

January 15, 2021 | Issue 1, Volume 6

News and Announcements

Public Comment Period to Amend the Iowa Wellness Plan Demonstration Waiver

Notice is hereby given that the Iowa Department of Human Services (DHS) will hold public hearings to amend the §1115 Iowa Wellness Plan (IWP) Demonstration Waiver to provide dental benefits for children through prepaid ambulatory health plans (PAHPs).

Hearings offer an opportunity for the public to provide written or verbal comments about the IWP Demonstration Waiver amendment. All comments will be summarized and taken into consideration prior to submission to the Centers for Medicare and Medicaid Services (CMS). Hearings will be held at the following dates, times, and locations:

January 20, 2021

1:30 to 2:30 p.m.

JOIN NOW via Zoom

Call: 312-626-6799

Meeting ID: 959 2360 9141

Passcode: 295230

January 21, 2021

9:30-10:30 a.m.

JOIN NOW via Zoom

Call: 312-626-6799

Meeting ID: 995 8612 3237

Passcode: 556364

Currently, Medicaid-enrolled children in the State receive State Plan dental benefits via a fee-for-service delivery system. Meanwhile, adult DWP benefits are delivered via a managed care delivery system; the State contracts with two PAHPs for the delivery of dental services to the DWP population. Additionally, children in the Children's Health Insurance Program (CHIP), Hawki in Iowa, also receive dental benefits via a PAHP. The State seeks to provide dental benefits to children via PAHPs through this amendment as this mechanism will allow the State to better coordinate dental care for children, helping to promote oral health in an accessible and cost-effective manner. The State only seeks to enroll children in PAHPs; there are no proposed changes to children's dental benefits. They will remain exempt from the incentive structure required for adult enrollees in the Dental Wellness Plan, and all enrollees under 21 years of age will continue to be eligible for medically necessary services in accordance with federal early and periodic screening, diagnostic and treatment (EPSDT) requirements.

The complete public notice can be found on the [DHS website](#). Written comments may be addressed to Heather Miller, Iowa Medicaid Enterprise, 1305 E. Walnut Street, Des Moines, IA 50319, or sent via email to hmiller@dhs.state.ia.us.

All comments must be received by February 10, 2021 at 4:30 p.m.

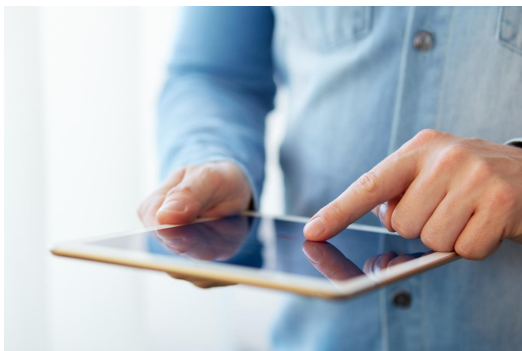
COVID-19 Public Health Emergency (PHE) Extended

Last week, the U.S. Department of Health and Human Services (HHS) extended the COVID-19 Public Health Emergency (PHE) for an additional 90 days. The PHE is now scheduled to expire on April 20, 2021, unless it is extended again. You can find more information on the renewal of the PHE, [here](#).

The renewal of the PHE means that all of the Department's waivers and flexibilities currently in place will stay in place through at least the end of the PHE. The Department has submitted a request to CMS to extend the flexibilities for 1915(c) waiver providers and members for six months following the end of the PHE.



Electronic Visit Verification (EVV) Update



The Department has decided to delay the used of the Managed Care Organization (MCO) Electronic Visit Verification (EVV) solution for assisted living facilities (ALFs) until July 1, 2021.

While EVV implementation was effective January 1, 2021, for Consumer Directed Attendant Care (CDAC) and Homemaker providers, and Consumer Choices Options employees, claims not submitted via the CareBridge EVV solution will be accepted by both MCOs for services provided through January 31, 2021.

Effective February 1, 2021, for all applicable providers (except ALFs), claims not submitted via the CareBridge EVV solution will be denied. All EVV-required personal care and homemaker services rendered on or after February 1, 2021, must use the CareBridge EVV solution or claims will be denied.

More information on EVV can be found at the Department's dedicated [EVV webpage](#).

CARES Act Spending Deadline Extended Through June 30, 2021

With the recent federal approval of the COVID-19 Emergency Relief Package, the deadline has been extended for when providers must use funds from the Coronavirus Aid, Relief and Economic Security (CARES) Act.

Providers now have until June 30, 2021, to use CARES Act funding on eligible expenses. The previous deadline was December 30, 2020. The June 30, 2021, deadline is a State requirement to allow time for the State to recoup any unused funds and complete all necessary reporting requirements.

This extension applies to all providers who received grants from the IME through the distributions described in [Informational Letter \(IL\) 2173-MC-FFS-CVD](#) and [IL 2194-MC-FFS-CVD](#). All requirements of the CARES Act as listed in ILs 2173 and 2194 remain in effect; only the deadline for spending the grant funds has changed. Providers also should review federal guidance regarding the CARES Act and the COVID-19 Emergency Relief Package.

Complete details are forthcoming in IL 2208-MC-FFS-CVD.

Medicaid Coverage for Citizens of Palau, the Marshall Islands, and the Federated States of Micronesia Living in the U.S.

The 2021 Consolidated Appropriations Act (CAA) was signed into law on December 27, 2020. Section 208 of the CAA adds Medicaid coverage for citizens of Palau, the Marshall Islands, and the Federated States of Micronesia living in the United States through treaties known as the Compacts of Free Association (COFA).

A drafting error in previous federal legislation caused COFA migrants to be barred from receiving full Medicaid coverage since 1996. While the State of Iowa utilized a state option made available in subsequent federal legislation in 2010 to offer full Medicaid to otherwise-eligible COFA migrants under age 21, Iowa Medicaid was unable to offer full Medicaid to COFA migrants age 21 and over.

This new legislation requires all states to now provide full Medicaid to all otherwise-eligible COFA migrants. As a result, COFA migrants of all ages who apply for Medicaid and meet all other Medicaid eligibility requirements (e.g. income limits, cooperation with Medicaid program requirements, etc.) will be eligible for full Medicaid in their state of residence. While a 5-year bar on Medicaid eligibility is imposed on some categories of immigrants, the legislation exempts COFA migrants from the 5-year bar.

The Department is awaiting further guidance from CMS, and has begun developing an implementation plan to provide Medicaid coverage to the COFA migrant population as soon as possible.

Future updates will be released in an IL and posted on the Department's website.

IA Health Link Contacts

MEMBER SERVICES

Amerigroup Iowa
1-800-600-4441

Iowa Total Care
1-833-404-1061

PROVIDER SERVICES

Amerigroup Iowa
1-800-454-3730

Iowa Total Care
1-833-404-1061

Dental Wellness Plan Contacts

MEMBER SERVICES

Delta Dental
1-888-472-2793

MCNA Dental
1-855-247-6262

PROVIDER SERVICES

Delta Dental
1-888-472-1205

MCNA Dental
1-855-856-6262

Iowa Medicaid Contacts

MEMBER SERVICES

Iowa Medicaid Member Services
1-800-338-8366

PROVIDER SERVICES

Iowa Medicaid Provider Services
1-800-338-7909

IA Health Link Success Stories

IA Health Link is a managed care program that works to make sure members get the health care they need. Click the image at the right to read IA Health Link success stories.



Iowa Medicaid Enterprise | dhs.iowa.gov

