



2024 Legislative Session: Iowa Medicaid Update

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(Administration and Medicaid)

Iowa Medicaid Mission and Vision

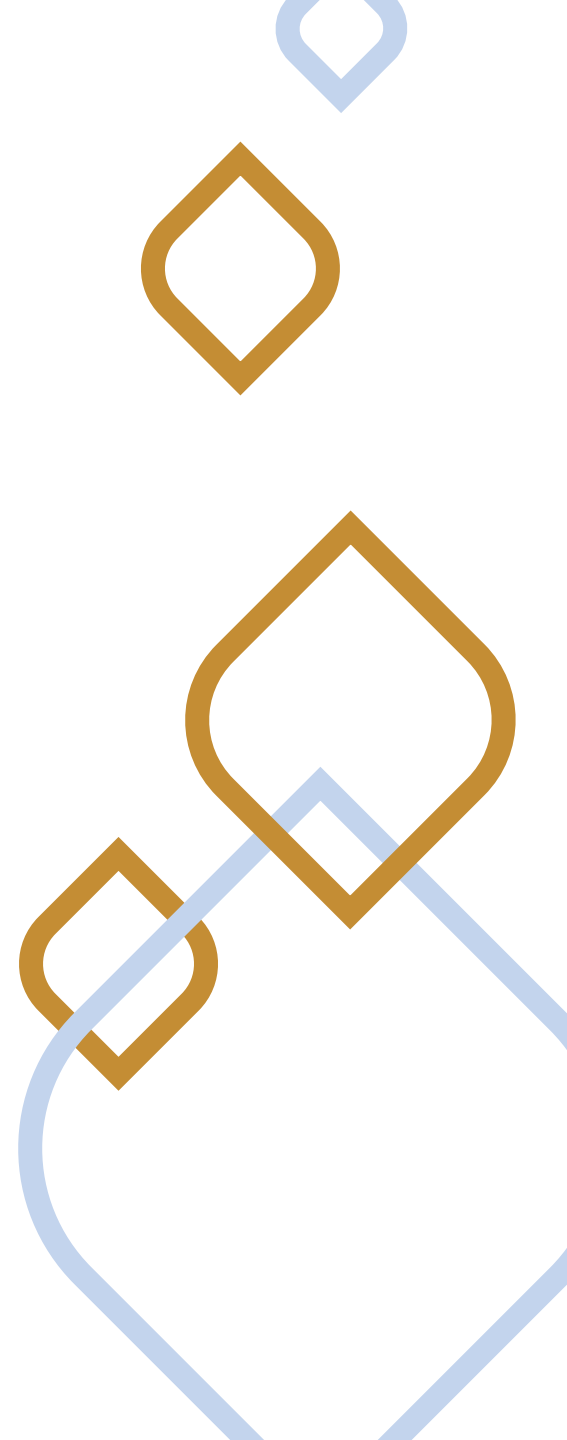
Mission

Iowa Medicaid is committed to ensuring that all members have equitable access to high quality services that promote dignity, barriers are removed to increase health engagement, and whole person health is improved across populations.

Vision

Iowa Medicaid works diligently to operate a fiscally responsible and sustainable program that improves the lives of its members through effective internal and external collaboration, innovative solutions to identified challenges, and data driven program improvement.

Legislative Implementation



Rate Increases

2021

- Legislature appropriated \$11,002,240 to increase HCBS reimbursement rates which resulted in a 3.55% increase to the rates, beginning July 1, 2021. \$19 million was also invested in Nursing Facility rebased rates and additional investments were made to PMIC, Habilitation, Home Health, Air Ambulance, and pharmacy dispensing fee rates.

2022

- \$14.6 million in APRA funds were used to increase HCBS reimbursement beginning July 1, 2022. Investments were also made in Home Health, BHIS, Psychiatric Intensive Care, and ABA.

