

INFORMATIONAL LETTER NO. 2695-FFS

DATE: JULY 17, 2025

TO: Home- and Community-Based (HCBS) Providers, Case Managers,
Targeted Case Managers (TCM)

APPLIES TO: Fee-for-Service (FFS)

FROM: Iowa Department of Health and Human Services (HHS),
Iowa Medicaid

RE: Case Management Face-to-Face Requirements

EFFECTIVE: August 1, 2025

Case Managers **must** have at least one face-to-face contact per month for the first three months of enrollment with individuals enrolled in Medicaid Home and Community Based Services (HCBS) Waivers and Habilitation Services program. This requirement applies when a case management-eligible individual newly enrolls with Case Management or when an existing individual first becomes eligible for Case Management.

Following the first three months, the Case Managers must complete at least one contact per month with the individual or their authorized representative. This contact may be face-to-face, virtual, or via telehealth. Written communication does not constitute contact unless there are extenuating circumstances outlined in the enrollee's individualized service plan (ISP).

- If the individual is enrolled in any of the Medicaid HCBS Waivers or those authorized to receive HCBS Habilitation services who have been diagnosed with an Intellectual and/or Developmental Disability, Case Managers must complete at least one, in-home, face-to-face contact every other month
- For those who are not diagnosed with Intellectual and/or Developmental Disability, the Case Manager must complete at least one, in-home, face-to-face contact every three months.

All Case Managers must advise their individuals that face-to-face in-person contact in the individual's place of residence is a requirement of HCBS eligibility. Individuals who have a medical condition or who reside with someone with a medical condition that warrants virtual or telehealth visits, the virtual/telehealth visit must be specifically requested by the individual or

their authorized representative and must be supported by annual documentation from a physician attesting to the medical necessity of virtual/telehealth visits.

These requirements are reflected in the managed care plans' contracts section F.12C.08 as amended July 1, 2024, and will be incorporated into the Case Management manual.

If you have questions, please contact Iowa Medicaid Provider Services:

Iowa Medicaid Provider Services:

- Phone: 1-800-338-7909
- Email: imeproviderservices@hhs.iowa.gov