



Iowa Medicaid Newsletter Endeavors Update

Iowa Medicaid Director's Column

Terry E. Branstad, Governor
Kim Reynolds, Lt. Governor

Iowa Department of Human Services
Charles M. Palmer, Director
Julie Lovelady, Interim Medicaid Director

Want to Subscribe?

If you'd like to receive Endeavors Update, send "subscribe" along with your name, email and organization to IMENewsletter@dhs.state.ia.us.

Subscribe to frequent updates on the Iowa Health and Wellness Plan by emailing "subscribe" along with your name, email and organization to IMECommunications@dhs.state.ia.us



Welcome to the Iowa Medicaid Newsletter. By now, most of you have likely heard about the Medicaid Modernization initiative. On February 16, 2015, the Iowa Department of Human Services (DHS) released a Request for Proposal (RFP) for Governor Branstad's Medicaid Modernization initiative. This initiative aims to improve the coordination and quality of care while providing predictability and sustainability in Medicaid spending.

The RFP is titled the Iowa High Quality Health Care Initiative. Through this RFP, DHS proposes to enroll the majority of Medicaid, Healthy and Well Kids in Iowa (hawk-i), and Iowa Health and Wellness Plan enrollees in comprehensive managed care organizations (MCOs). Under this new approach, DHS will contract with two to four MCOs to provide coverage for health care services including physical health, behavioral health, long-term services and supports. This initiative creates a single system of care for each member to promote the delivery of efficient and coordinated quality health care including accountability in health care coordination.

This change is being made for many important reasons. Iowa's current Medicaid model operates multiple care management approaches based on the populations being served. This contributes to a fragmented mold of care. Medicaid Modernization seeks to address the limitations of the current form by uniting health care delivery under one system.

Almost all of the current Medicaid covered benefits and services will be administered by the MCOs. It's important to stress that eligibility and covered services will not change for members. In addition, members will be able to choose the MCO plan they prefer and receive services from a variety of providers within an MCO's network.

Stakeholder feedback is essential to this process. To facilitate that, a series of statewide meetings were held in March. Additionally, stakeholders are encouraged to submit comments and/or questions via email at any time. This summer, additional opportunities for public comment will be available during the federal waiver submission process. DHS appreciates all the comments received so far, and encourages our stakeholders to participate throughout this process so we can create the best system for Iowans.

A dedicated web page has been created to provide you with the most up-to-date information on Medicaid Modernization. Below you'll find links to a few important resources to help you learn more about the initiative. Look for more details in future newsletters and through email updates. We thank you for your participation and support throughout this initiative.

- Medicaid Modernization Web Page
- Medicaid Modernization Overview Presentation
- Medicaid Modernization Fact Sheet
- Medicaid Modernization Comment Inbox:
MedicaidModernization@dhs.state.ia.us

Julie Lovelady

Inside this issue:

State Innovation Model: Testing Grant Award and Next Steps	2
Healthy Behaviors Success and Launch of Premiums	3
HCBS Settings Transition Update	4
Balancing Incentive Program and Core Standardized Assessment Update	5
Health IT Promotion and Mailing List Tied to SIM Initiatives	6
Implementation Delay on the Provider Enrollment Application Fee	7

Iowa Medicaid Medical Health Home Policy Report

The Iowa Medicaid Health Home Program is an optional Medicaid State Plan benefit that allows for the states to establish Health Homes for Medicaid enrollees who have multiple chronic health conditions. These Medicaid beneficiaries with multiple chronic conditions are high users of health care services. They tend to use a wider variety of these services than other health care consumers. When care coordination and self-management support is successful to those with chronic illnesses, it improves the health of Medicaid members and reduces the costs of care.

To find out more about this article and the overall goals of improving member care along with costs and success of the program go to:

http://ppc.uiowa.edu/sites/default/files/hh_4-way_report.pdf

Initial Round of Value Index Score Bonus Payments Issued to Providers

The first round of Value Index Score (VIS) bonus payments have been made. In 2014, Iowa Medicaid set a baseline quality score for providers based on prior claims data and patient attribution. The Iowa Medicaid Enterprise (IME) has distributed just over \$84,000 to 198 participating Wellness Patient Managers, averaging a 42 percent award rate. Providers with a baseline score receive quarterly bonus payments for making improvements to those scores.

Value Payment Incentive Show Positive Results in First Year

In April 2014, Iowa Medicaid signed contracts with two Accountable Care Organizations (ACOs). By the summer, another two ACOs had been added to serve the Iowa Wellness Plan population.

After the first year of the Iowa Health and Wellness Plan and the ACO contracts, Iowa Medicaid is pleased to report positive results.

Informational Letters

The Iowa Medicaid Enterprise (IME) publishes provider bulletins, also known as information letters, to clarify existing policy details or explain new policies. All informational letters issued by the IME are posted on the Iowa Department of Human Services [website](#).