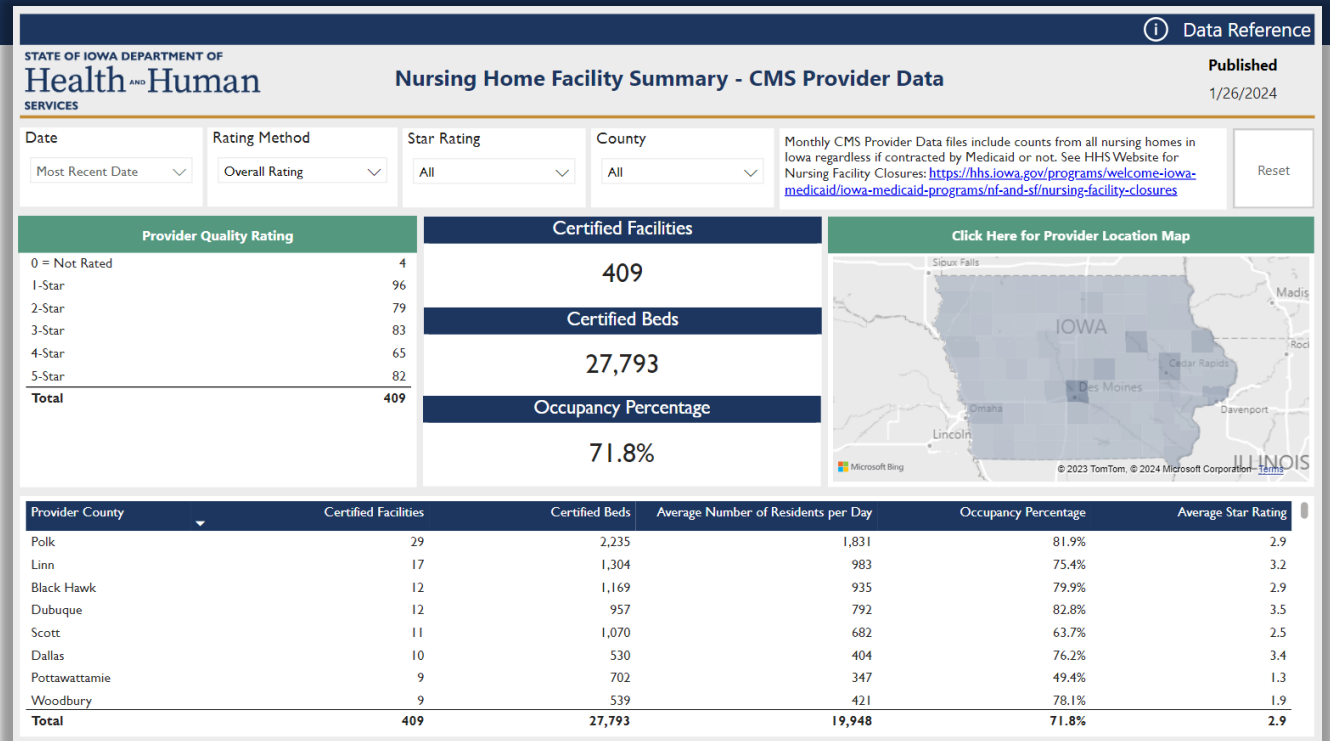
2023

- Legislature appropriated \$5.5 million dollars to maintain the reimbursement rates of eligible HCBS providers implemented with ARPA funds. Additionally, \$13 million dollars were appropriated to increase rates for mental health therapy, substance use residential treatment, and PMIC following first annual provider rate review and \$15 million dollars were invested in Nursing Facility rebased rates.

Nursing Facility Dashboard

The Nursing Facility Dashboard went live in January 2024.

View the nursing facility dashboard at https://hhs.iowa.gov/dashboard_welcome.



Sex Offender Nursing Facility Report

Summary

- **Legislation Overview (HF 708):**
 - HF 708 requires HHS to establish a reimbursement add-on method by January 1, 2024.
 - The goal is to support Medicaid services for sex offenders in secure units within SNFs or NFs under Iowa Code, Chapter 692.
- **Intent of Legislation:**
 - Set a rate for proper care of sex offenders in SNFs and NFs.
 - Ensure the health, safety, and wellbeing of staff and residents in Iowa SNFs and NFs.

