
STATE OF IOWA DEPARTMENT OF

Health ^{AND} Human

SERVICES

FFS Iowa Health Home Program IMPA

May 2024

IMPA Training

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Iowa Medicaid Portal Access

Introduction

- What is IMPA?

IMPA is a portal the Health Homes use to manage enrollment and disenrollment for your fee-for-service member, make updates to the member's assessment, upload and view documents, as well as utilize reports to manage the Medicaid population.

- Who would benefit from IMPA?

Health coaches, care coordinators, and billing staff are some of the staff that may utilize IMPA for the Health Home program. It is important to provide access to any staff that will be managing this patient population and attesting for payment.

Iowa Medicaid Portal Access Objectives

- Objectives
 - Understand how to submit an enrollment request, update an assessment, upload and view documents, view member demographic and eligibility information, or disenroll a fee-for-service member.
 - Learn the reporting functions within IMPA to know when members are actively enrolled and assessments are coming due.

How to obtain IMPA access

- Navigate to <https://secureapp.dhs.state.ia.us/impa/Default.aspx>
Click the hyperlink “Click here for the User Registration Guide”

Once you have created your profile you will be redirected to the login page.

Health Home IMPA Access

- For Health Home IMPA access, complete and submit the Health Home IMPA Access Request Form: <https://www.tfaforms.com/5057291>
 - Health Home IMPA access includes access to:
 - Member Lookup
 - Health Home Reporting
 - Critical Incident Reporting
 - File upload
 - CSA
 - Health Home
 - HCBS Residential Assessment
- Note: If you currently have IMPA access but do not have access to one or more of the components listed above, complete and submit the Health Home IMPA Access Request Form using the link above.
- If you have IMPA access questions/issues or need assistance with completing the IMPA Access Request Form, please email the IMPA Support team @ impasupport@dhs.state.ia.us.

Access to other Information for Health Homes

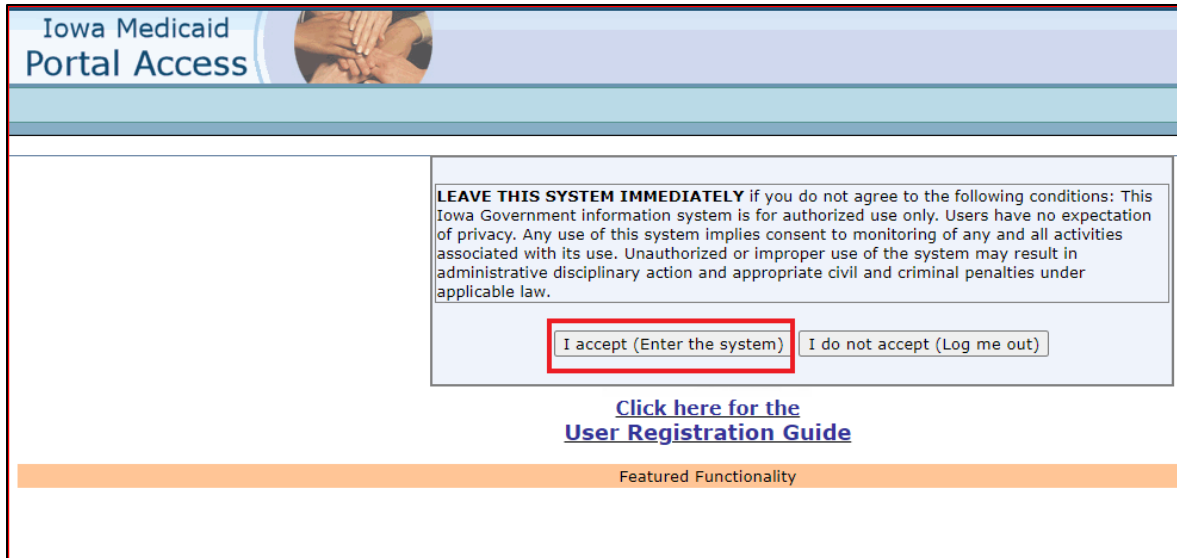
- [HCBS Residential Assessment Process](#)
- [To find Informational Letters](#)
- To subscribe to Informational Letters, contact impasupport@dhs.state.ia.us
- [Integrated Health Home Provider webpage](#)
- [Critical Incident Report Process](#)

IMPA Training

Logging On

Logging On

Once signed into IMPA you will be asked to accept conditions of the program.



