 19, 2009
48	October 31, 2008
49	June 19, 2009

52, 53	January 1, 2010
60	June 19, 2009
71	January 1, 2010
72	October 31, 2008
73, 74	January 1, 2010
75, 76	October 31, 2008

Additional Information

Refer questions about this general letter to your area income maintenance administrator.



Iowa Department of Human Services

Terry E. Branstad
Governor

Kim Reynolds
Lt. Governor

Charles M. Palmer
Director

August 26, 2011

GENERAL LETTER NO. 8-I-65

ISSUED BY: Bureau of Financial, Health and Work Supports
Division of Adult, Children and Family Services

SUBJECT: Employees' Manual, Title 8, Chapter I, **MEDICAL INSTITUTIONS**, Title page, revised; Contents (page 2), revised; and pages 31, 49, 54, 65, 66, 66a, and 83, revised.

Summary

Chapter 8-I is revised to:

- ◆ Update the policy regarding the refund of Medicare premiums due to buy-in. There will no longer be a separate calculation for members with a community spouse or dependent. Medicare premium refunds will be considered a lump-sum payment and counted as income in the month they are received.
- ◆ Update to statewide average charge for care for July 1, 2011, through June 30, 2012.
- ◆ Remove wording that eligibility determination for waiver cases and PACE cases with a Miller trust cannot be automated. These cases no longer need to be manually entered.

Effective Date

July 1, 2011

Material Superseded

This material replaces the following pages from Employees' Manual, Title 8, Chapter I:

<u>Page</u>	<u>Date</u>
Title page	October 31, 2008
Contents (page 2)	August 27, 2010
31	May 7, 2010
49	August 27, 2010
54, 65, 66, 66a	June 19, 2009
66b	May 7, 2010
83	January 1, 2010

Additional Information

Refer questions about this general letter to your area income maintenance administrator.



Iowa Department of Human Services

Terry E. Branstad
Governor

Kim Reynolds
Lt. Governor

Charles M. Palmer
Director

January 20, 2012

GENERAL LETTER NO. 8-I-66

ISSUED BY: Bureau of Financial, Health and Work Supports
Division of Adult, Children and Family Services

SUBJECT: Employees' Manual, Title 8, Chapter I, **MEDICAL INSTITUTIONS**,
pages 22 through 26, 32, 34, 38, 40 through 44, 52, 54 through 60, 62,
65, 66, 69, 70, 71, 79, 87, and 99, revised.

Summary

Chapter 8-I is revised to:

- ◆ Update the minimum monthly maintenance needs allowance (MMMNA) amounts and the medical institution income limits for 2012.
- ◆ Update references to form 470-0371 (MA-2139), *Facility Card*. This form has been renamed *Facility Notice of Client Participation*.
- ◆ Clarify unmet medical deduction policy. Expenses are allowed as a deduction before a person is institutionalized as long as the expenses were not incurred during a period of ineligibility.
- ◆ Add links to 8-E, Projecting Income, under client participation.

Effective Date

January 1, 2012

Material Superseded

This material replaces the following pages from Employees' Manual, Title 8, Chapter I:

<u>Page</u>	<u>Date</u>
22	October 31, 2008
23	June 19, 2009
24	October 31, 2008
25, 26	June 19, 2009
32, 34, 38	May 7, 2010
40	December 19, 2008
41	May 7, 2010
42	June 19, 2009
43	December 19, 2008
44	May 7, 2010
52	August 27, 2010
54	August 26, 2011

55-59	June 19, 2009
60	August 27, 2010
62	December 19, 2008
65, 66	August 26, 2011
69, 70	December 19, 2008
71	August 27, 2010
79, 87, 99	October 31, 2008

Additional Information

Refer questions about this general letter to your area income maintenance administrator.



Iowa Department of Human Services

Terry E. Branstad
Governor

Kim Reynolds
Lt. Governor

Charles M. Palmer
Director

July 20, 2012

GENERAL LETTER NO. 8-I-67

ISSUED BY: Bureau of Financial, Health and Work Supports
Division of Adult, Children and Family Services

SUBJECT: Employees' Manual, Title 8, Chapter I, **MEDICAL INSTITUTIONS**,
Contents (page 2), revised; and pages 2, 5, 6, 10, 12, 31, 32, 33, 41,
42, 49, 50, 53, 70, 77, 79, 80, 81, 84, and 86 through 92, revised.