MCO Premium Tax

01

Background

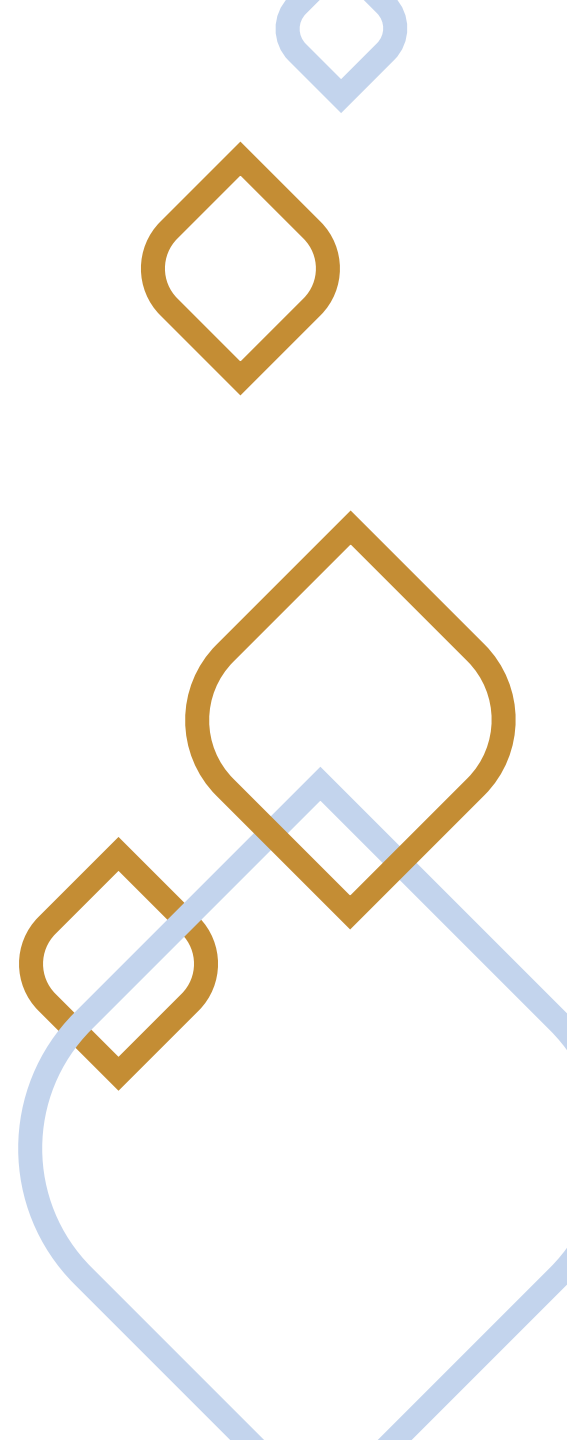
02

Progress

03

Current State

Innovation



Hope and Opportunity in Many Environments (HOME)

Iowa HHS rebranded its name for the Community-Based Services Redesign.

The new name is Hope and Opportunity in Many Environments, or HOME.



The new name better reflects the hope that comes with having the ability to choose where to live and what services you receive from Medicaid.

Community-Based Services Evaluation

01

Iowa's community-based services (CBS) system is working better for some people than others.

02

We evaluated the parts of the system to learn what works well and what does not.

03

We found that Iowa could better align services with people's needs to help the system work well for everyone.

Guiding Principles



Equitable
Access



High Quality
Services



Coordinated
Across
Systems



Proven
Valuable



Effective and
Accountable

HOMEtown Conversations



How will we achieve HOME?

1

Iowa HHS is redesigning its community-based services (CBS) to make maintaining health, social connection and quality of life possible.

2

HOME is focused on ensuring that Iowa's CBS system works for everyone, so all Iowans can access high-quality services in their communities.

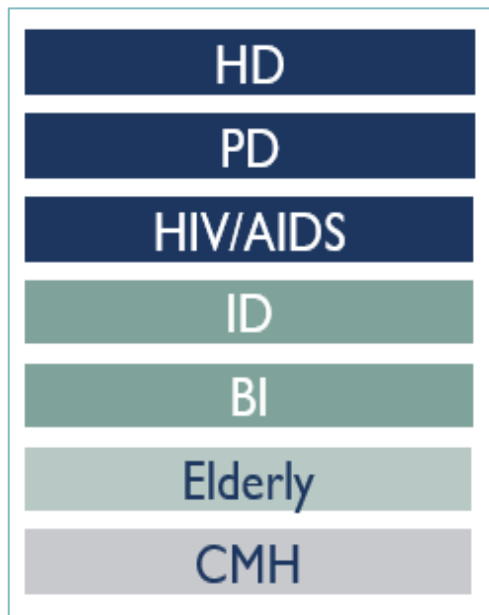
3

We need to work together and hear input from Iowans to make the right changes to the CBS system.