Iowa Medicaid
Portal Access

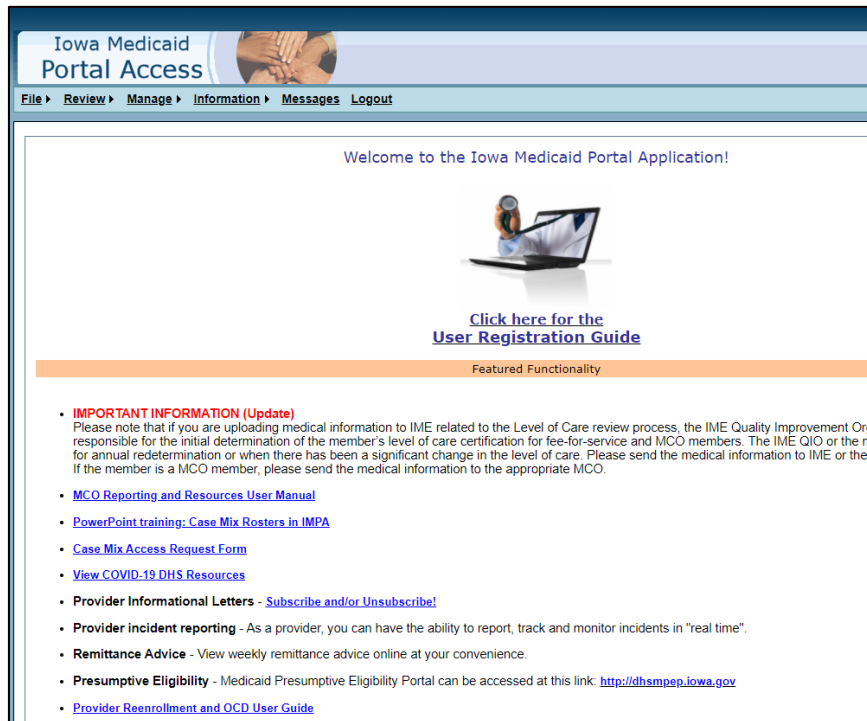
LEAVE THIS SYSTEM IMMEDIATELY if you do not agree to the following conditions: This Iowa Government information system is for authorized use only. Users have no expectation of privacy. Any use of this system implies consent to monitoring of any and all activities associated with its use. Unauthorized or improper use of the system may result in administrative disciplinary action and appropriate civil and criminal penalties under applicable law.

[Click here for the User Registration Guide](#)

Featured Functionality

Logging On (continued)

- Once signed into IMPA this is your home screen.



The screenshot shows the Iowa Medicaid Portal Access home screen. At the top, there is a header with the text "Iowa Medicaid Portal Access" and a navigation menu with links for "File", "Review", "Manage", "Information", "Messages", and "Logout". Below the header, a welcome message reads "Welcome to the Iowa Medicaid Portal Application!". In the center, there is an illustration of a person sitting at a desk with a laptop. Below the illustration, a link says "Click here for the User Registration Guide". A section titled "Featured Functionality" contains a list of items:

- **IMPORTANT INFORMATION (Update)**
Please note that if you are uploading medical information to IME related to the Level of Care review process, the IME Quality Improvement Orga responsible for the initial determination of the member's level of care certification for fee-for-service and MCO members. The IME QIO or the me for annual redetermination or when there has been a significant change in the level of care. Please send the medical information to IME or the a If the member is a MCO member, please send the medical information to the appropriate MCO.
- [MCO Reporting and Resources User Manual](#)
- [PowerPoint training: Case Mix Rosters in IMPA](#)
- [Case Mix Access Request Form](#)
- [View COVID-19 DHS Resources](#)
- **Provider Informational Letters** - [Subscribe and/or Unsubscribe!](#)
- **Provider incident reporting** - As a provider, you can have the ability to report, track and monitor incidents in "real time".
- **Remittance Advice** - View weekly remittance advice online at your convenience.
- **Presumptive Eligibility** - Medicaid Presumptive Eligibility Portal can be accessed at this link: <http://dhsmpep.iowa.gov>
- [Provider Reenrollment and OCD User Guide](#)

Logging On (continued)

- When logging into IMPA for the first time you will be directed to choose three security questions that will be used for password resets and maintenance of your account.
 - Choose a security question from the dropdown box, answer the question.
 - You must choose 3 different security questions.
 - When all 3 questions have been chosen and answered, click on the SAVE button. This will record your answers and you will be directed to the main portal page.
 - (Only you will know these secret questions and answers. If you forget them, Iowa Medicaid staff will not be able to help you in retrieving them.)