Summary

Chapter 8-I is revised to:

- ◆ Update the federal poverty level in regards to the allowance for other dependents and the examples using this figure.
- ◆ Update the statewide average charges for care for state fiscal year 2013 (July 1, 2012 through June 30, 2013).
- ◆ Update the policy on payment for reserved bed days. Effective December 1, 2009, Medicaid no longer pays to reserve a bed in a nursing facility for a person at NF/ICF level of care.
- ◆ Update legal references for reserved bed days.
- ◆ Reflect the change in name of ICFs/MR to "intermediate care facility for persons with an intellectual disability" (ICF/ID), as mandated by 2012 Iowa Acts, Senate File 2247.
- ◆ Remove the enrollment process for ISIS. See 14-M, *ISIS USER GUIDE*.

Effective Date

July 1, 2012

Material Superseded

This material replaces the following pages from Employees' Manual, Title 8, Chapter I:

<u>Page</u>	<u>Date</u>
Contents (p. 2)	August 26, 2011
2	January 1, 2010
5	August 27, 2010
6	October 31, 2008
10	August 27, 2010
12	October 31, 2008

31	August 26, 2011
32	January 20, 2012
33	May 7, 2010
41, 42	January 20, 2012
49	August 26, 2011
50	June 19, 2009
53	August 27, 2010
70	January 20, 2012
77	October 31, 2008
79	January 20, 2012
80, 81	October 31, 2008
84	January 1, 2010
86	October 31, 2008
87	January 20, 2012
88-90	June 19, 2009
91	October 31, 2008
92	June 19, 2009
93-98	October 31, 2008
99	January 20, 2012

Additional Information

Refer questions about this general letter to your area income maintenance administrator.



Iowa Department of Human Services

Terry E. Branstad
Governor

Kim Reynolds
Lt. Governor

Charles M. Palmer
Director

July 19, 2013

GENERAL LETTER NO. 8-I-68

ISSUED BY: Bureau of Financial, Health and Work Supports
Division of Adult, Children and Family Services

SUBJECT: Employees' Manual, Title 8, Chapter I, **MEDICAL INSTITUTIONS**,
pages 38, 40 through 43, 49, 52, and 54 through 62, revised.

Summary

Chapter 8-I is revised to:

- ◆ Update the minimum monthly maintenance needs allowance (MMMNA) amounts and revise the examples.
- ◆ Update the statewide average charges to private-pay residents and revise the examples. The statewide average charges are used to determine the payments made to a beneficiary of a medical assistance income trust.

Effective Date

The minimum monthly maintenance needs allowance (MMMNA) amounts were effective January 1, 2013.

The statewide average charges to private-pay residents were effective July 1, 2013.

Material Superseded

This material replaces the following pages from Employees' Manual, Title 8, Chapter I:

<u>Page</u>	<u>Date</u>
38, 40	January 20, 2012
41, 42	July 20, 2012
43	January 20, 2012
49	July 20, 2012
52, 54-60	January 20, 2012
61	October 31, 2008
62	January 20, 2012

Additional Information

Refer questions about this general letter to your area income maintenance administrator.



Iowa Department of Human Services

Terry E. Branstad
Governor

Kim Reynolds
Lt. Governor

Charles M. Palmer
Director

January 17, 2014

GENERAL LETTER NO. 8-I-69

ISSUED BY: Bureau of Financial, Health and Work Supports
Division of Adult, Children and Family Services

SUBJECT: Employees' Manual, Title 8, Chapter I, **MEDICAL INSTITUTIONS**,
pages 2, 22, 38, 40 through 43, 54, 55, 56, 58 through 62, 65, 66, 69,
70, 71, 79, 88, and 92, revised.

Summary

Chapter 8-I is revised to:

- ◆ Update the Medicare deductible and coinsurance for hospital and skilled level of care for 2014.
- ◆ Remove information on form 470-0371, *Facility Notice of Client Participation* (facility card). Facilities will be notified of a member's client participation amount through the Iowa Medicaid Provider Access (IMPA) portal.
- ◆ Provide the 2014 minimum monthly maintenance needs allowance (MMMNA) and update examples.