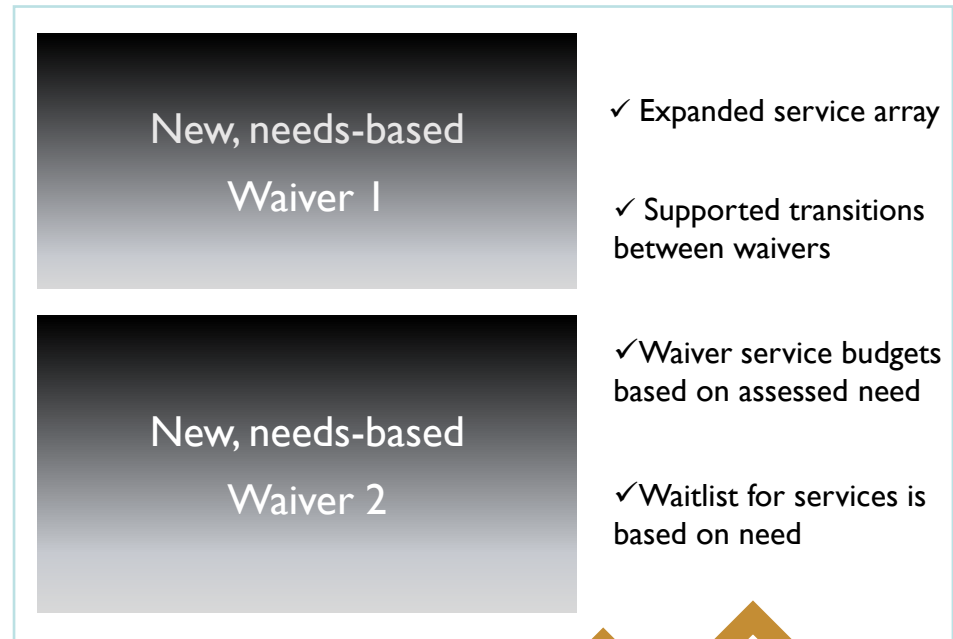


Waiver Redesign Vision

Current diagnosis-based waivers



Future needs-based waivers



Next Steps



Streamline screening and enrollment



Needs On Waitlist (NOW) Survey



Align services to needs, goals and preferences



Improve access to services and supports for lowans



Monitor quality of services

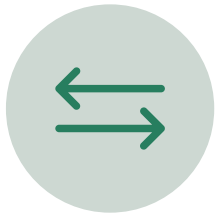
Directed Payment Program



Ground Emergency Medical Transportation (GEMT) has moved from 68 enrolled EMS providers two years ago to over 90 enrolled for FY24.



The dental enhanced fee schedule will bring dental payments up to the average commercial rate for University of Iowa and Broadlawns dental services.



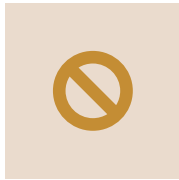
Trialing the use of Transportation Network Companies, like Lyft, in the NEMT space to improve medical transportation.



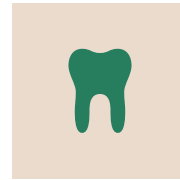
A directed payment recently approved by CMS will increase revenue for 121 privately operated hospitals across Iowa.



Challenges with the Dental Program



Lack of choices



Instability of contracts/dental coverage



Lack of innovation in manages care practice



Outdated contract terms



Lack of competition



Misaligned with Iowa Medicaid's vision for integrated healthcare

What Medicaid Wants to Accomplish with an RFP

To align dental plans with MCO contract requirements, oversight, accountability and procurement style.

Incent innovation and high performance.

Allow flexibilities in dental reimbursement.

Alignment in populations covered to increase continuity as members transition eligibility groups.

Better coordination of care for members.

Increase member choice.

Adjustments to Dental Rates

Based on last year's Medicaid provider rate review, rates are being adjusted to be more equitable compared to the benchmark.

Rate Change Table Based on Option I	
Category	Category Rate Change %
DIAGNOSTIC	26.15%
ORTHODONTICS	-71.94%
PREVENTIVE	26.15%

2024 Rate Review

- First few years focused on raising all rates to 85% of benchmark
- Proposed increases this year to:
 - Medical supplies
 - Physician assistants
 - Physical and occupational therapy
 - Certified nurse midwife
 - Community mental health center
- Targeted increases to address access needs
 - Home and community-based services
 - Home health



Iowa Medicaid Dashboard Homepage

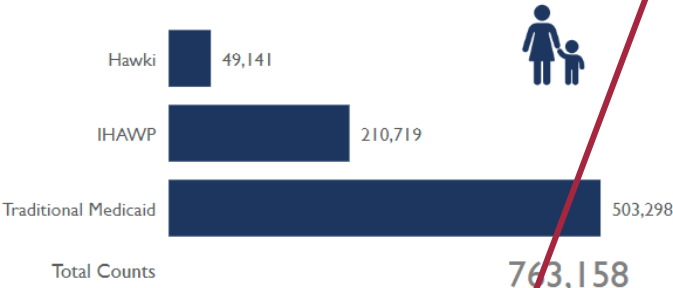
High-level enrollment and financial overviews

Additional topics available

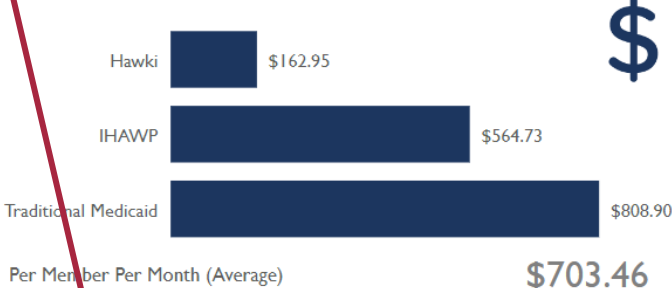
High-level enrollment and financial overviews

