

441—164.4(249I) Participation by public hospitals.

164.4(1) *Participation agreement.* Iowa public hospitals that participate in the Iowa Medicaid program and wish to participate in the funding of the hospital trust fund shall contact the Department of Human Services, Office of the Deputy Director for Policy, Hoover State Office Building, Fifth Floor, 1305 E. Walnut Street, Des Moines, Iowa 50319-0114, for information regarding the conditions of participation. Upon acceptance of the conditions of participation, the hospital shall sign Form 470-3932, Participation Agreement for Intergovernmental Transfer.

164.4(2) *Administration fee.* Upon acceptance of the participation agreement, the department shall authorize increased reimbursement to the participating facility for hospital services provided under the Medicaid program. Once every state fiscal year, the hospital shall retain \$5,000 of the additional reimbursement received, as an administration fee. The hospital shall refund the remainder of the additional reimbursement through intergovernmental transfer to the department for deposit of the federal share (less the \$5,000 retained by the hospital) in the Iowa hospital trust fund and the nonfederal share in the medical assistance budget.

164.4(3) *Limit on participation.* The department may limit participation by public hospitals to no more than the number needed to maximize the fund.