

#### **INFORMATIONAL LETTER NO. 2558-MC-FFS-D**

**DATE:** February 20, 2024

TO: All Iowa Medicaid Providers (Excluding Individual Consumer-Directed

Attendant Care)

**APPLIES TO:** Managed Care (MC), Fee-for-Service (FFS), Dental (D)

FROM: Iowa Department of Health and Human Services (HHS), Iowa Medicaid

**RE:** Change in Provider Enrollment Application Fee

**EFFECTIVE:** January 1, 2024

As required by federal regulations at 42 CFR 455.460, Iowa Medicaid began requiring an application fee for certain newly enrolling and re-enrolling providers on August 1, 2016.

The application fee is required with initial applications for new enrollment, applications for a new practice location and any re-enrollment. Providers will be required to pay an application fee before the application can be processed. The Centers for Medicare and Medicaid Services (CMS) sets the application fee amount. **Effective January 1, 2024, the fee amount is \$709.00.** This may be adjusted annually.

The application fee is required for:

- Any provider considered "institutional" under Medicare.
- Provider types that exist under Medicaid, but not Medicare, that meet criteria for "institutional" providers.

The application fee is not required for:

- Individual providers enrolling in Medicaid, including group practices, or other non-institutional providers.
- Providers already enrolled in Medicare or another state's Medicaid program or Children's Health Insurance Program (CHIP).
- Providers who have already paid the fee with Medicare or another state.

Please refer to the <u>Provider Application Fee</u><sup>1</sup> chart on the HHS <u>Provider Enrollment webpage</u><sup>2</sup> for the specific requirements for each lowa Medicaid provider type.

### **Request for Hardship Exemption**

Should the application fee prove to be a hardship for the provider, CMS may agree to waive the fee. If the enrolling or re-enrolling provider believes the application fee is a significant hardship to the organization, the <u>lowa Medicaid Provider Enrollment Application Fee Hardship Exemption Request (470-5298)</u> may be submitted. The Hardship Exemption Request form is available on the HHS <u>Provider Forms webpage</u>. Please note that lowa Medicaid cannot process the enrollment application until the hardship request has been approved by CMS or a fee has been received by lowa Medicaid. To avoid delay in processing the application, lowa Medicaid suggests that both the application fee and the <u>lowa Medicaid Provider Enrollment Application Fee Hardship Exemption Request (470-5298)</u> be submitted. If the hardship request is approved by CMS, the fee will be refunded.

Each hardship exemption request must include details on the impact to beneficiary access to care. Iowa Medicaid will review the details of the request and forward it to CMS. The final decision to waive the application fee is made by CMS, who will then notify Iowa Medicaid of their decision. If CMS denies the hardship exemption request, Iowa Medicaid will provide written notification within five business days of the denial. If the fee has not already been paid, Iowa Medicaid will allow 30 days for the application fee to be paid. If the application fee is not paid within 30 days, the application will be denied. If the application is denied for lack of payment, the application and fee may be resubmitted at any time.

If CMS approves the hardship exemption request, Iowa Medicaid will process the provider application and a final determination on enrollment will be sent to the address listed on the application.

#### **Submitting the Application Fee**

lowa Medicaid will accept a check or money order payable to Iowa Medicaid. Checks may be mailed to:

Iowa Medicaid Provider Enrollment Unit P.O. Box 36450 Des Moines, IA 50315

https://hhs.iowa.gov/media/10513/download?inline=

<sup>&</sup>lt;sup>2</sup> https://hhs.iowa.gov/programs/welcome-iowa-medicaid/provider-services/provider-enrollment

https://hhs.iowa.gov/media/5925/download?inline=

<sup>&</sup>lt;sup>4</sup> https://hhs.iowa.gov/programs/welcome-iowa-medicaid/provider-services/imeprovidersforms

<sup>&</sup>lt;sup>5</sup> https://hhs.iowa.gov/media/5925/download?inline=

# Frequently Asked Questions (FAQs)

Please refer to the FAQs<sup>6</sup> available on the HHS Provider Enrollment webpage<sup>7</sup>.

If you have questions, please contact Iowa Medicaid Provider Services:

## **Iowa Medicaid Provider Services:**

Phone: I-800-338-7909

Email: imeproviderservices@dhs.state.ia.us

https://hhs.iowa.gov/media/10487/download?inline=
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