

# Agenda

## Council on Human Services

Wednesday, June 14, 2017  
10:00 am to 2:00 pm  
Hoover State Office Building  
First Floor Conference Room  
1305 E. Walnut Street  
Des Moines, IA

### Agenda topics

10:00 AM

Rules:

Nancy Freudenberg

**R-1.** Amendments to Chapter 75, Medicaid. Updates the maximum Medicaid rate for ICF/IDs which are used to determine the disposition of income of a Medical Assistance Income Trust (MAIT).

**R-2.** Amendments to Chapter 75, Medicaid. Decreases the statewide average cost of nursing facility services to a private-pay person. Updates the average charges for nursing facilities, Psychiatric Medical Institutions for Children, and Mental Health Institutions which are used to determine the disposition of the income of a Medical Assistance Income Trust (MAIT).

**R-3.** Amendments to Chapters 77, 78, and 83, Medicaid. Implements changes related to MCO implementation and provides technical clarification. Updates multiple references to comprehensive functional assessment tool under waiver programs. Updates references to service worker assessment under waivers. Adds definitions for integrated health home care coordinator to the CMH waiver.

**R-4.** Amendments to Chapters 108, 112, 113, 114, 116, 117, 156, and 202. Revises outdated terminology and regulations. Aligns rules with child care regulations and provides needed revisions for contractor requirements for pre-service training for the recruitment, retention, training and support contracts effective July 1, 2017.

**R-5.** Amendments to Chapter 142, Interstate Compact for the Placement of Children. Implements the National Electronic Interstate Compact Enterprise (NEICE) system.

**R-6.** Amendments to Chapter 79, Medicaid. Implements cost containment strategy to eliminate Primary Care Physician rate increases. This amendment is being filed double emergency and is associated with the Notice of Intended Action N-2 found below.

**R-7.** Amendments to Chapter 79, Medicaid. Implements the cost containment strategy to adjust the inpatient diagnostic related group (DRG) cost outlier threshold formula to be the greater of two times the statewide average DRG payment for that case, or the hospital's individual DRG payment for that case plus \$75,000. The current formula is the greater of two times the statewide average DRG payment for the case, or the hospital's individual DRG payment for the case plus \$16,000. This amendment is being filed double emergency and is associated with the Notice of Intended Action **N-3** found below.

**R-8.** Amendments to Chapter 79, Medicaid. Re-implements the cost containment strategy to adjust Medicaid reimbursement rates for physician services rendered in facility settings (e.g., hospitals), by applying a "site of service" differential to reflect the difference between the cost of physician services when provided in a health facility setting and the cost of physician services when provided in a physician's office. Note that the strategy in this amendment was originally legislatively mandated in 2011 as a directed/mandated cost-containment strategy at that time. However, the Legislature "nullified" the original mandate in 2012, based on provider complaints about reduced payments in facility settings. This amendment is being filed double emergency and is associated with the Notice of Intended Action **N-4** found below.

**R-9.** Amendments to Chapter 79, Medicaid. Implements the cost containment strategy to adjust the Iowa Medicaid anesthesia conversion factor to be equal to the calendar year 2017 Medicare anesthesia conversion factor, as adjusted for the state, and converted to a per minute amount. Each January 1, thereafter, the Department shall apply the applicable Medicare anesthesia conversion factor adjusted for the state, and converted to a per-minute amount. This amendment is being filed double emergency and is associated with the Notice of Intended Action **N-5** found below.

**R-10.** Amendments to Chapters 79 and 80, Medicaid. Implements the cost containment strategy to ensure that total reimbursement for Medicare Part A and B crossover claims is limited to the Medicaid reimbursement rate. This amendment is being filed double emergency and is associated with the Notice of Intended Action **N-6** found below.

**R-11.** Amendments to Chapters 7 and 87, Family Planning. Implements a new state family planning program. Amends appeals rules to remove references to the old state-funded family planning program. This amendment is being filed double emergency and is associated with the Notice of Intended Action **N-7** found below.

The following amendments to rules are presented as Notices of Intended Action for review by the Council:

**N-1.** Amendments to Chapter 83, Medicaid. Allows HCBS waiver members who are inpatient in a hospital or medical institution for 31 to 120 days to resume waiver services upon discharge without having to reapply and going back on the waiver list.

**N-2.** Amendments to Chapter 79, Medicaid. Implements cost containment strategy to eliminate Primary Care Physician rate increases. This amendment is being filed specifically for public comment on the double emergency rule **R-6** as shown above.

**N-3.** Amendments to Chapter 79, Medicaid. Implements the cost containment strategy to adjust the inpatient diagnostic related group (DRG) cost outlier threshold formula to be the greater of two times the statewide average DRG payment for that case, or the hospital's individual DRG payment for that case plus \$75,000. The current formula is the greater of two times the statewide average DRG payment for the case, or the hospital's individual DRG payment for the case plus \$16,000. This amendment is being filed specifically for public comment on the double emergency rule **R-7** as shown above.

**N-4.** Amendments to Chapter 79, Medicaid. Re-implements the cost containment strategy to adjust Medicaid reimbursement rates for physician services rendered in facility settings (e.g., hospitals), by applying a "site of service" differential to reflect the difference between the cost of physician services when provided in a health facility setting and the cost of physician services when provided in a physician's office. Note that the strategy in this amendment was originally legislatively mandated in 2011 as a directed/mandated cost-containment strategy at that time. However, the Legislature "nullified" the original mandate in 2012, based on provider complaints about reduced payments in facility settings. This amendment is being filed specifically for public comment on the double emergency rule **R-8** as shown above.

**N-5.** Amendments to Chapter 79, Medicaid. Implements the cost containment strategy to adjust the Iowa Medicaid anesthesia conversion factor to be equal to the calendar year 2017 Medicare anesthesia conversion factor, as adjusted for the state, and converted to a per minute amount. Each January 1, thereafter, the Department shall apply the applicable Medicare anesthesia conversion factor adjusted for the state, and converted to a per-minute amount. This amendment is being filed specifically for public comment on the double emergency rule **R-9** as shown above.

**N-6.** Amendments to Chapters 79 and 80, Medicaid. Implements the cost containment strategy to ensure that total reimbursement for Medicare Part A and B crossover claims is limited to the Medicaid reimbursement rate. This amendment is being filed specifically for public comment on the double emergency rule **R-10** as shown above.

**N-7.** Amendments to Chapters 7 and 87, Family Planning. Implements a new state family planning program. Amends appeals rules to remove references to the old state-funded family planning program. This amendment is being filed specifically for public comment on the double emergency rule **R-11** as shown above.

<b>10:30 AM</b>	<b>Approval of Minutes (May 10, 2017)</b>	All
<b>10:35 AM</b>	<b>Update on Managed Care</b>	Mikki Stier
<b>11:00 AM</b>	<b>Child Welfare Update</b>	Wendy Rickman & Vern Armstrong
<b>12:00 PM</b>	<b>Lunch</b>	
<b>12:30 PM</b>	<b>Council Update</b>	All
<b>12:45 PM</b>	<b>Approval of Child Abuse Prevention Program Advisory Committee Charter Agreement - Review of Report Format</b>	Wendy Rickman
<b>1:00 PM</b>	<b>Legislative Update</b>	Merea Bentrott
	<b>Director's Update</b>	Chuck Palmer
<b>2:00 PM</b>	<b>Adjourn</b>	

This meeting is accessible to persons with disabilities. (If you have special needs, please contact the Department of Human Services (515)281-5452 two days prior to the meeting.)

Note: Times listed on agenda for specific items are approximate and may vary depending on the length of discussion for preceding items. Please plan accordingly