

249J.6 Expansion population benefits.

1. The expansion population shall be eligible for all of the following expansion population services:

a. Inpatient hospital procedures described in the diagnostic related group codes or other applicable inpatient hospital reimbursement methods designated by the department.

b. Outpatient hospital services described in the ambulatory patient groupings or non-inpatient services designated by the department.

c. Physician and advanced registered nurse practitioner services described in the current procedural terminology codes specified by the department.

d. Dental services described in the dental codes specified by the department.

e. Limited pharmacy benefits provided by an expansion population provider network hospital pharmacy and solely related to an appropriately billed expansion population service.

f. Transportation to and from an expansion population provider network provider only if the provider offers such transportation services or the transportation is provided by a volunteer.

2. a. Each expansion population member shall receive a comprehensive medical examination annually. The department may implement a web-based health risk assessment for expansion population members that may include facilitation, if deemed to be cost-effective to the program.

b. Refusal of an expansion population member to participate in a comprehensive medical examination or any health risk assessment implemented by the department shall not be a basis for ineligibility for or disenrollment from the expansion population. Refusal of an expansion population member to participate in a comprehensive medical examination or other preventative health service shall not negatively affect the calculation of performance payments for an expansion population network provider medical home.

3. Expansion population members, including members assigned to an expansion population network provider medical home, shall be provided access to an IowaCare nurse helpline, accessible twenty-four hours per day, seven days per week, to assist expansion population members in making appropriate choices about the use of emergency room and other health care services.

4. Membership in the expansion population shall not preclude an expansion population member from eligibility for services not covered under the expansion population for which the expansion population member is otherwise entitled under state or federal law.

5. Members of the expansion population shall not be considered full benefit dually eligible Medicare Part D beneficiaries for the purposes of calculating the state's payment under Medicare Part D, until such time as the expansion population is eligible for all of the same benefits as full benefit recipients under the medical assistance program.

2005 Acts, ch 167, §6, 66; 2006 Acts, ch 1184, §113, 114, 128; 2010 Acts, ch 1141, §2 – 4; 2011 Acts, ch 120, §4, 5

[T] Subsection 2, paragraph b amended

[T] Subsection 3 amended