STATE OF IOWA DEPARTMENT OF **Health AND Human SERVICES** Iowa Medicaid Dashboard Medical Dental

Reporting Period: SFY24 Q1 (Jul-Sep 2023) Published: 1/12/2024



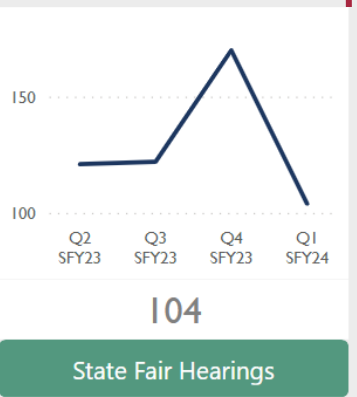
Enrollment Summary Dashboard



Financial Summary Dashboard

- Facility
- Waiver
- Outcomes
- Call Centers
- Network Access
- Program Integrity
- Quality Scores

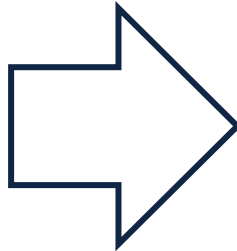
Trending



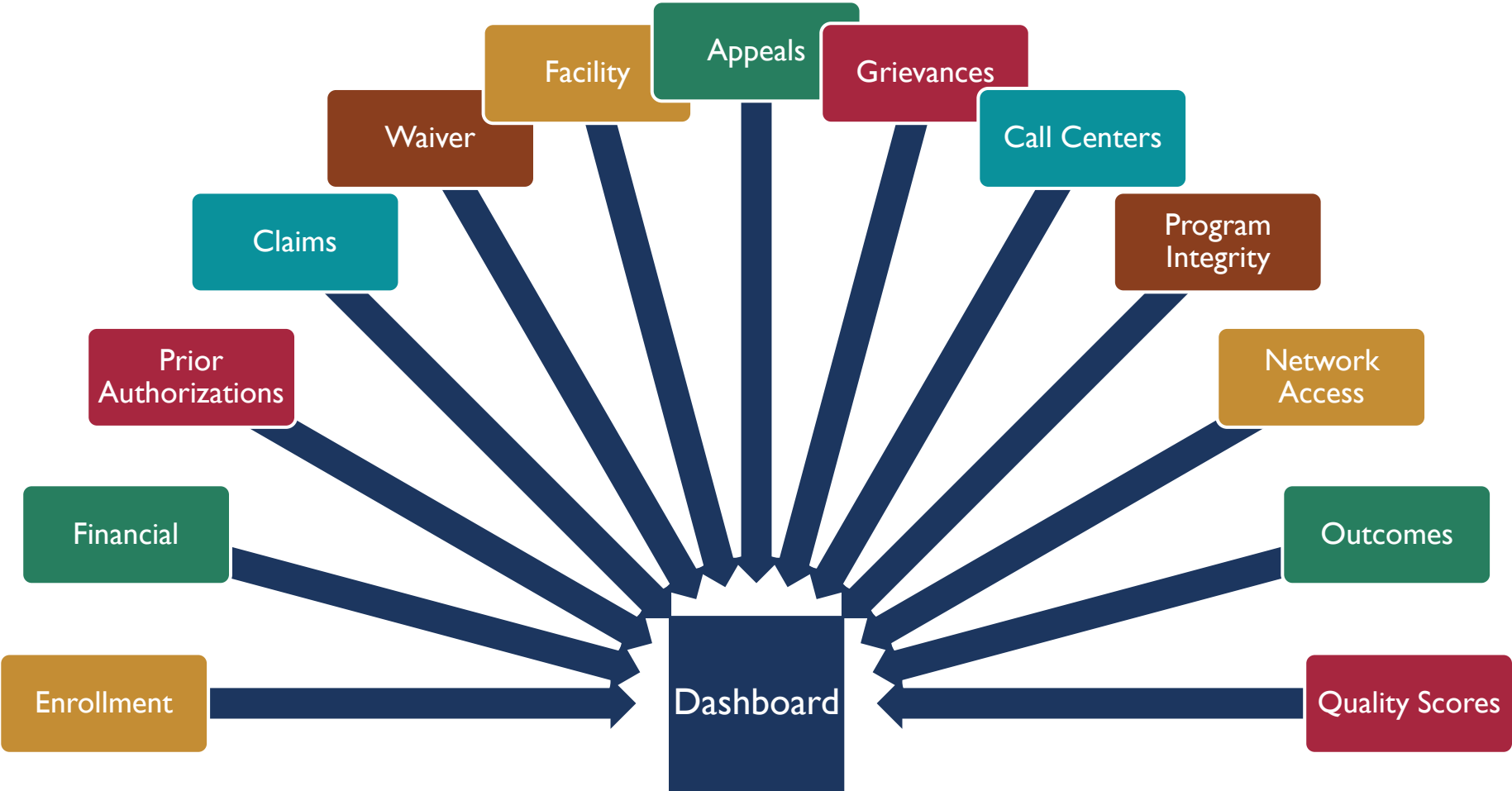
Iowa Medicaid Dashboard 2.0

