

INFORMATIONAL LETTER NO. 2531-MC-FFS

DATE: November 30, 2023

TO: All Iowa Medicaid Providers

APPLIES TO: Managed Care (MC), Fee-for-Service (FFS)

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

RE: Member Cost Sharing Limits

EFFECTIVE: Upon Receipt

During the COVID-19 Public Health Emergency (PHE), Iowa Medicaid suspended cost sharing, including premiums and copays. The PHE ended effective May 11, 2023; therefore, cost sharing activities will resume in 2024. Specifically, premiums for the Healthy and Well Kids in Iowa (Hawki) program and Medicaid for Employed People with Disabilities (MEPD) will be reinstated January 1, 2024, and copayments for all enrollees will be reinstated June 1, 2024.

In accordance with federal requirements, premiums and cost sharing incurred by all individuals in a Medicaid household may not exceed an aggregate limit of five percent of the family's monthly income. When premiums and copayments are reinstated, lowa Medicaid will begin tracking cost sharing incurred and sending members monthly notices when monthly limits are reached. These letters will alert members to the date the monthly medical cost sharing limit was met.

Members are asked to share the costs of some services with a set monthly limit for payment. Each member's monthly medical cost sharing limit is determined by income and eligibility. Providers may be asked to reimburse members for cost-sharing expenses charged to the member beyond the member's monthly limit. Iowa Medicaid tracks each member's monthly medical cost sharing limit based on claims data submitted by providers. Progress toward a member's cost sharing limit will be based on when claims are paid rather than when the service is provided so providers are encouraged to submit claims timely.

Providers can locate the member's cost sharing amount through the Eligibility Verification System (ELVS). Once a provider has confirmed the cost sharing limit has been reached or is on hold, providers will no longer collect cost sharing from members for the remainder of that month.

Please note that as a condition of participating in the Medicaid program, a provider may not deny care or services to a member because of the member's inability to pay a copayment. A verbal statement that the person is unable to pay establishes the member's inability to pay.

If you have any questions, please contact the Iowa Medicaid Provider Services Unit at I-800-338-7909, or locally in Des Moines at 515-256-4609, or by email at imeproviderservices@dhs.state.ia.us.