



# STATE OF IOWA

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

DEPARTMENT OF HUMAN SERVICES  
CHARLES J. KROGMEIER, DIRECTOR

## INFORMATIONAL LETTER 878

**DATE:** January 26, 2010  
**TO:** Iowa Medicaid Nursing Facilities  
**FROM:** Iowa Department of Human Services, Iowa Medicaid Enterprise  
**RE:** Repayment Plan Requests

Recently, the Centers for Medicare and Medicaid Services approved a State Plan Amendment that allowed Iowa Medicaid Enterprise (IME) to release the nursing facility case-mix adjusted rates for July 1, 2009 and October 1, 2009. Also, the IME will be implementing a rate change effective December 1, 2009 in accordance with Executive Order 19 to reduce payments by 5% and changes minimum occupancy requirements. The IME understands that some nursing facilities will experience a decrease in their rates. It is not the intent of the IME to cause undue hardship on any provider.

Therefore, Iowa Medicaid Enterprise is offering to allow facilities experiencing a rate decrease to develop a repayment plan for the credit balance put on your account due to repricing claims at the lower rate for the months of July through December 2009.

To request your repayment plan, please e-mail [costaudit@dhs.state.ia.us](mailto:costaudit@dhs.state.ia.us) by Wednesday, February 3, 2010. The request should include your provider number, amount owed, RA number showing the amount owed, and the installment amount and dates that Iowa Medicaid Enterprise can expect payment, which cannot be later than the 20<sup>th</sup> of any given month.

The repayment plan must be paid-in-full by **June 30, 2010**. **Checks** must be received by the due dates specified in an approved repayment plan. If any individual payment is not made to Iowa Medicaid Enterprise in the timeframe specified in an approved repayment plan **an adjustment to recoup all of the unpaid balance will be made at that time**

Checks should be made payable to the **Iowa Department of Human Services and sent to:**

**Iowa Medicaid Enterprise  
Attn: Provider Cost Audit and Rate Setting Unit  
P.O. Box 36450  
Des Moines, IA 50315**