

641—8.3(135) Participant eligibility criteria. An applicant for the IA CFY program must satisfy the criteria outlined in this rule. If an applicant does not meet these criteria, the applicant shall be provided information by contracted county board of health designated agency staff regarding Iowa health and wellness, health insurance marketplace, free care, or sliding-fee clinics available in the area in which the applicant lives.

8.3(1) Age. An applicant for the IA CFY program must satisfy one of these criteria to participate in the IA CFY program.

a. If the applicant is 50 through 64 years of age, the program's priority population, the applicant may receive annual breast and cervical (if appropriate) cancer screening.

b. If the applicant is 40 through 64 years of age, the applicant may receive cardiovascular risk factor screening in addition to breast and cervical cancer screening services.

c. If the applicant is 40 through 49 years of age, the applicant may receive annual breast and cervical (if appropriate) cancer screening.

d. If the applicant is under 40 years of age and symptomatic for breast cancer, the applicant may receive breast and cervical cancer screening services based upon funding availability. EXCEPTION: This categorized group is not eligible for cardiovascular services under this program.

e. If the applicant is 65 years of age and older and the applicant does not have Medicare Part B coverage, the applicant may be eligible to receive annual breast and cervical (if appropriate) cancer screening. EXCEPTION: This categorized group is not eligible for cardiovascular services under this program.

f. If the applicant is 21 through 39 years of age and asymptomatic for breast cancer, the applicant may receive an office visit for a cervical cancer screening according to IA CFY protocol. If the applicant is determined to be at high risk for developing breast cancer using a risk assessment model that relies on family history, the applicant may receive breast services, including a mammogram and an MRI, in accordance with IA CFY protocols. EXCEPTION: This categorized group is not eligible for cardiovascular services under this program.

8.3(2) Income.

a. IA CFY program income guidelines are based upon 250 percent of the federal poverty level, which is set annually by CMS. New IA CFY program income guidelines will be adjusted following any change in CMS guidelines.

b. Self-declaration of income may be accepted.

c. Eligibility shall be based on net income for the household.

d. Assets shall not affect income status and shall not be counted when eligibility under the IA CFY program is determined.

8.3(3) Insurance.

a. The IA CFY program shall determine an individual to be uninsured if the individual does not have health insurance coverage.

b. The IA CFY program shall determine an individual to be underinsured if the individual has health insurance with unreasonably high copayments, deductibles, or coinsurance or the insurance does not cover IA CFY program-covered services.

c. Individuals who have creditable coverage, Medicaid, or Medicare Part B are eligible for patient navigation if declaring a barrier to services.

8.3(4) Residency.

a. An individual must be a resident of Iowa or of a state that shall enroll an individual in the BCCT option of Medicaid if the individual is screened or diagnosed by the IA CFY program.

b. An individual who is a resident of a state that does not accept individuals into the BCCT option of Medicaid and who chooses to continue to receive services in the IA CFY program must be informed that the individual may not be able to have the individual's treatment paid for by the BCCT option of Medicaid if the individual does not receive services in the individual's state of residence.

c. Proof and length of residency in Iowa are not required. EXCEPTION: An individual is not eligible for cardiovascular services if the individual is not a resident of Iowa.

8.3(5) Ineligible. The IA CFY program does not provide coverage for men.
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