

**CENTERS FOR MEDICARE & MEDICAID SERVICES
EXPENDITURE AUTHORITY**

NUMBER: 11 -W-00 188/7
TITLE: Iowa's Section 1115 Family Planning Demonstration
AWARDEE: Iowa Department of Human Services

Under the authority of section 1115(a)(2) of the Social Security Act (the Act), expenditures made by Iowa for the items identified below, which are not otherwise included as expenditures under section 1903 of the Act shall, for the period of this Demonstration extension, be regarded as expenditures under the State's title XIX plan. All requirements of the Medicaid statute will be applicable to such expenditure authorities (including adherence to income and eligibility system verification requirements under section 1137(d) of the Act), except those specified below as not applicable to these expenditure authorities.

The following expenditure authorities and the provisions specified as "not applicable" enable Iowa to operate its section 1115 Medicaid Family Planning Demonstration effective as of the date of the approval letter through December 31, 2013, unless otherwise stated.

Expenditures for extending Medicaid eligibility for family planning and family planning-related services, subject to an annual redetermination, to individuals, ages 12 through 54, who are not otherwise enrolled in Medicaid (with an exception for the IowaCare section 1115 Demonstration), the Children's Health Insurance Program (CHIP), or have health insurance coverage that provides family planning services, and are:

- a) Women losing Medicaid pregnancy coverage (SOBRA pregnant women) at the conclusion of 60 days postpartum and who have a family income at or below 300 percent of the Federal poverty level (FPL) at the time of annual redetermination; or
- b) Men and women who have family income at or below 300 percent of the FPL.

Medicaid Requirements Not Applicable to the Medicaid Expenditure Authorities:

All Medicaid requirements apply, except the following:

1. Methods of Administration: Transportation

Section 1902(a)(4) insofar as it incorporates 42 CFR 431.53

To the extent necessary to enable the State to not assure transportation to and from providers for the Demonstration population.

2. Amount, Duration, and Scope of Services (Comparability) Section 1902(a)(10)(B)

To the extent necessary to allow the State to offer the Demonstration population a benefit package consisting only of family planning services and family planning-related services.

3. Prospective Payment for Federally Qualified Health Centers and Rural Health Centers and Rural Health Clinics Section 1902(a)(15)

To the extent necessary for the State to establish reimbursement levels to these clinics that will compensate them solely for family planning and family planning-related services.

4. Point-of-Service Eligibility Section 1902(a)(17) and Section 1902(a)(5)

To the extent necessary to enable the State to allow non-State agency staff who are employees or contractors at locations certified as non-State agency provider eligibility determination sites to assist in making determinations of eligibility.

5. Eligibility Procedures Section 1902(a)(17)

To the extent necessary to allow the State to not include parental income when determining a minor's (individual under age 18) eligibility for the Family Planning Demonstration.

To the extent necessary to allow the State to not require reporting of changes for income or household size for 12 months, for a person found income-eligible upon application or annual redetermination when determining eligibility for the Family Planning Demonstration.

6. Retroactive Coverage Section 1902(a)(34)

To the extent necessary to enable the State to not provide medical assistance to the Demonstration population for any time prior to when an application for the Demonstration is made.

7. Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) Section 1902(a)(43)(A)

To the extent necessary to enable the State to not furnish or arrange for EPSDT services to the Demonstration population.