



# Iowa Department of Human Services

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## INFORMATIONAL LETTER NO.1417

**DATE:** December 10, 2014

**TO:** Iowa Medicaid Nursing Facilities, Skilled Nursing Facilities, Nursing Facilities for Persons with Mental Illness (NF/PMI), Intermediate Facilities for Persons with an Intellectual Disability (ICF/ID), Psychiatric Medical Institutions for Children (PMIC), Residential Care Facilities (RCF), Hospice Providers and State Mental Health Institutions.

**FROM:** Iowa Department of Human Services (DHS), Iowa Medicaid Enterprise (IME)

**RE:** New Report for a Member's Annual Medicaid Eligibility Review Date

**EFFECTIVE:** Immediately

Effective immediately, facilities are able to access a member's eligibility review date information through the Iowa Medicaid Portal Access (IMPA) system.

Many providers already have an IMPA account for other functions such as viewing electronic remittance advices and a member's client participation. If you do not have an IMPA account, please follow these instructions to register for a new account.

### To Register:

- Go to [IMPA](#)<sup>1</sup>.
- Click on the "Register New Account" link at the upper left side of the page.
- Complete the registration form. Your password must be at least eight characters and include one uppercase character, one lowercase character, one digit, and one special character (!@#%&+=). Enter the verification words and click on "Create".
- If all information is valid, a text box will be displayed and you will be redirected to the login page. On your first entry to IMPA, you will be directed to choose and answer three security questions that will be used for password resets and maintenance of your account.

To access the Member Eligibility Review Date Report, you may have a group set up in IMPA, to which you will assign users. Many providers already have a group set up to view remittance advices; if you do not, please see the [User Guide for Setting up Groups](#)<sup>2</sup>. If you are registering on IMPA for the first time you will need to complete the [Client Participation Notices Access Request](#)<sup>3</sup>. The form, 470-5189, is also found on the [DHS webpage](#)<sup>4</sup>. This

<sup>1</sup> <https://secureapp.dhs.state.ia.us/impa/>

<sup>2</sup> <https://dhs.iowa.gov/sites/default/files/IMPAGroups.pdf>

<sup>3</sup> <https://dhs.iowa.gov/sites/default/files/IMPAGroups.pdf>

<sup>4</sup> <http://dhs.iowa.gov/ime/providers/forms>

form, originally announced in [Informational Letter 1317](#), will allow access to both the Client Participation Notices and Member Eligibility Review Date Report. Once the access form is submitted, the IME will process the request and access will be granted to view the Eligibility Report.

After logging into IMPA, please follow these instructions to access the member's eligibility review information:

- 1) Hover over "File."
- 2) Click on "Eligibility Review Date."
- 3) Select the NPI from the drop down list (this was created based on your security).
- 4) Select the Provider address.
- 5) Enter the State ID (Medicaid Member ID) –or– leave the State ID blank.
- 6) Select the Eligibility Records. This automatically defaults to "Current." Available options include:
  - **Current** – displays members that are due for Medicaid eligibility review for the current month. This report can be used at the beginning of each month to determine which residents have a Medicaid eligibility review due during the month.
  - **Future** – displays members that are due for upcoming Medicaid eligibility review within the next three months (review months are limited to three); not including the current month.
- 7) Click on the "View Members" button to see the report. Reports may have more than one page. Reports are searchable and can be exported or printed.

DHS is required to conduct a review of Medicaid eligibility at least once every 12 months for Medicaid members in medical institutions. A Medicaid Review form is automatically issued to the member at the end of the month prior to their review month. For example, if the member's review month is July, the member will receive a Medicaid Review form, 470-3118, in June.

Please note a member may become ineligible for Medicaid at any time due to a variety of reasons, such as an increase in income or resource. If a member becomes ineligible for any reason and has to complete a new application in order to receive coverage, the review month could change because the annual review is based on the month the application was received.

If you have any questions please contact the IME Provider Services Unit at 1-800-338-7909, or locally in Des Moines at 515-256-4609 or by email at [imeproviderservices@dhs.state.ia.us](mailto:imeproviderservices@dhs.state.ia.us).