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State/Territory Name: IA

State Plan Amendment (SPA) #: 13-0012

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) CMS 179 Form/Summary Form (with 179-like data)
- 3) Approved SPA Pages

DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
601 East 12th Street, Suite 355
Kansas City, Missouri 64106



Division of Medicaid and Children's Health Operations

October 23, 2013

Charles M. Palmer, Director
Department of Human Services
Hoover State Office Building
1305 East Walnut, 5th Floor
Des Moines, Iowa 50319-0119

Dear Mr. Palmer:

On August 21, 2013, the Centers for Medicare & Medicaid Services (CMS) received Iowa's State Plan Amendment (SPA) transmittal #13-012, which proposes to add men to the BCCT program per Iowa's 2013 legislation mandate SF 446. Currently, only women are covered for the breast and/or cervical cancer under the BCCT program.

Based upon the information received, we are now ready to approve SPA #13-012 as of October 22, 2013, with an effective date of January 1, 2014, as requested by the State.

Enclosed is a copy of the CMS-179 form, as well as, the approved pages for incorporation into the Iowa State Plan. If you have any questions regarding this amendment, please contact Barbara Cotterman at (816) 426-5925 or Barbara.Cotterman@cms.hhs.gov.

Sincerely,

//s//

James G. Scott
Associate Regional Administrator
for Medicaid and Children's Health Operations

Enclosure

cc: Jennifer Vermeer

**TRANSMITTAL AND NOTICE OF APPROVAL OF
STATE PLAN MATERIAL
FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES**

1. TRANSMITTAL NUMBER

1 3 0 1 2

2. STATE

IOWA

3. PROGRAM IDENTIFICATION: TITLE XIX OF THE SOCIAL
SECURITY ACT (MEDICAID)

4. PROPOSED EFFECTIVE DATE

January 1, 2014

TO: REGIONAL ADMINISTRATOR
CENTERS FOR MEDICARE & MEDICAID SERVICES
DEPARTMENT OF HEALTH AND HUMAN SERVICES

5. TYPE OF PLAN MATERIAL (Check One)

☐ NEW STATE PLAN

☐ AMENDMENT TO BE CONSIDERED AS NEW PLAN

☒ AMENDMENT

COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AMENDMENT (Separate transmittal for each amendment)

6. FEDERAL STATUTE/REGULATION CITATION

1902(a) (10) (A) (ii) (XVIII)

7. FEDERAL BUDGET IMPACT

a. FFY '14 \$ 43,073.43 \$10,900 *

b. FFY '15 \$ 43,960.15 \$43,217 *

8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT

Attachment 2.2-A, Page 23b

8. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION
OR ATTACHMENT (If Applicable)

Attachment 2.2-A, Page 23b

10. SUBJECT OF AMENDMENT

The request adds men to the BCCT program per Iowa's 2013 legislation mandate SF 445.
Currently, only women are covered for breast and/or cervical cancer under the BCCT program.

11. GOVERNOR'S REVIEW (Check One)

☒ GOVERNOR'S OFFICE REPORTED NO COMMENT

☐ OTHER, AS SPECIFIED

☐ COMMENTS OF GOVERNOR'S OFFICE ENCLOSED

☐ NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL

12. SIGNATURE OF STATE AGENCY OFFICIAL

13. TYPED NAME

CHARLES M. PALMER

14. TITLE

DIRECTOR

15. DATE SUBMITTED

8-21-13

16. RETURN TO

CHARLES M. PALMER
DIRECTOR
DEPARTMENT OF HUMAN SERVICES
1305 EAST WALNUT 5TH FLOOR
DES MOINES IA 50319-0114

FOR REGIONAL OFFICE USE ONLY

17. DATE RECEIVED

August 21, 2013

18. DATE APPROVED

October 22, 2013

PLAN APPROVED - ONE COPY ATTACHED

19. EFFECTIVE DATE OF APPROVED MATERIAL

January 1, 2014

20. SIGNATURE OF REGIONAL OFFICIAL

21. TYPED NAME

James G. Scott

22. TITLE Associate Regional Administrator
for Medicaid and Children's Health Operations

23. REMARKS

* Pen and Ink changes per state request dated 10/01/13.

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: Iowa

Citations	Groups Covered
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B. Optional Groups Other Than the Medically Needy (Continued)1920(a)(10)(A)
(ii)(XVIII) of the ActX 21. Individuals who:

- ◆ Have been screened for breast or cervical cancer under the Centers for Disease Control and Prevention Breast and Cervical Cancer Early Detection Program established under title XV of the Public Health Service Act in accordance with the requirements of section 1504 of that Act and need treatment for breast or cervical cancer, including a pre-cancerous condition of the breast or cervix;
- ◆ Are not otherwise covered under creditable coverage, as defined in section 2701(c) of the Public Health Service Act;
- ◆ Are not eligible for Medicaid under any mandatory categorically needy eligibility group; and
- ◆ Have not attained age 65.

1920B of the Act

X 22. Individuals who are determined by a "qualified entity" (as defined in 1920B(b) based on preliminary information, to be a person described in 1902(aa) of the Act related to certain breast and cervical cancer patients.

The presumptive period begins on the day that the determination is made. The period ends on the date that the state makes a determination with respect to the person's eligibility for Medicaid. If the person does not apply for Medicaid (or a Medicaid application was not made on her behalf) by the last day of the month following the month in which the determination of presumptive eligibility was made, the presumptive period ends on that day.

TN No. IA-13-012

Supersedes

TN No. MS-01-18

Approval Date

OCT 22 2013

Effective Date

JAN 1 2014