The screenshot shows the 'Iowa Medicaid Portal Access' interface. At the top, there is a header with the text 'Iowa Medicaid Portal Access' and a small image of a person's hands. Below the header, there is a section titled 'Instructions' with the text: 'These are the security questions that you will need to answer if you need to reset your password. Choose 3 different questions and enter your answers.' Below the instructions, there is a list of 15 security questions, each with a corresponding input field. The first question, 'What was your childhood nickname?', is selected and highlighted in blue. To the right of the questions, there is a 'Save' button and a 'Department of Human Services' logo.

IMPA Training

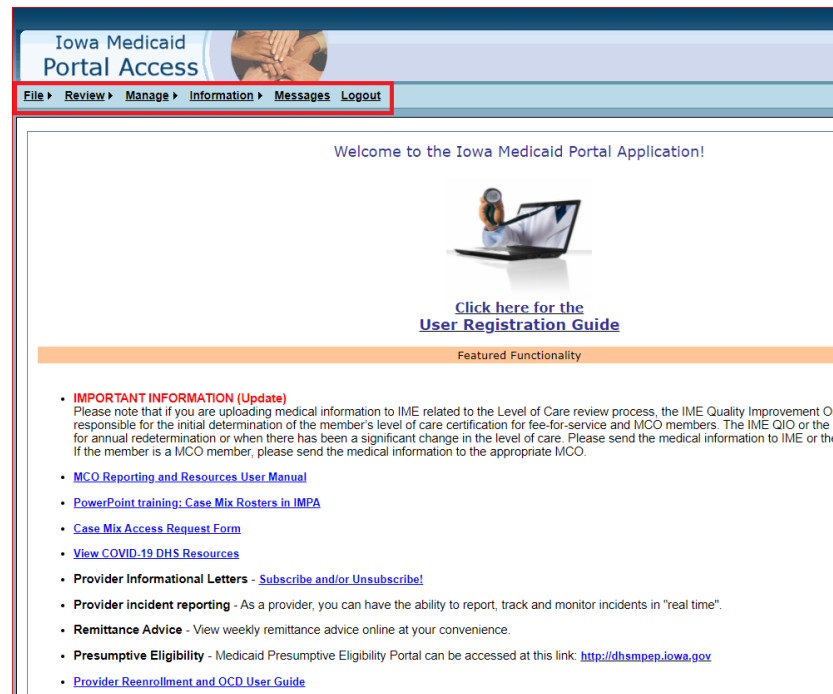
The Home Screen

The Home Screen

At the top of the IMPA Home Screen are the functions of IMPA. Please note that capabilities shown below may vary slightly from what you see when logged in.

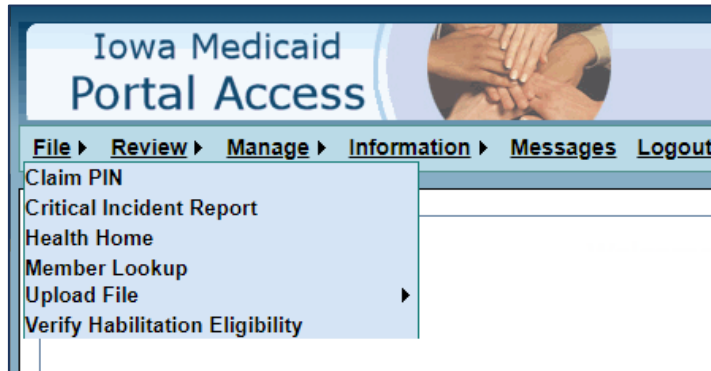
The tabs across the top:

- File
- Review
- Manage
- Information
- Messages
- Logout

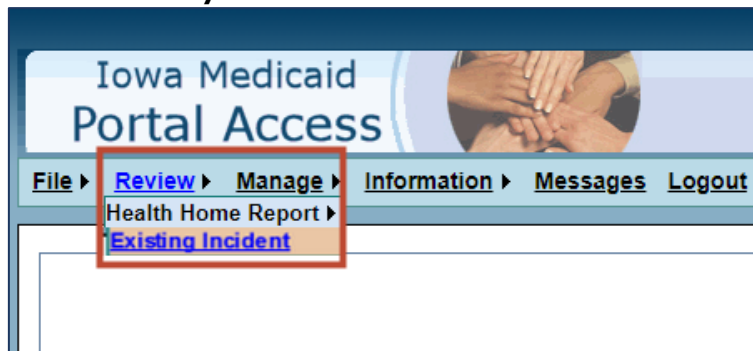


The Home Screen (continued)

- Hovering over file, you will work with Health Home, Member Lookup, and Upload File.