LeAnn Moskowitz Receives 2015 Distinguished Public Service Award

LeAnn Moskowitz, Program Manager for the Home and Community Based Services (HCBS) Brain Injury Waiver, was honored at the Brain Injury Alliance of Iowa's 23rd annual conference with the 2015 Distinguished Public Service Award.

Healthy Behaviors Success and Initial Launch of Premiums

The Healthy Behaviors Program, which engages Iowa Health and Wellness Plan members to complete both a physical exam and a health risk assessment to waive any financial contribution for the following year, has been a success for the first year of enrollment. Close to 32 percent of Iowa Health and Wellness Plan members have completed their wellness exam in the 12 month period stated. More than 36,000 wellness exams have been completed and there have been more than 32,700 members who have completed the health risk assessment. Both activities for the Healthy Behaviors Program have been completed by more than 20,000 members.

The completion of these two activities will waive the monthly contribution for the member's next year of enrollment. Having more than 20,000 members complete both activities this year, we expect success in future years as these activities need to be completed annually to waive possible monthly contributions for the following year. Completion of healthy behaviors and the Dental Wellness Plan Oral Risk Assessment have steadily increased from April 2014 to February 2015.

Members receive multiple mailings throughout the year reminding them of the importance of completing their Healthy Behaviors activity. Previously, mailings were sent out in May 2014, October 2014, December 2014, and January 2015. Member contributions have begun for individuals who have not completed both of their Healthy Behaviors in their first year of enrollment.

The Iowa Department of Human Services (DHS) continues to have education and outreach campaigns about the Healthy Behaviors program. The campaigns consist of the member's initial enrollment packet, periodic customized reminders, and a final notice one month prior to contributions beginning. Moving forward, we are striving to improve the health of Iowans and looking to build further success engaging members in their own health care.

Implementation Delay on the Provider Enrollment Application Fee

In previous Informational Letters, the Iowa Medicaid Enterprise (IME) communicated that effective January 1, 2015, all newly enrolling and re-enrolling organizational providers will be required to pay an enrollment application fee. This is in compliance with requirements by CMS and will be required for initial applications for new enrollment, applications for a new practice location, and any re-enrollment.

However, as a result of feedback from the provider community, the IME is delaying implementation of this provider enrollment application fee. The policy and timeframe for implementation of the provider enrollment application fee is currently being reviewed by CMS. The IME will communicate new developments to its providers as soon as they become known.

Behavioral Health and Primary Care Learning Collaborative

Pam Lester, the Health Home Project Manager for the Iowa Medicaid Enterprise (IME), and Magellan Integrated Health Home staff partnered to create a four-hour learning collaborative to form working relationships between health homes and integrated health homes. The Iowa learning collaborative meetings were held on February 23, 2015, in Storm Lake, March 4, 2015, in Waterloo, March 6, 2015, in Creston, March 13, 2015, in Ottumwa, Iowa and March 30, 2015, in Ankeny, Iowa. During the learning collaborative meetings, best practices for successful primary and behavioral health collaboration guided the dialogues of the day. Group discussions were facilitated and focused on developing action plans for each facility. The action plan included identification of the care teams, key tasks, and establishing a communication plan.

HCBS Settings Transition Update

The Iowa Medicaid Enterprise (IME) is preparing to submit the AIDS/HIV Waiver renewal application and an amendment to the Children's Mental Health (CMH) Waiver to the Centers for Medicare and Medicaid Services (CMS). As part of the renewal application and amendment process, the state is opening a public comment period for feedback on the amendment from March 4, 2015, through April 3, 2015. Another public comment period will be held for the Intellectual Disability (ID), Brain Injury (BI), Elderly (E), Health and Disability (HD), and Physical Disability (PD) Waivers from March 16, 2015 through April 15, 2015. Public comments were accepted for these waivers in November and December 2014, however CMS has indicated that another comment period be held in order to allow an opportunity for persons without internet access to view the waivers and submit comments in a non-electronic format. The renewal application and amendment include:

- The HCBS setting requirements
- The HCBS person-centered planning requirements
- The Limits of the Legal Representative as a Paid Employee
- Consumer Choices Option (CCO) changes that clarify how the CCO budget can be used to pay for goods and services
- Transportation reimbursement changes
- Consumer Directed Attendant Care (CDAC) phase-out/personal care phase-in

Copies of all the draft amendments are posted on the HCBS Program Waiver Amendments webpage along with other related documents. Comments regarding the draft amendments should be submitted in writing to: HCBSsettings@dhs.state.ia.us. For persons without internet access, the waiver renewals and amendments are available for public review at the Department of Human Services County offices. Questions or comments concerning the proposed renewals or amendments may be addressed to: Sally Oudekerk, Iowa Medicaid Enterprise, 100 Army Post Road, Des Moines, Iowa 50315. Comments received may be reviewed by the public by contacting Ms. Oudekerk at the above address. All comments will be reviewed, summarized, and responses developed. Appropriate suggestions will be incorporated into the draft amendment and responses to public comments will be posted on the DHS website.