Effective Date

The Iowa Medicaid Provider Access (IMPA) portal are effective upon receipt.

The Medicare deductible and coinsurance and the MMMNA are effective January 1, 2014.

Material Superseded

This material replaces the following pages from Employees' Manual, Title 8, Chapter I:

<u>Page</u>	<u>Date</u>
2	July 20, 2012
22	January 20, 2012
38, 40-43, 54-56, 58-62	July 19, 2013
65, 66, 69	January 20, 2012
70	July 20, 2012
71	January 20, 2012
79, 88, 92	July 20, 2012

Additional Information

Refer questions about this general letter to your area income maintenance administrator.



Iowa Department of Human Services

Terry E. Branstad
Governor

Kim Reynolds
Lt. Governor

Charles M. Palmer
Director

July 25, 2014

GENERAL LETTER NO. 8-I-70

ISSUED BY: Bureau of Financial, Health and Work Supports
Division of Adult, Children and Family Services

SUBJECT: Employees' Manual, Title 8, Chapter I, **MEDICAL INSTITUTIONS**,
Contents (page 2), revised; and pages 41, 42, 48, 49, 50, 52, 53, 55,
and 56, revised.

Summary

Chapter 8-I is revised to:

- ◆ Update the 150 percent of the monthly federal poverty level for a family of two and revise the examples. This amount is used to determine the maintenance needs of the other dependents living with the community spouse.
- ◆ Update the manual to reflect a new legislative change on Medical Assistance Income Trusts (MAITs). Before July 1, 2014, the statewide average charge to determine if a MAIT would allow the person to be income-eligible for Medicaid was used. Beginning on July 1, 2014, use 125 percent of the statewide average charge for care to determine if a person with this type of trust qualifies for facility payment.
- ◆ Update the amounts that represent 125 percent of the statewide average charges to private-pay residents and revise the examples. Use these amounts to determine the payments to be made to a beneficiary of a medical assistance income trust.

Effective Date

The allowance for other dependents is effective April 1, 2014.

The legislative change to use 125 percent of the statewide average charge for care and the amounts that represent these charges are effective July 1, 2014.

Material Superseded

This material replaces the following pages from Employees' Manual, Title 8, Chapter I:

<u>Page</u>	<u>Date</u>
Contents (page 2)	July 20, 2012
41, 42	January 17, 2014
48	August 27, 2010
49	July 19, 2013
50	July 20, 2012
52	July 19, 2013
53	July 20, 2012
55, 56	January 17, 2014

Additional Information

Refer questions about this general letter to your area income maintenance administrator.



Iowa Department of Human Services

Terry E. Branstad
Governor

Kim Reynolds
Lt. Governor

Charles M. Palmer
Director

January 2, 2015

GENERAL LETTER NO. 8-I-71

ISSUED BY: Bureau of Financial, Health and Work Supports
Division of Adult, Children and Family Services

SUBJECT: Employees' Manual, Title 8, Chapter I, **MEDICAL INSTITUTIONS**,
Contents (page 1), revised; and pages 2, 9, 10a, 11 through 17, 38, 40
through 43, 49, 54, 55, 56, 59, 60, 62, 65, 66, 69, 70, 71, and 77,
revised; and page 10b, new.

Summary

Chapter 8-I is revised to:

- ◆ Update the Medicare deductible and coinsurance for hospital and skilled level of care for 2015.
- ◆ Provide the 2015 minimum monthly maintenance needs allowance (MMMNA) and update examples.
- ◆ Clarify the amount to use when the member has a Medical Assistance Income Trust (MAIT) and is receiving specialized care.

Effective Date

The Medicare deductibles and coinsurance and the MMMNA are effective January 1, 2015.

Material Superseded

This material replaces the following pages from Employees' Manual, Title 8, Chapter I:

<u>Page</u>	<u>Date</u>
Contents (page 1)	May 7, 2010
2	January 17, 2014
9, 10a	June 19, 2009
11	October 31, 2008
12	July 20, 2012
13	August 27, 2010
14-17	October 31, 2008
38, 40	January 17, 2014
41, 42	July 25, 2014
43	January 17, 2014
49	July 25, 2014

54	January 17, 2014
55, 56	July 25, 2014
59, 60, 62, 65, 66, 69-71	January 17, 2014
77	July 20, 2012

Additional Information

Refer questions about this general letter to your area income maintenance administrator.



