

Table of Contents

State/Territory Name: IA

State Plan Amendment (SPA) #: 23-0005

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



Financial Management Group

September 15, 2023

Ms. Elizabeth Matney, Medicaid Director
Iowa Medicaid Enterprise
1305 E. Walnut Street
Des Moines, IA 50319

RE: IA 23-0005

Dear Ms. Matney:

We have reviewed the proposed amendment to Attachment 4.19-D of your Medicaid State plan submitted under transmittal number (TN) 23-0005. This SPA implements a quality-of-care incentive payment program (QIPP) for participating non-state government owned or operated nursing facilities (NSGO).

We conducted our review of your submittal according to the statutory requirements at sections 1902(a)(2), 1902(a)(13), 1902(a)(30), and 1903(a) of the Social Security Act and the implementing Federal regulations at 42 CFR 447 Subpart C.

This is to inform you that Medicaid State plan amendment IA 23-0005 is approved effective July 1, 2023. The CMS-179 and the amended plan page(s) are attached.

If you have any additional questions or need further assistance, please contact Fred Sebree at Fredrick.sebree@cms.hhs.gov.

Sincerely,



Rory Howe
Director

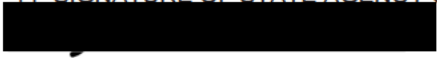
TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES	1. TRANSMITTAL NUMBER <u>2 3</u> — <u>0 0 0 5</u>	2. STATE <u>IA</u>
	3. PROGRAM IDENTIFICATION: TITLE OF THE SOCIAL SECURITY ACT <input checked="" type="radio"/> XIX <input type="radio"/> XXI	
TO: CENTER DIRECTOR CENTERS FOR MEDICAID & CHIP SERVICES DEPARTMENT OF HEALTH AND HUMAN SERVICES	4. PROPOSED EFFECTIVE DATE <p style="text-align: center;">July 1, 2023</p>	
5. FEDERAL STATUTE/REGULATION CITATION <u>42 CFR §447.272</u>	6. FEDERAL BUDGET IMPACT (Amounts in WHOLE dollars) a. FFY <u>23</u> \$ <u>0</u> b. FFY <u>24</u> \$ <u>0</u>	
7. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT <u>Supplement 5 to Attachment 4.19-D pages 1-4 (NEW)</u>	8. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable) <u>N/A</u>	

9. SUBJECT OF AMENDMENT
This amendment implements a quality-of-care incentive payment program (QIPP) for participating non-state government owned or operated nursing facilities (NSGO)

10. GOVERNOR'S REVIEW (Check One)

GOVERNOR'S OFFICE REPORTED NO COMMENT
 COMMENTS OF GOVERNOR'S OFFICE ENCLOSED
 NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL

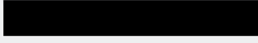
OTHER, AS SPECIFIED:

11. SIGNATURE OF STATE AGENCY OFFICIAL 	15. RETURN TO Elizabeth Matney Medicaid Director Department of Human Services Iowa Medicaid Enterprise 1305 East Walnut Street Des Moines, IA 50319
12. TYPED NAME Elizabeth Matney	
13. TITLE Medicaid Director	
14. DATE SUBMITTED 04/06/2023	

FOR CMS USE ONLY

16. DATE RECEIVED 4/6/2023	17. DATE APPROVED September 15, 2023
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PLAN APPROVED - ONE COPY ATTACHED

18. EFFECTIVE DATE OF APPROVED MATERIAL 7/1/2023	19. SIGNATURE OF APPROVING OFFICIAL 
20. TYPED NAME OF APPROVING OFFICIAL Rory Howe	21. TITLE OF APPROVING OFFICIAL Director, FMG
22. REMARKS	

9/11/2023 - State authorized update to block 15 to add "return to" contact and address and to block 7 to update new pages.

NON-STATE GOVERNMENT-OWNED NURSING FACILITY QUALITY INCENTIVE PAYMENT PROGRAM (QIPP) ADD-ON RATE PROGRAM.

Nursing facility means a licensed nursing facility as defined in section 135C.1 that is a freestanding facility or a nursing facility operated by a hospital licensed pursuant to chapter 135B. Nursing facility includes a non-state government-owned nursing facility if the nursing facility participates in the non-state government-owned nursing facility Quality Incentive Payment Program add-on rate.

This does not include the following:

- A distinct-part skilled nursing facility (SNF) unit or a swing-bed unit operated by a hospital, or
- A nursing facility owned by the state or federal government.

Non-state governmental entity (NSGE) means a city or county hospital authority, hospital district or health care district.

Non-state government owned (NSGO) means a nursing facility that is owned or operated by a NSGE and for which a NSGE holds the nursing facility's license and is party to the nursing facility's Medicaid contract. The nursing facility must be a NSGO prior to submitting the participation agreement to participate in the Quality Incentive Payment Program (QIPP) add-on rate. Iowa Medicaid will notify providers of the due date for the participation agreement on an annual basis.