Balancing Incentive Program (BIP)/ Core Standardized Assessment (CSA) Update

The implementation of core standardized assessments of Iowa Medicaid's Balancing Incentive Program (BIP) for the persons served by Iowa Medicaid's Home and Community Based Services (HCBS) continued to pick up steam in the first three months of 2015. The focus of activities has been the selection of assessment tools for additional waivers. Iowa Medicaid designated assessors currently conduct face-to-face assessments using the Supports Intensity Scale® (SIS) for persons with intellectual disability. Additional waiver populations will receive assessments when the tools are selected and assessors are trained. CSA assessors are located across the state to facilitate the most efficient availability for scheduling assessments. A map showing the oversight regions of 22 assessors, their email addresses, and phone numbers can be accessed on the DHS website.

The IME conducted webinar listening sessions in January 2015 to solicit input for the selection of a core standardized assessment for the Health and Disability (HD), Physical Disability (PD), and HIV/AIDS Waivers. With advice from key stakeholders and advocacy groups, this engagement process for assessment selection feedback has been designed to provide access to all interested stakeholders. The IME plans to hold additional webinar listening sessions for the Elderly (E) Waiver in March 2015. New to the engagement process is the use of a survey tool to obtain feedback from Medicaid members, care givers, case managers, providers, and other stakeholders.

An informational letter will be issued by the IME regarding this assessment for the Elderly Waiver and the survey tool that will be used. More information regarding CSA and the January 2015 webinar listening sessions can be found on the CSA section of the DHS website. Information on the March 2015 webinar listening sessions will also be made available on this same website.

Member Newsletter

The latest Medicaid quarterly newsletter for members, Partners for Better Health and Wellness, is now available. The winter edition shares with Medicaid members, information on transportation services, the Iowa Medicaid Member Survey, how to handle bills from providers for covered services, and ways to keep personal information safe.

https://dhs.iowa.gov/sites/default/files/IMEMemberNewsletter_Winter15-FINAL.pdf

"Health Home Happenings" Newsletter

The Iowa Medicaid Enterprise produces a regular newsletter for Health Home providers in order to share important information regarding Health Homes. The current edition includes information on Iowa Medicaid Medically Exempt eligibility and a new Health Home pilot project to improve outcomes for select Health Homes.

Click [here](#) to read the newsletter:

https://dhs.iowa.gov/sites/default/files/HH_Provider_Newsletter_Feb.pdf

Health IT Promotion and Mailing List, Tied to SIM Initiatives

Positive improvements are on the rise in the promotion of Health Information Technology (IT) and the State Innovation Model (SIM) Initiative. There has been a recent launch of e-blasts and updates that acknowledges Iowa's success stories of providers using Health Information Technology in meaningful ways. These updates are referred to as "Health IT Wins" and are going out on a monthly basis. The document provided will give information on the five W's of the current 'WIN' for that update. These documents can be found on the Department of Human Services (DHS) website under the initiative of Health Information Technology by clicking on ["Health IT Wins."](#) If you would like to subscribe to the mailing list, you may provide your email to the EHR Provider Payment Incentive Program (PIPP) system portal.

The SIM Initiative is in the initial planning stages of establishing a statewide event notification system with funding from the State Innovation Model (SIM) Testing Grant received in December of 2014. The event notification system will assist in transforming the delivery system from volume to value. The notification system will alert care teams when a member has an ER Discharge, an Inpatient Admission, or an Inpatient Discharge.

The State of Iowa is projecting an early launch at the beginning of 2016. To support providers in improving outcomes and lowering healthcare costs in Iowa, this is one of several tools under the SIM Initiative that is planned.



The Iowa Medicaid Enterprise (IME) is an endeavor, started in 2005, to unite State staff with “best of breed” contractors into a performance-based model for administration of the Medicaid program. The Medicaid program is funded by the State and Federal government with a total budget of approximately \$5 billion. The \$5 billion funds payments for medical claims to over 43,000 health care providers statewide. Iowa Medicaid is the second largest health care payer in Iowa. The program is expected to serve over 800,000 Iowans, or 26 percent, of the population in State Fiscal Year 2016.

Iowa Medicaid programs serve Iowa’s most vulnerable population, including children, the disabled and the elderly.

We're on the web!

<http://dhs.iowa.gov/ime>

This update is provided in the spirit of information and education. The Department shall not be liable for any damages that may result from errors or omissions in information distributed in this update.