PDF to Dashboard Reporting

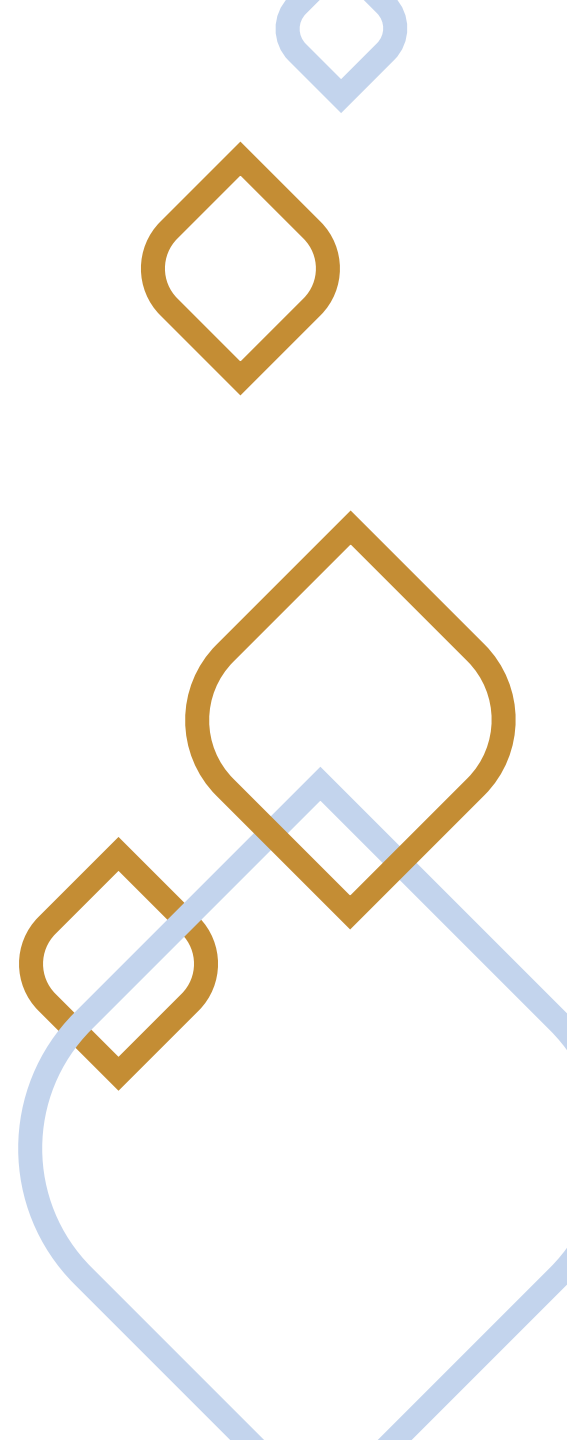
- In fall 2022, Iowa Medicaid formed a team to turn quarterly and yearly MCO reports into an interactive digital dashboard.
- This tool aims to evaluate MCOs and highlight areas for improvement.
- The dashboard not only includes existing "Medical" reports but also now features "Dental" and Fee-For-Service (FFS) data that wasn't previously shown.



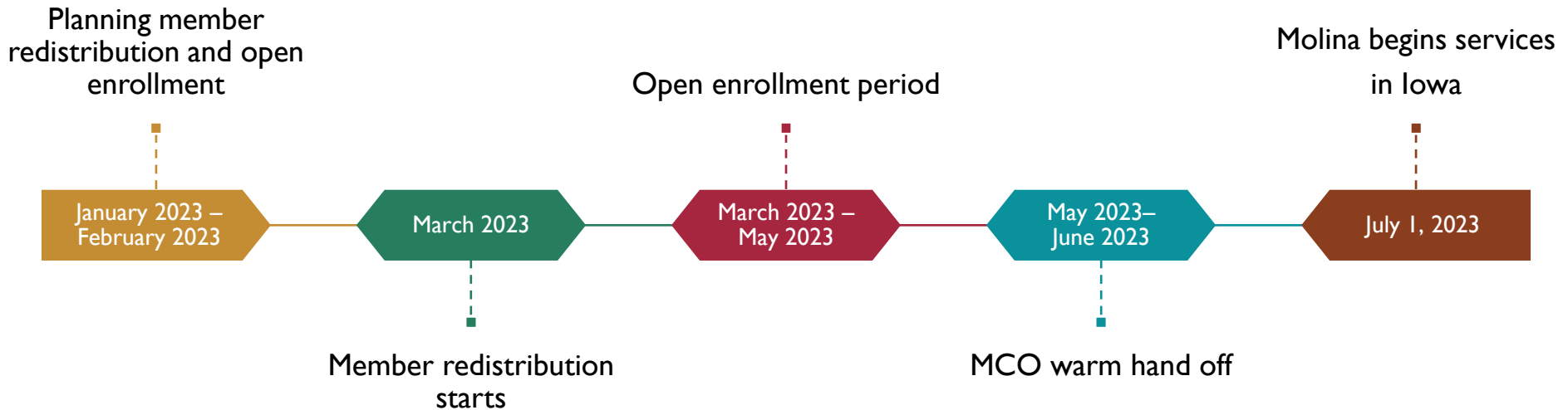
Topics Included in the Iowa Medicaid Dashboard