Iowa Department of Human Services

Terry E. Branstad
Governor

Kim Reynolds
Lt. Governor

Charles M. Palmer
Director

May 1, 2015

GENERAL LETTER NO. 8-I-72

ISSUED BY: Bureau of Financial, Health and Work Supports
Division of Adult, Children and Family Services

SUBJECT: Employees' Manual, Title 8, Chapter I, **MEDICAL INSTITUTIONS**,
pages 41 and 42, revised.

Summary

Chapter 8-I is revised to update the 150 percent of the monthly federal poverty level for a family of two and revise the examples. Use this amount to determine the maintenance needs of the other dependents living with the community spouse.

Effective Date

March 1, 2015

Material Superseded

This material replaces the following pages from Employees' Manual, Title 8, Chapter I:

<u>Page</u>	<u>Date</u>
41, 42	January 2, 2015

Additional Information

Refer questions about this general letter to your area income maintenance administrator.



Iowa Department of Human Services

Terry E. Branstad
Governor

Kim Reynolds
Lt. Governor

Charles M. Palmer
Director

June 26, 2015

GENERAL LETTER NO. 8-I-73

ISSUED BY: Bureau of Financial, Health and Work Supports
Division of Adult, Children and Family Services

SUBJECT: Employees' Manual, Title 8, Chapter I, **MEDICAL INSTITUTIONS**,
pages 49, 50, 52, 53, 55, 59, and 60, revised.

Summary

Chapter 8-I is revised to:

- ◆ Update the amounts that represent 125 percent of the statewide average charges. Use these amounts to determine if a person with a medical assistance income trust (MAIT) qualifies for facility payment.
- ◆ Revise examples.
- ◆ Clarify some language.

Effective Date

July 1, 2015

Material Superseded

This material replaces the following pages from Employees' Manual, Title 8, Chapter I:

<u>Page</u>	<u>Date</u>
49	January 2, 2015
50, 52, 53	July 25, 2014
55, 59, 60	January 2, 2015

Additional Information

Refer questions about this general letter to your area income maintenance administrator.



Iowa Department of Human Services

Terry E. Branstad
Governor

Kim Reynolds
Lt. Governor

Charles M. Palmer
Director

March 4, 2016

GENERAL LETTER NO. 8-I-74

ISSUED BY: Bureau of Financial, Health and Work Supports
Division of Adult, Children and Family Services

SUBJECT: Employees' Manual, Title 8, Chapter I, **MEDICAL INSTITUTIONS**,
pages 41 and 42, revised.

Summary

Chapter 8-I is revised to update the 150 percent of the monthly federal poverty level for a family of 2 and revise the examples. This amount is used to determine the maintenance needs of the other dependents living with the community spouse.

Effective Date

March 1, 2016

Material Superseded

This material replaces the following pages from Employees' Manual, Title 8, Chapter I:

<u>Page</u>	<u>Date</u>
41, 42	May 1, 2015

Additional Information

Refer questions about this general letter to your area income maintenance administrator.



Iowa Department of Human Services

Terry E. Branstad
Governor

Kim Reynolds
Lt. Governor

Charles M. Palmer
Director

July 8, 2016

GENERAL LETTER NO. 8-I-75

ISSUED BY: Bureau of Financial, Health and Work Supports
Division of Adult, Children and Family Services

SUBJECT: Employees' Manual, Title 8, Chapter I, **MEDICAL INSTITUTIONS**,
pages 49 and 52, revised.

Summary

Chapter 8-I is revised to update the amounts that represent 125 percent of the statewide average charges and revise examples. Use these amounts to determine if a person with a medical assistance income trust (MAIT) qualifies for facility payment.

Effective Date

July 1, 2016

Material Superseded

This material replaces the following pages from Employees' Manual, Title 8, Chapter I:

<u>Page</u>	<u>Date</u>
49, 52	June 26, 2015

Additional Information

Refer questions about this general letter to your area income maintenance administrator.