The following providers in Iowa meet the definition of a NSGO:

Provider NPI	Provider Name	Address	City, State, Zip	County
1780659599	Akron Care Center	991 Highway 3	Akron, IA 51001	Plymouth
1811071103	Franklin General Hospital	1720 Central Avenue E	Hampton, IA 50441	Franklin
1982691002	Henry County Health Center	407 S White St	Mount Pleasant, IA 52641-2242	Henry
1134262041	Buchanan County Health Center	1600 1st Street E	Independence, IA 50644	Buchanan
1194923722	Story County Medical Center	630 Sixth Street	Nevada, IA 50201	Story
1215934955	Sunnycrest Manor	2375 Roosevelt Street	Dubuque, IA 52001	Dubuque
1215919949	Thomas Rest Haven	217 Main Street	Coon Rapids, IA 50058	Carroll

State Plan TN # IA-23-0005
Supersedes TN # None

Effective 7/1/2023
Approved September 15, 2023

1104939040	Palo Alto County Hospital	3201 W 1st Street	Emmetsburg, IA 50536	Palo Alto
1912089848	Humboldt County Memorial Hospital	1000 N 15th Street	Humboldt, IA 50548	Humboldt
1013987007	Prairie Ridge Care Center	1005 7th Street NE	Orange City, IA 51041-1967	Sioux

Intergovernmental transfer means a transfer of state share funds from a non-state governmental entity to the Iowa Medicaid, Department of Human Services.

QIPP add-on rate calculation period means the fiscal year for which QIPP add-on rate amounts are calculated based on adjudicated claims for days of service provided.

Upper payment limit means a reasonable estimate of the amount that would be paid for the services furnished by a facility under Medicare payment principles.

The QIPP add-on rate shall be made to a qualified NSGO to promote, maintain, and improve resident quality of care and health outcomes.

A. A NSGO nursing facility shall qualify for participation in the program if all the following conditions are met:

- (1) The NSGO nursing facility has executed a participation agreement with the Department.
- (2) The NSGO nursing facility has provided proof that the entity holds the NSGO nursing facility's license and has complete operational responsibility for the NSGO nursing facility.
- (3) The NSGO nursing facility has filed a certification of eligibility application for the QIPP add-on rate program with the Department and has received approval from the Department for participation in the program.
- (4) The NSGO nursing facility is in compliance with all care criteria requirements.

B. A NSGO shall qualify for participation in the program if all the quality measures published annually [here](#) are met.

- (1) The NSGE has executed a nursing facility provider contract with an NSGO nursing facility.
- (2) The NSGE has provided and identified the source of state share dollars for the intergovernmental transfer.
- (3) The NSGO has provided proof of ownership, if applicable, as the licensed operator of the NSGO nursing facility.
- (4) The NSGO has provided, to the Department, an executed management agreement between the NSGE and the NSGO nursing facility manager if applicable.
- (5) If at any time a provider is determined not eligible due to not meeting survey standards, they will be disqualified for the remainder of the year.

State Plan TN # IA-23-0005
Supersedes TN # None

Effective 7/1/2023
Approved September 15, 2023

C. Timing

- (1) A provider must submit the Intent to Participation Agreement on or before September 30 each year, include all necessary documentation related to the quality measures.
- (2) Upon receipt of the participation agreement, the Department will complete a determination of eligibility based on the care criteria defined above.
- (3) Providers will be notified of their eligibility annually within sixty days of the agreement due date.

D. QIPP add-on rate.

- (1) The nursing facility QIPP add-on rate provided to a participating NSGO under the program shall not exceed Medicare payment principles pursuant to 42 C.F.R. §447.272 and shall be calculated pursuant to 42 C.F.R. §438.6. The QIPP add-on rate shall be calculated and paid as follows:
 - (a) The methodology utilized to calculate the upper payment limit shall be based on the data available during the calculation period.
 - (b) The eligible amount used in determining the QIPP add-on rate shall be the difference between the state Medicaid payment and the Medicare upper payment limit as determined, on an annual basis.
 - (c) The difference calculated under subparagraph division (b) shall be divided by total patient days as determined under subparagraph division (b).
 - (d) The QIPP add-on rate shall be paid prospectively.

E. Change of ownership.

- (1) A participating NSGO nursing facility shall notify the Department of any change of ownership that may affect the participating NSGO nursing facility's continued eligibility for the program, at minimum of thirty days prior to such change.
- (2) If a participating NSGO nursing facility changes ownership to a privately owned entity, on or after the first day of the QIPP add-on rate calculation period, the privately owned provider is no longer eligible for the QIPP add-on rate.

F. Participating providers.

- (1) All program documentation shall be available online for NSGO providers to complete.
- (2) All eligible participating NSGO's quality score card will be available online annually.
- (3) Providers that do not meet eligibility requirements above will be notified via mail what metrics were not met. The scorecard will not be posted online.

G. Payment to participating NSGO nursing facilities.

A participating NSGO nursing facility shall secure allowable intergovernmental transfer funds from a participating NSGE to provide the state share amount. The process for the intergovernmental transfer shall comply with the following:

- (1) The Department, or the Department's designee, shall notify the participating

State Plan TN # IA-23-0005
 Supersedes TN # None

Effective 7/1/2023
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NSGO of the state share amount to be transferred in the form of an intergovernmental transfer for purposes of seeking federal financial participation for the QIPP add-on rate, within fifteen business days after the end of each month. The participating NSGO shall have until the end of the month to remit payment of the state share amount in the form of an intergovernmental transfer to the Department or the Department’s designee.

(2) If there are any outstanding intergovernmental transfer amount at the end of the payment period the provider will not be able to participate in the following year.

The QIPP add-on rate shall only be implemented upon receipt by the Department of approval of the Medicaid state plan amendment by CMS, and if such approval is received, the add-on rate is applicable no earlier than the first day of the state fiscal year following the date of receipt of such approval.

Additional documentation regarding the QIPP quality measures and agreements can be found at <https://dhs.iowa.gov/ime/providers/csrp/QIPP> .

State Plan TN # IA-23-0005
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