National Indian Health Board NATIONAL TRIBAL COVID-19 RESPONSE

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Section 1135 Medicaid Waiver Authority – Iowa

Background

When the President of the United States declares a disaster or emergency under the Stafford Act or National Emergencies Act and the Department of Health and Human Services (HHS) Secretary declares a public health emergency under Section 319 of the Public Health Service Act, the HHS Secretary is authorized to use Section 1135 of the Social Security Act to modify certain Medicare, Medicaid, and Children's Health Insurance Program (CHIP) requirements in order to allow states to respond to the emergency.

On March 25, 2020, the Centers for Medicare & Medicaid Services (CMS) approved Iowa's Section 1135 waiver, accessible here.

On May 5, 2020, CMS approved Iowa's 2nd Section 1135 waiver, accessible here.

On August 7, 2020, CMS approved Iowa's 3rd Section 1135 waiver, accessible here.

This one-pager is meant to be a general guide and is not an exhaustive description of the waiver.

What does Iowa's Section 1135 waiver look like?

Provider Enrollment

CMS authorized Iowa to expedite the enrollment of out of state providers who are not currently enrolled in the state's Medicaid program. Iowa may continue to use existing procedures to enroll out of state providers who are already in the state's Medicaid program (with one small exception, CMS is waiving the limit on claims within a 180 day period).

CMS has also authorized providers not currently enrolled in Medicare or another state's Medicaid agency to temporarily enroll in Iowa's programs. To make this possible, Iowa will be allowed to waive application fee requirements, criminal background checks, site visits, and state licensure requirements. However, the program provider must maintain an out of state license. To these temporarily authorized providers, Iowa must cease payment within six months of the emergency declaration being lifted, unless the providers submit an application for full participation in the program and are approved.

CMS has also authorized the state's request to temporarily cease revalidation of providers who are located in Iowa or otherwise impacted by the emergency.



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Allowing services in alternative settings

Pursuant to the waiver, Iowa may allow services to be provided in unlicensed settings, such as a temporary shelter, when a provider's facility is not available. The state has to make a reasonable assessment that the facility meets minimum standards to ensure the health, safety, and comfort of beneficiaries and staff. The placing facility is responsible for determining reimbursements for the temporary setting.

Pre-Admission Screening and Annual Resident Review

Level 1 and 2 assessments can be waived for 30 days and all new admissions may be treated like exempt hospital discharges. While CMS is not setting a time frame for the completion of Resident Reviews, reviews should be completed on new admissions having a mental illness or intellectual disability diagnosis as soon as resources are available.

1915(i) HCBS State Plan Option Required Timeframe for Initial Evaluations and Assessments, and Reevaluations and Reassessments

Iowa can modify the deadline for conducting initial evaluations of eligibility and initial assessments of need to establish a care plan. These activities no longer have to be completed before the start of care. Iowa may also modify the deadline for annual redetermination of eligibility and the annual reassessment of need. Services will continue under re-evaluation and reassessment can occur.

Use of Legally Responsible Individuals to Render Personal Care Services

Iowa will be approved to temporarily allow payment for personal care services by legally responsible individuals, provided that the state makes a reasonable assessment that the caregiver is capable of rendering such services.

How does this affect Tribes?

If a state seeks a Section 1135 waiver, Tribes are impacted by its provisions. Iowa has one federally recognized Tribe, Sac & Fox Tribe of the Mississippi in Iowa.

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Medicaid Disaster State Plan Amendment - Iowa

Background

The Medicaid State Plan is the foundational document for a state's Medicaid program; it sets the rules for eligibility, benefits, and payments. Before a state can participate in the Medicaid program, it must file a state plan with the Centers for Medicare & Medicaid Services (CMS). There are certain requirements that a state plan must adhere to and if a state wishes to deviate from these statutory requirements, they must seek a waiver (such as a Section 1115 or Section 1915 waiver) of the usual Medicaid rules. When a state wants to amendment their State Plan, they have to file what is called a "State Plan Amendment" (SPA).

On May 18, 2020, Iowa was approved for an Emergency State Plan Amendment in order to respond to COVID-19. You can find it <u>here</u>.

On July 20, 2020, Iowa was approved for a 2nd SPA. You can find it here.

On July 24, 2020, Iowa was approved for a 3rd SPA. You can find it here.

All approvals are for the duration of the federally declared COVID-19 emergency, unless stated otherwise.

COVID-19 Testing

Iowa is amending their State Plan to allow for the coverage of COVID-19 testing for uninsured individuals.

Premiums and Cost Shares

Iowa is amending their State Plan to allow for the suspension of premiums and cost shares for all beneficiaries.

State Residency

Iowa is amending their State Plan to be allowed to consider individuals who have evacuated from the state due to the public health emergency and who intend to return to continue being considered state residents for the purpose of receiving Medicaid.

Presumptive Eligibility

Iowa is amending their State Plan to allow for presumptive eligibility for:

- Individuals Eligible for Not Receiving Cash Assistance
- Individuals in Institutions Eligible Under a Special Income Level
- Medicaid for Employed People with Disabilities



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Telehealth

Iowa is amending its State Plan to allow for the delivery of case management, habilitation services, and monthly monitoring for recipients of Home and Community Based Supports.

Home and Community Based Supports

The services below may be provided to recipients of Home and Community Based Supports and may be delivered by a guardian or other legally responsible person, provided they possess the skills to do so and are not considered tasks that are ordinarily performed by the person.

Home-Delivered Meals

Iowa is amending their State Plan to allow for the delivery of meals to recipients of Home and Community Based Services. These meals must be provided by a state certified provider.

Companion Services

Iowa is amending their State Plan to allow for reimbursement for non-medical companion care for recipients of Home and Community Based Services. This service must be included in the beneficiary's service plan and monitored by the case manager.

Homemaker Services

Iowa is amending their State Plan to allow for reimbursement for Homemaker Services for recipients of Home and Community Based Services. These services include essential shopping, limited house cleaning, and meal preparation. The case manager is responsible for monitoring this service.

Nursing Facility Fees

Iowa is amending their State Plan to allow for an additional \$300 per day for nursing facility COVID relief effective March 13, 2020. The amount reflects an estimated fee-for-service portion from the beginning of the national emergency through the FFY September 30, 2021.

Dental Provider Fees

Iowa is amending their State Plan to allow a temporary enhanced payment to dental providers to help address facility and safety upgrades. The Department will reprocess special payment of claims received with dates of service between May 1 and August 31, 2020

Ouestions?

Please contact Christopher Chavis, Policy Analyst, at 202-750-3402 or at cchavis@nihb.org.