HUMAN SERVICES DEPARTMENT[441]

Adopted and Filed Emergency

Rulemaking related to provider enrollment

The Department of Health and Human Services hereby proposes to amend subrule 79.15(12), Iowa Administrative Code.

Legal Authority for Rulemaking

This rulemaking is adopted under the authority provided in Iowa Code chapter 249A.

State or Federal Law Implemented

This rulemaking implements, in whole or in part, Iowa Code chapter 249A.

Purpose and Summary

This rulemaking amends subrule 79.15(12) by changing the parameters for Iowa Medicaid provider validation and termination. The current subrule indicates that Iowa Medicaid providers that have not submitted a claim in the past 24 months will be sent a notice asking if the provider wishes to continue participation in the Medicaid program. Providers that fail to respond within 30 calendar days are terminated from participation.

As amended, the subrule states that providers that have not submitted a claim within the previous 12 months will be deactivated from participation in the Iowa Medicaid program. Deactivated providers may request reactivation by contacting the Department and meeting all applicable requirements. Providers that remain deactivated and do not submit any claims for 24 consecutive months following deactivation will be terminated from participation.

Reason for Adoption of Rulemaking Without Prior Notice and Opportunity for Public Participation

Pursuant to Iowa Code section 17A.4(3), the Department finds that notice and public participation are unnecessary or impractical because emergency adoption was approved by the Administrative Rules Review Committee.

In compliance with Iowa Code section 17A.4(3)"a," the Administrative Rules Review Committee at its August 10, 2026, meeting reviewed the Department's determination and this rulemaking and approved the emergency adoption.

Reason for Waiver of Normal Effective Date

Pursuant to Iowa Code section 17A.5(2)"b"(1)(b), the Department also finds that the normal effective date of this rulemaking, 35 days after publication, should be waived and the rulemaking made effective August 10, 2026, because the Centers for Medicare and Medicaid Services has called upon Governor Reynolds and Iowa Medicaid Director Lee Grossman to undertake a "swift provider revalidation," as well as to submit a comprehensive two-year provider revalidation strategy for high-risk providers. The changes in this rulemaking benefit Iowans by facilitating Medicaid provider integrity and helping to combat fraud and abuse, thereby fostering fiscal responsibility.

Earlier adoption of this rulemaking will allow the Department to promptly begin its provider revalidation project.

Adoption of Rulemaking

This rulemaking was adopted by the Department on July 28, 2026.

Concurrent Publication of Notice of Intended Action

In addition to its adoption on an emergency basis, this rulemaking has been initiated through the normal rulemaking process and is published herein under Notice of Intended Action as **ARC xxxx** to allow for public comment.

Fiscal Impact

This rulemaking has no fiscal impact to the State of Iowa.

Jobs Impact

This proposed rulemaking may impact small business health care providers that have not submitted a claim to Iowa Medicaid in the last 12 months. Such providers may be deactivated from participation with Iowa Medicaid. The proposed rulemaking provides an avenue for such providers to reactivate their participation.

Waivers

Any person who believes that the application of the discretionary provisions of this rulemaking would result in hardship or injustice to that person may petition the Department for a waiver of the discretionary provisions, if any, pursuant to 441—Chapter 2504.

Review by Administrative Rules Review Committee

The ARRC, a bipartisan legislative committee which oversees rulemaking by executive branch agencies, may, on its own motion or on written request by any individual or group, review this rulemaking at its regular monthly meeting or at a special meeting. The ARRC's meetings are open to the public, and interested persons may be heard as provided in Iowa Code section 17A.8(6).

Effective Date

This rulemaking will become effective on August 10, 2026.

The following rulemaking action is adopted:

ITEM 1. Amend subrule 79.15(12) as follows:

79.15(12) Inactivity and provider status. A provider that has not submitted a claim ~~in~~ within the last ~~24~~12 months will be ~~sent a notice asking if the provider wishes to continue~~ deactivated from participation in Iowa Medicaid. ~~A provider that fails to reply to the notice within 30 calendar days of the date on the notice will be terminated as a provider.~~ A deactivated provider may request reactivation by contacting Iowa Medicaid and meeting all applicable re-enrollment requirements pursuant to this rule. ~~Providers that do~~ A provider that remains inactive and does not submit any claims ~~in 48~~ for 24 consecutive months following deactivation will be terminated as ~~providers~~ as a provider without further notification.