Iowa Department of Human Services

Terry E. Branstad
Governor

Kim Reynolds
Lt. Governor

Charles M. Palmer
Director

February 17, 2017

GENERAL LETTER NO. 8-I-76

ISSUED BY: Bureau of Financial, Health and Work Supports
Division of Adult, Children and Family Services

SUBJECT: Employees' Manual, Title 8, Chapter I, **MEDICAL INSTITUTIONS**,
pages 54, 56, 69, 70, and 71, revised.

Summary

Chapter 8-I is revised to update examples to reflect the SSI income limit for 2017 and the 300 percent income limit amount.

Effective Date

January 1, 2017

Material Superseded

This material replaces the following pages from Employees' Manual, Title 8, Chapter I:

<u>Page</u>	<u>Date</u>
54, 56, 69-71	January 2, 2015

Additional Information

Refer questions about this general letter to your area income maintenance administrator.



Iowa Department of Human Services

Kim Reynolds
Governor

Adam Gregg
Lt. Governor

Jerry R. Foxhoven
Director

November 17, 2017

GENERAL LETTER NO. 8-I-77

ISSUED BY: Bureau of Financial, Health and Work Supports
Division of Adult, Children and Family Services

SUBJECT: Employees' Manual, Title 8, Chapter I, **Medical Institutions**, pages 2, 38, 40 through 43, 49, 52, 55, 59, 60, 62, 65, and 66, revised.

Summary

Chapter 8-I is revised to:

- ◆ Remove the rates of coinsurance and deductibles for Medicare coverage of hospital care and skilled level of care.
- ◆ Update the minimum monthly maintenance needs allowance (MMMNA) for a community spouse and revise examples. This allowance is used to determine the maintenance needs of the community spouse by subtracting the spouse's gross income from the MMMNA. The amount for 2016 remained the same as 2015 at \$2,980.50. The amount for 2017 changed to \$3,022.50.
- ◆ Update the amounts that represent 125 percent of the statewide average charges and revise examples. Use these amounts to determine if a person with a medical assistance income trust (MAIT) qualifies for facility payment.

Effective Date

July 1, 2017. MMMNA is effective January 1, 2017.

Material Superseded

This material replaces the following pages from Employees' Manual, Title 8, Chapter I:

<u>Page</u>	<u>Date</u>
2, 38, 40	January 2, 2015
41, 42	March 4, 2016
43	January 2, 2015
49, 52	July 8, 2016
55, 59, 60	June 26, 2015
62, 65, 66	January 2, 2015

Additional Information

Refer questions about this general letter to your area income maintenance administrator.



Iowa Department of Human Services

Kim Reynolds
Governor

Gregg Adam
Lt. Governor

Jerry R. Foxhoven
Director

February 16, 2018

GENERAL LETTER NO. 8-I-78

ISSUED BY: Bureau of Financial, Health and Work Supports
Division of Adult, Children and Family Services

SUBJECT: Employees' Manual, Title 8, Chapter I, *Medical Institutions*, pages 38, 40 through 43, 54 through 60, 62, 65, 66, 69, 70, and 71, revised.

Summary

Chapter 8-I is revised to provide the 2018 minimum monthly maintenance needs allowance (MMMNA) and update examples.

Effective Date

January 1, 2018

Material Superseded

This material replaces the following pages from Employees' Manual, Title 8, Chapter I:

<u>Page</u>	<u>Date</u>
38, 40-43	November 17, 2017
54	February 17, 2017
55	November 17, 2017
56	February 17, 2017
57	July 19, 2013
58	January 17, 2014
59, 60, 62, 65, 66	November 17, 2017
69-71	February 17, 2017

Additional Information

Refer questions about this general letter to your area income maintenance administrator.



Iowa Department of Human Services

Kim Reynolds
Governor

Adam Gregg
Lt. Governor

Jerry R. Foxhoven
Director

July 20, 2018

GENERAL LETTER NO. 8-I-79

ISSUED BY: Bureau of Financial, Health and Work Supports
Division of Adult, Children and Family Services

SUBJECT: Employees' Manual, Title 8, Chapter I, **Medical Institutions**, pages 41, 42, 49, 52, 53, 59, and 60, revised.

