

Medicaid e-News

News and Announcements:



Iowa Medicaid COVID-19 Updates

The Iowa Medicaid Enterprise (IME) has taken a number of steps to ensure continued access to medical assistance services during the COVID-19 pandemic.

Expanded Home Delivered Meals, Homemaker, and Companion Services Due to the COVID-19 pandemic, Iowa Medicaid has expanded home delivered meals, homemaker, and companion services for members who meet specific criteria. More information on member eligibility and how to access these expanded services is on the Department of Human Services (DHS) website.

Medicaid Income Guidance

The COVID-19 stimulus payments to individuals and families is not countable income for Medicaid applicants and recipients. Stimulus payments not spent in the month it is received are excluded as a resource for 12 months. Find more guidance related to the stimulus payment and its affect on Medicaid recipients on the DHS website.

Prior Authorizations (PAs), Timely Filing

At this time, the IME is not waiving all PAs for Medicaid members. The IME is monitoring PAs daily, including the time period for approval, and will use this data to make changes, if necessary.

However, any PAs approved by the Managed Care Organizations (MCOs), dental plan administrators or the Department, for Fee-for-Service (FFS), for elective procedures that were delayed or cancelled due to COVID-19 and were

set to expire in March, April, or May 2020, will be extended for an additional 90 days from the date of expiration.

Effective with dates of services beginning April 1, 2020, providers will have an additional 90 calendar days to submit first time medical claims and encounters for managed care claims. There is currently no change to the claims filing deadline of 365 days from the date of service for dental and FFS calims.

More guidance on PAs and claims timely filing during the pandemic can be found in <u>Informational Letter 2129-MC-FFS-D-CVD</u>.

Pharmacy

The IME has implemented several pharmacy program changes due to COVID-19. More guidance on pharmacy billing services related to COVID-19 can be found in **Informational Letter 2123-MC-FFS-CVD**.

- All prior authorizations that expire soon are being extended through June 30 to allow a continuation of medication through the pandemic.
- The \$1 member co-pay for prescriptions has been suspended.
- Patient signatures for service documentation on delivered and picked up prescriptions are not required during the pandemic.

Medicaid Flexibilities Requests

The IME has submitted waivers to the Centers for Medicare and Medicaid Services (CMS) to ensure continuous coverage for recipients of medical assistance and to ensure providers are able to provide much needed services during this emergency.

A list of the requests the IME has made, along with the implementation date or status of each list, is posted on the DHS website.

Provider Frequently Asked Questions (FAQs)

In addition to the <u>Informational Letters</u> the IME has published regarding COVID-19, providers can find answers to FAQs related to COVID-19 on the <u>DHS website</u> or in the <u>Iowa Medicaid Provider Toolkit</u>.

The IME encourages providers to check the FAQ webpage regularly for the latest information.

Providers with additional questions can send them to IMECOVID19@dhs.state.ia.us.

Additional COVID-19 DHS resources

- COVID-19 DHS Resources
- Medicaid Member COVID-19 webpage
- Medicaid Provider COVID-19 webpage

Grants Available Through Iowa Developmental Disabilities Council

The Iowa Developmental Disabilities Council is offering to fund time-limited projects to assist in filling gaps in services and supports that people with developmental disabilities and families are experiencing due to the COVID-19 pandemic. The Iowa DD Council Covid-19 Relief Fund will fund grants up to \$1,000.

You can find more information on the Iowa DD Council website.

Retroactive Coverage for Children at Application

Effective for applications filed on or after January 1, 2020, a 3-month retroactive Medicaid coverage period is now available to children under age 19 at the time of application and who are otherwise Medicaid eligible.

A 3-month retroactive Medicaid coverage period will continue for pregnant women (and during the 60-day period beginning on the last day of the pregnancy), infants under one year of age and applications who are residents of a nursing facility at the time of application.

The effective date of coverage for Medicaid remains unchanged and begins on the first of the month in which the application is received.

For more information, see <u>Informational Letter 2085-MC-FFS-D</u>.

Reminders:

Changing Your MCO

Members requesting to change their MCO due to good cause first must contact their current MCO to go through their grievance process for resolution. If the issue has not been resolved following the decision of the grievance, the member may call lowa Medicaid Member Services at 1-800-338-8366. The final decision for disenrollment will be determined by DHS. More information can be found on the DHS website.

Provider Tools and Resources:

Providers are Encouraged to Verify Eligibility

The ELVS line is very busy during the first of the month. The **ELVS web portal** is another option for providers in lieu of calling the ELVS line but each provider must enroll through the Electronic Data Interchange Support Services (EDISS). The ELVS web portal allows for multiple eligibility checks and batch submission, where as the ELVS phone system only allows for one at a time.

Login ID and password may be obtained through EDISS by submitting the following <u>Access Request Form</u> to EDISS or calling EDISS at 1-800-967-7902.

If you currently do not have access to the ELVS web portal, you can register your provider at https://connect.edissweb.com. Each additional user that would like access to the provider's information can complete an Additional Access Request Form. If you have any questions regarding EDISS registration, call 1-800-967-7902.

Provider Resource Pages

Comprehensive provider resource pages are available for each MCO, featuring provider training manuals, webinars and important updates. View them below:

Amerigroup.com/IAProvider

IowaTotalCare.com/Providers

Informational Letters

Informational letters are posted through the Iowa Medicaid Portal Application (IMPA) system and are available on the DHS website. These letters communicate important policies and procedures for providers and their administrative staff.

IA Health Link Contacts

MEMBER SERVICES

PROVIDER SERVICES

 Iowa Total Care
 Iowa Total Care

 1-833-404-1061
 1-833-404-1061

Dental Wellness Plan Contacts

MEMBER SERVICES

PROVIDER SERVICES

 Delta Dental
 Delta Dental

 1-888-472-2793
 1-888-472-1205

 MCNA Dental
 MCNA Dental

 1-855-247-6262
 1-855-856-6262

Iowa Medicaid Contacts

MEMBER SERVICES

PROVIDER SERVICES

<u>Iowa Medicaid Member Services</u>
1-800-338-8366

<u>Iowa Medicaid Provider Services</u>
1-800-338-7909

Success Stories



THE RIGHT CARE, AT THE RIGHT TIME, AT THE RIGHT PLACE.



IA Health Link Success Stories

IA Health Link is a managed care program that works to make sure members get the health care that they need. Click the <u>image</u> above to read success stories.