Regulatory Analysis

Notice of Intended Action to be published: 441—78.11(249A)
"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: 2024 Iowa Acts, House File 2397

Public Hearing

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

November 7, 2024 10 a.m.	Microsoft Teams Meeting ID: 295 147 282 130 Passcode: jm6rgf

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

The purpose of this rulemaking is to implement 2024 Iowa Acts, House File 2397. The legislation creates new Iowa Code section 147A.19, which directs the Department to authorize payment for ambulance transport for persons experiencing a mental health crisis to mental health access centers in amounts similar to the payment for ambulance transport to a hospital emergency room.

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 the rulemaking.

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

Iowans experiencing a mental health crisis who are transported by ambulance to a mental health access center will benefit.

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:

This service was not originally covered.

- Qualitative description of impact:

This change will ensure timely treatment regarding the correct level of care for Iowa Medicaid members who are experiencing a mental health crisis.

3. Costs to the State:

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

There is no cost impact on the agency.

- Anticipated effect on state revenues:

It was determined that a fiscal impact study was not possible due to the lack of data of Emergency Medical Services (EMS) providers transporting Iowa Medicaid members to mental health access centers.

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

Without this chapter, there would be no guidance on reimbursement to EMS providers for transports of Iowa Medicaid members to mental health access centers.

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

This is a less costly and less intrusive method for EMS providers to provide timely transport for Iowa Medicaid members to the appropriate level of care regarding mental health access centers.

6. Alternative methods considered by the agency:

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

No alternative methods were seriously considered.

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

There were no alternative methods.

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 rulemaking has no impact on small business.

Text of Proposed Rulemaking

ITEM 1. Amend rule 441—78.11(249A) as follows:

441—78.11(249A) Ambulance service. Payment will be approved for ambulance service if it is required by the recipient's condition and the recipient is transported to the nearest hospital with appropriate facilities or to one in the same locality, from one hospital to another, to the patient's home, ~~or~~ to a nursing facility, or to a mental health access center. Payment for ambulance service to the nearest hospital for outpatient service will be approved only for emergency treatment. Ambulance service must be medically necessary and not merely for the convenience of the patient.

78.11(1) to **78.11(5)** No change.

This rule is intended to implement Iowa Code section 249A.4.