Summary

Chapter 8-I is revised to:

- ◆ Update the federal poverty level that is used to determine the allowance for other dependents in the client participation calculation and revise examples.
- ◆ Update the amounts that represent 125 percent of the statewide average charges and revise examples. Use these amounts to determine if a person with a medical assistance income trust (MAIT) qualifies for facility payment.

Effective Date

The allowance for other dependents is effective March 1, 2018.

All other changes are effective July 1, 2018.

Material Superseded

This material replaces the following pages from Employees' Manual, Title 8, Chapter I:

<u>Page</u>	<u>Date</u>
41, 42	February 16, 2018
49, 52	November 17, 2017
53	June 26, 2015
59, 60	February 16, 2018

Additional Information

Refer questions about this general letter to your area income maintenance administrator.

May 10, 2019

GENERAL LETTER NO. 8-I-80

ISSUED BY: Iowa Medicaid Enterprise

SUBJECT: Employees' Manual, Title 8, Chapter I, ***Medical Institutions***, Title page, revised; and pages 38, 40 through 43, 54, 55, 57 through 60, 62, 65, 66, 69, 70, 71, and 73, revised.

Summary

Chapter 8-I is revised to:

- ◆ Provide the 2019 minimum monthly maintenance needs allowance (MMMNA) and update examples.
- ◆ Update retroactive eligibility language to reference the change in the definition of "retroactive period" listed in 8-A, *Administration*.

Effective Date

July 1, 2018, for changing the definition of retroactive period.
January 1, 2019, for COLA changes.

Material Superseded

This material replaces the following pages from Employees' Manual, Title 8, Chapter I:

<u>Page</u>	<u>Date</u>
Title page	August 26, 2011
38, 40	February 16, 2018
41, 42	July 20, 2018
43, 54, 55, 57, 58	February 16, 2018
59, 60	July 20, 2018
62, 65, 66, 69-71	February 16, 2018
73	August 27, 2010

Additional Information

Refer questions about this general letter to your area income maintenance administrator.

September 4, 2020

GENERAL LETTER NO. 8-I-81

ISSUED BY: Iowa Medicaid Enterprise

SUBJECT: Employees' Manual, Title 8, Chapter I, **Medical Institutions**, Contents pages 1 and 2, pages 1, 2, 3, 4, 5-6, 7, 8, 9, 10, 10a, 11-14, 18-21, 22, 23, 25, 26, 27, 30, 31-33, 35-37, 38, 41-43, 44, 48, 49, 50, 51, 52, 53, 54, 55, 56, 57-60, 61, 62, 64, 65, 66, 67, 68, 69-72, 74, 76, 77, 78, 79, 80, 81, 82, 83, 84, 85, 86, 87, 88, 89, 90, 91, revised; 92 and 93 removed.

Summary

Chapter 8-I is revised to:

- ◆ Update the manual to use the correct language and definitions as provided in rules based on the changes with the Affordable Care Act (ACA).
- ◆ Update legal references and form names.
- ◆ Revise manual to bring policy and procedures up-to-date.
- ◆ Update the federal poverty level that is used to determine the allowance for other dependents in the client participation calculation and revise examples.
- ◆ Update the amounts that represent 125 percent of the statewide average charges for care in facilities and revise examples. Use these amounts to determine if a person with a medical assistance income trust (MAIT) qualifies for facility payment.

Effective Date

Immediately

Material Superseded

Remove the following pages from Employees' Manual, Title 8, Chapter I, and destroy them:

<u>Page</u>	<u>Date</u>
Contents page 1	January 2, 2015
Contents page 2	July 25, 2014
1	October 31, 2008
2	November 17, 2017
3, 4	October 31, 2008
5, 6	July 20, 2012
7	June 19, 2009
8	January 1, 2010
9	January 2, 2015
10	July 20, 2012
10a	January 2, 2015
11-14	January 2, 2015
18-21	October 31, 2008
22	January 17, 2014
23	January 20, 2012
25, 26	January 20, 2012
27	May 7, 2010
30	May 7, 2010
31-33	July 20, 2012
35-37	May 7, 2010
38	May 10, 2019
40-43	May 10, 2019
44	January 20, 2012
48	July 25, 2014
49	July 20, 2018
50	June 26, 2015
51	June 19, 2009
52, 53	July 20, 2018
54, 55	May 10, 2019
56	February 16, 2018
57-60	May 10, 2019
61	January 17, 2014
62	May 10, 2019
64	June 19, 2009
65, 66	May 10, 2019
67, 68	October 31, 2008
69-72	May 10, 2019
74	May 10, 2019
76, 77	August 27, 2010