Managed Care Update



Molina Onboarding Timeline



Molina Onboarding Summary



Success



Collaboration



Communication





SFY2024 MCO Contracts and Rates

Iowa HHS recently executed two contracts with Wellpoint (formerly Amerigroup) and Molina (MOL) to administer the Iowa Health Link Program.

- The Iowa Total Care (ITC) contract was amended to align all three contracts.
- In addition to the contracts, there have been three amendments executed to include changes to rates and update contract language based on Iowa Legislation.

These contract and amendments are still pending approval by CMS and may be subject to change.



MCO Contract Changes



Updated federally mandated language



Updated State Directed Payments



SFY24 Updated Capitation Rates



Clarified requirements related to Individual Service Coordination and treatment planning for mental health and substance use disorders



Added requirements and additional oversight for single case agreements



MCO reporting adjustments



Iowa Medicaid reviews updates the MCO reporting manual annually.

MCO Amendments in Progress

1

Add In Lieu Services
for HCBS waitlist

2

Add Managed Care
Premium Tax

3

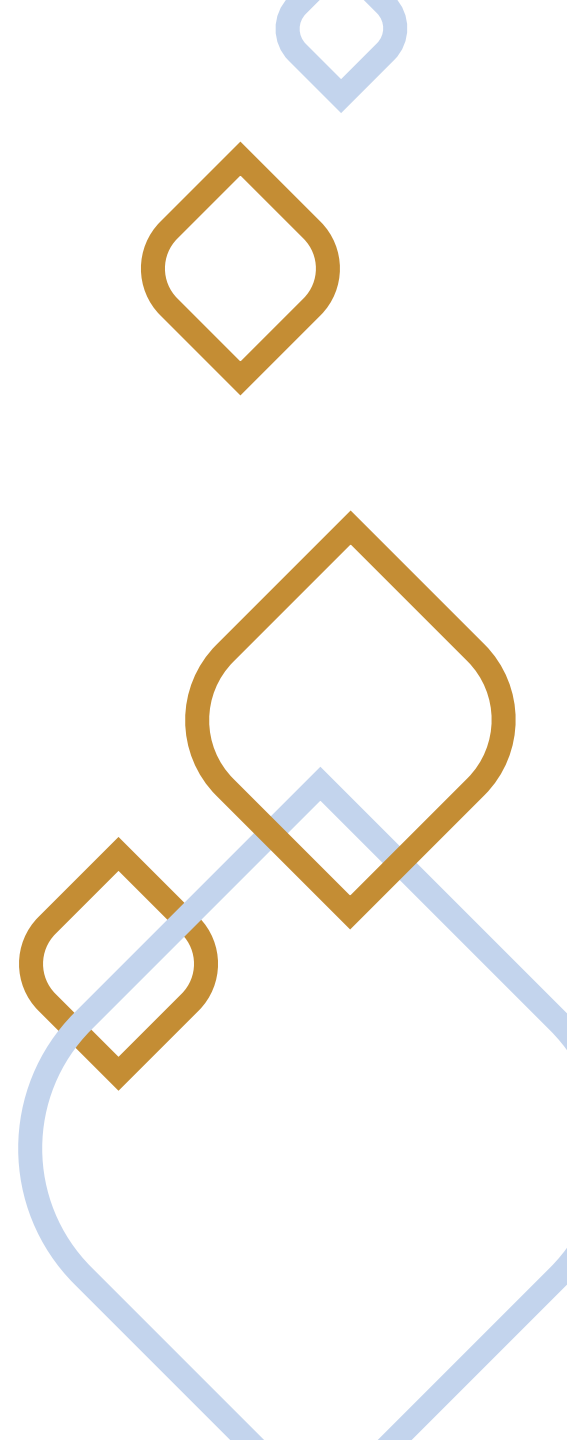
Add Directed
Payment Program for
Hospital Inpatient and
Hospital Outpatient
Services

4

Remove Public Health
Emergency language
and requirements



Continuous Coverage Unwind



Continuous Coverage Unwind Update

1

On December 29, 2022, the Consolidated Appropriations Act was signed into law.

