RA 26-238

HUMAN SERVICES DEPARTMENT[441]

Regulatory Analysis

Notice of Intended Action to be published: subrule 78.24(4)
"Amount, Duration and Scope of Medical and Remedial Services"

Iowa Code section(s) or chapter(s) authorizing rulemaking: 249A
State or federal law(s) implemented by the rulemaking: Iowa Code chapter 249A

Public Hearing

A public hearing at which persons may present their views orally or in writing will be held as follows:

September 8, 2026 10 a.m.	Microsoft Teams Meeting ID: 245 818 881 867 66 Passcode: ya9va9uv

Public Comment

Any interested person may submit written or oral comments concerning this Regulatory Analysis, which must be received by the Department of Health and Human Services no later than 4:30 p.m. on the date of the public hearing. Comments should be directed to:

Victoria L. Daniels
321 East 12th Street
Des Moines, Iowa 50319
Phone: 515.829.6021
Email: compliancerules@hhs.iowa.gov

Purpose and Summary

This proposed rulemaking allows rural health clinics (RHCs) to receive Medicaid reimbursement for the provision of dental services. The services would be provided by local dentists who contract with the RHCs.

Analysis of Impact

1. **Persons affected by the proposed rulemaking:**

- **Classes of persons that will bear the costs of the proposed rulemaking:**

There are no costs associated with this proposed rulemaking.

- **Classes of persons that will benefit from the proposed rulemaking:**

Medicaid recipients residing in rural areas may benefit from increased access to dental services.

2. **Impact of the proposed rulemaking, economic or otherwise, including the nature and amount of all the different kinds of costs that would be incurred:**

- **Quantitative description of impact:**

Iowa has 282 RHCs. Another state's Medicaid program saw 2.94 percent of its RHCs opt in to providing dental services under a similar program.

- **Qualitative description of impact:**

Medicaid recipients residing in rural areas may benefit from increased access to dental services.

3. **Costs to the State:**

- **Implementation and enforcement costs borne by the agency or any other agency:**

The Department incurs personnel and other administrative costs associated with administering the Medicaid program.

- **Anticipated effect on State revenues:**

Based upon a 2.94 percent RHC opt-in estimate, there would be a total cost increase of $3,934,581.43, with $2,736,894.84 being federal and $1,197,686.59 being State.

4. **Comparison of the costs and benefits of the proposed rulemaking to the costs and benefits of inaction:**

Revising the existing rules is the appropriate way to accomplish the desired outcome.

5. **Determination whether less costly methods or less intrusive methods exist for achieving the purpose of the proposed rulemaking:**

Revising the existing rules is the appropriate way to accomplish the desired outcome.

6. **Alternative methods considered by the agency:**

- **Description of any alternative methods that were seriously considered by the agency:**

Not applicable.

- **Reasons why alternative methods were rejected in favor of the proposed rulemaking:**

Not applicable.

Small Business Impact

If the rulemaking will have a substantial impact on small business, include a discussion of whether it would be feasible and practicable to do any of the following to reduce the impact of the rulemaking on small business:

- Establish less stringent compliance or reporting requirements in the rulemaking for small business.
- Establish less stringent schedules or deadlines in the rulemaking for compliance or reporting requirements for small business.
- Consolidate or simplify the rulemaking's compliance or reporting requirements for small business.
- Establish performance standards to replace design or operational standards in the rulemaking for small business.
- Exempt small business from any or all requirements of the rulemaking.

If legal and feasible, how does the rulemaking use a method discussed above to reduce the substantial impact on small business?

This proposed rulemaking may positively impact small dental providers by enabling them to receive reimbursement for services provided at RHCs.

Text of Proposed Rulemaking

ITEM 1. Adopt the following **new** subrule 78.21(4):

78.21(4) *Dental services.* Payment will be made to rural health clinics for dental services payable under Iowa Medicaid's dental wellness plan as described in 441—Chapter 73.