78	January 2, 2015
79	October 31, 2008
80	January 17, 2014
81, 82	July 20, 2012
83	January 1, 2010
84	August 26, 2011
85	July 20, 2012
86	January 1, 2010
87, 88	July 20, 2012
89	January 17, 2014
90-92	July 20, 2012
93	January 17, 2014

Additional Information

Refer questions about this general letter to your area income maintenance administrator.

August 6, 2021

GENERAL LETTER NO. 8-I-82

ISSUED BY: Iowa Medicaid Enterprise

SUBJECT: Employees' Manual, Title 8, Chapter I, **Medical Institutions**, Contents Page 2, page 1, 9, 10, 10a, 46, 48 and 49, 63, 66a, 67, 78, 79, 80, 85-87, 90, and 91, revised.

Summary

Chapter 8-I is revised to replace references to 'Individualized Services Information System' and 'ISIS' to 'Institutional and Waiver Authorization and Narrative System' and 'IoWANS'.

Effective Date

January 21, 2021

Material Superseded

Remove the following pages from Employees' Manual, Title 8, Chapter I, and destroy them:

<u>Page</u>	<u>Date</u>
Contents Page 2	September 4, 2020
1, 9, 10	September 4, 2020
10a	September 4, 2020
46	January 1, 2010
48 and 49	September 4, 2020
63	May 7, 2010
66a	August 26, 2011
67, 78, 79, 80, 85-87, 90	September 4, 2020
91	January 17, 2014

Additional Information

Refer questions about this general letter to your area income maintenance administrator.

May 6, 2022

GENERAL LETTER NO. 8-I-83

ISSUED BY: Iowa Medicaid Enterprise

SUBJECT: Employees' Manual, Title 8, Chapter I, **Medical Institutions**, Contents 1, Contents 2, 34, 38, 40-43, 51-62, 63, 64-66, 69, 70, 72, revised.

Summary

This chapter is revised to provide the 2022 Minimum Monthly Maintenance Needs Allowance (MMMNA) and update examples.

Effective Date

January 1, 2022.

Material Superseded

Remove the following pages from Employees' Manual, Title 8, Chapter I, and destroy them:

<u>Page</u>	<u>Date</u>
Contents 1	September 4, 2020
Contents 2	August 6, 2021
34	January 20, 2012
38, 40-43, 51-62	September 4, 2020
63	August 6, 2021
64-66, 69, 70, 72	September 4, 2020

Additional Information

Refer questions about this general letter to your area income maintenance administrator.

June 17, 2022

GENERAL LETTER NO. 8-I-84

ISSUED BY: Iowa Medicaid Enterprise

SUBJECT: Employees' Manual, Title 8, Chapter I, **Medical Institutions**, page 49, revised.

Summary

This chapter is revised to update the amounts that represent 125 percent of the statewide average charges for care in facilities and revise examples.

Effective Date

July 1, 2022.

Material Superseded

Remove the following pages from Employees' Manual, Title 8, Chapter I, and destroy them:

<u>Page</u>	<u>Date</u>
49	August 6, 2021

Additional Information

Refer questions about this general letter to your area income maintenance administrator.

April 14, 2023

GENERAL LETTER NO. 8-I-85

ISSUED BY: Iowa Medicaid

SUBJECT: Employees' Manual, Title 8, Chapter I, **Medical Institutions**, Title Page, Contents I and 2, 1, 2-8, 9 and 10, revised; 10a, removed; 10b, 11-14, 15-17, 18-23, 24, 25 and 26, revised; 26a, removed; 27, 28 and 29, 30-33, 34, 35-37, 38, 39, 40-43, 44, 45, 46, 47, 48, 49, 50, 51-66, revised; 66a, removed; 67, 68, 69-72, 73, 74, revised; 75, 76 and 77, 78-80, 81-84, 85-87, 88 and 89, 90 and 91, removed.