This law included updated language within the Families First Coronavirus Response Act that 'de-linked' the Medicaid continuous coverage requirement from the federal PHE.

This set a final date of the continuous coverage requirement of March 31, 2023.

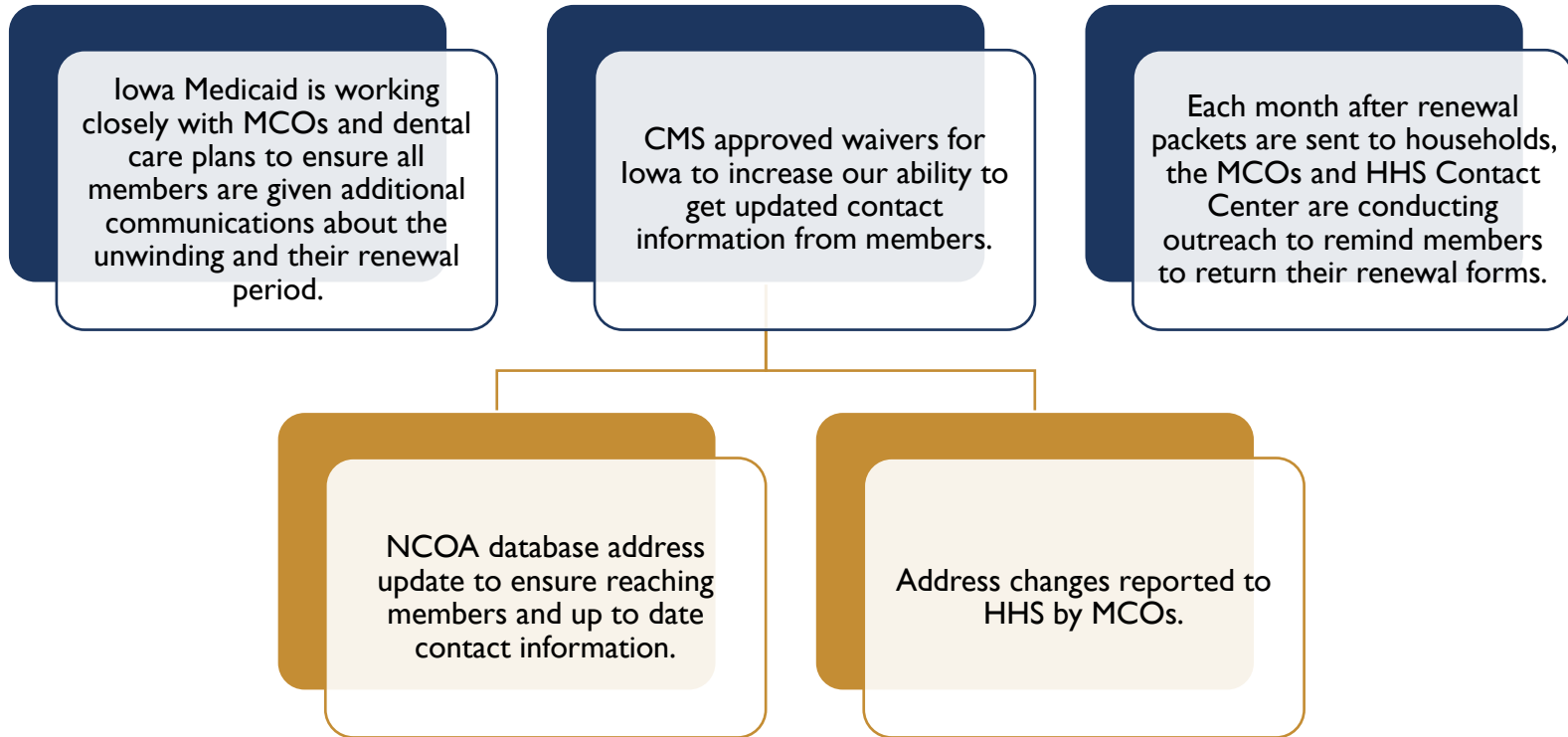
2

Prior to the continuous coverage requirement ending, CMS issued guidance that outlined Medicaid eligibility processing requirements for states during an unwinding period after the continuous coverage requirement ended.

3

All states are required by CMS to conduct a full review of eligibility for all individuals on Medicaid consistent with federal requirements prior to discontinuing their coverage.

MCO Engagement



Thank You