Summary

This chapter is revised to provide the 2023 minimum monthly maintenance needs allowance (MMMNA) in the amount of \$3,715.50 and update examples, and to update style and formatting throughout.

Effective Date

January 1, 2023.

Material Superseded

Remove the following pages from Employees' Manual, Title 8, Chapter I, and destroy them:

<u>Page</u>	<u>Date</u>
Title Page	May 10, 2019
Contents I and 2	May 6, 2022
1	August 6, 2021
2-8	September 4, 2020
9 and 10	August 6, 2021
10a	August 6, 2021
10b	January 2, 2015
11-14	September 4, 2020
15-17	January 2, 2015
18-23	September 4, 2020
24	January 20, 2012
25 and 26	September 4, 2020
26a	May 7, 2010
27	September 4, 2020
28 and 29	May 7, 2010
30-33	September 4, 2020
34	May 6, 2022
35-37	September 4, 2020
38	May 6, 2022
39	August 27, 2010
40-43	May 6, 2022
44	September 4, 2020
45	October 31, 2008
46	August 6, 2021
47	August 27, 2010
48	August 6, 2021
49	June 17, 2022
50	September 4, 2020
51-66	May 6, 2022

66a	August 6, 2021
67	August 6, 2021
68	September 4, 2020
69-72	May 6, 2022
73	August 27, 2010
74	September 4, 2020
75	August 27, 2010
76 and 77	September 4, 2020
78-80	August 6, 2021
81-84	September 4, 2020
85-87	August 6, 2021
88 and 89	September 4, 2020
90 and 91	August 6, 2021

Additional Information

Refer questions about this general letter to your area income maintenance administrator.

April 5, 2024

GENERAL LETTER NO. 8-I-86

ISSUED BY: Iowa Medicaid

SUBJECT: Employees' Manual, Title 8, Chapter I, **Medical Institutions**, 29, 32-36, 41 and 42, 45 and 46, 48-52, 54-56, 58 and 59, revised.

Summary

This chapter is revised to

- Provide the 2024 minimum monthly maintenance needs allowance (MMMNA) in the amount of \$3,853.50 and update examples.
- Update the amounts that represent 125 percent of the statewide average charges for care in facilities. Use these amounts to determine if a person with a medical assistance income trust (MAIT) qualifies for facility payment.

Effective Date

January 1, 2024.

Material Superseded

Remove the following pages from Employees' Manual, Title 8, Chapter I, and destroy them:

<u>Page</u>	<u>Date</u>
29, 32-36, 41 and 42, 45 and 46, 48-52, 54-56, 58 and 59	April 14, 2023

Additional Information

Refer questions about this general letter to your area income maintenance administrator.

November 1, 2024

GENERAL LETTER NO. 8-I-87

ISSUED BY: Iowa Medicaid Enterprise

SUBJECT: Employees' Manual, Title 8, Chapter I, **Medical Institutions**, Title Page, Contents 1 and 2, 1-9, 10, 11-28, 29, 30 and 31, 32-36, 37-40, 41 and 42, 43 and 44, 45 and 46, 47, 48-52, 53, 54-56, 57, 58 and 59, 60-74, revised; 75-85, new.

Summary

This chapter is revised to

- Update the amounts that represent 125 percent of the statewide average charges for care in facilities. Use these amounts to determine if a person with a medical assistance income trust (MAIT) qualifies for facility payment.
- Also update the 150% FPL for other Dependents to \$2,555

Effective Date

July 1, 2024.

Material Superseded

Remove the following pages from Employees' Manual, Title 8, Chapter I, and destroy them:

<u>Page</u>	<u>Date</u>
Title Page	April 14, 2023
Contents 1 and 2	April 14, 2023
1-9	April 14, 2023
10	January 2, 2015
11-28	April 14, 2023
29	April 5, 2024
30 and 31	April 14, 2023
32-36	April 5, 2024
37-40	April 14, 2023
41 and 42	April 5, 2024
43 and 44	April 14, 2023
45 and 46	April 5, 2024
47	April 14, 2023
48-52	April 5, 2024
53	April 14, 2023
54-56	April 5, 2024

57	April 14, 2023
58 and 59	April 5, 2024
60-74	April 14, 2023

Additional Information

Refer questions about this general letter to your area income maintenance administrator.