- Hovering over Review, you will work with Health Home Report and Existing Incident



IMPA Training

Member Look-Up & Eligibility

Member Lookup

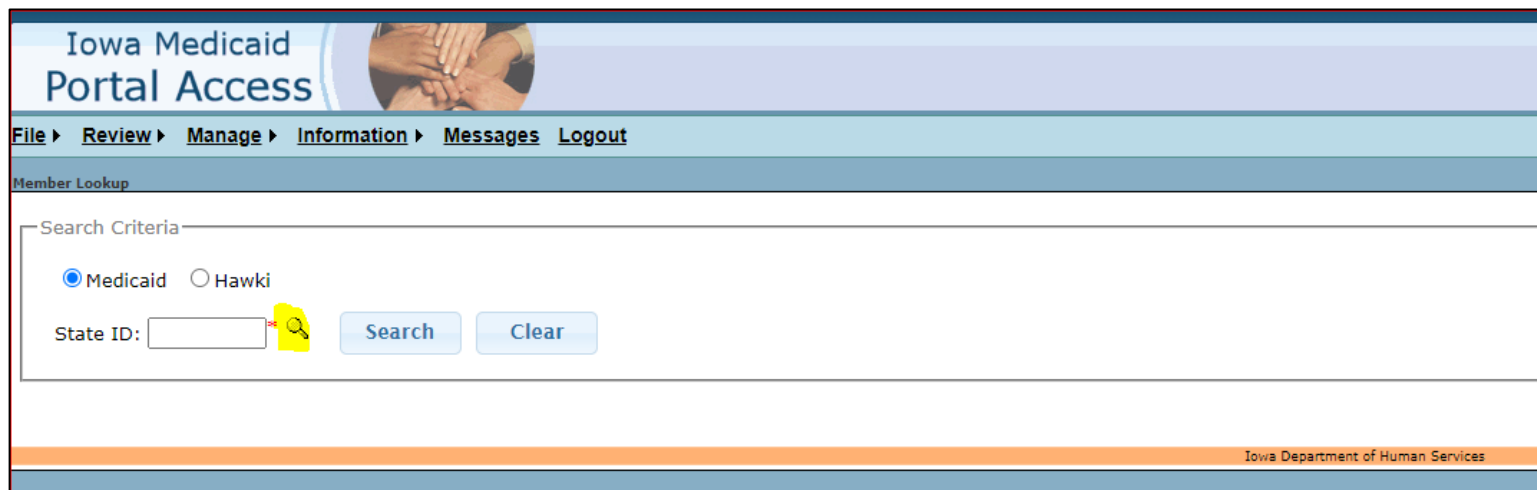
- Member Lookup is used to look up a member using their State ID.
- Navigate to File. Select “Member Lookup”
- Enter the member’s State ID - selecting Medicaid or Hawki will impact your search
- Click “Search”



The screenshot shows the Iowa Medicaid Portal Access interface. At the top, there is a header with the text "Iowa Medicaid Portal Access" and a background image of hands stacked together. Below the header is a navigation menu with links: File, Review, Manage, Information, Messages, and Logout. The main content area is titled "Member Lookup". Underneath, there is a "Search Criteria" section with two radio buttons: "Medicaid" (selected) and "Hawki". Below the radio buttons is a text input field labeled "State ID:" with a red border, a magnifying glass icon to its right, and two buttons: "Search" (with a red border) and "Clear".

Advanced Search

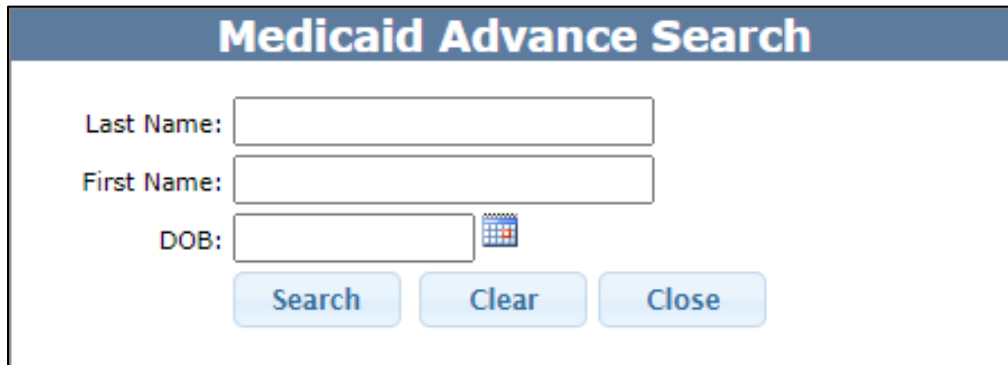
- The Advanced Search option allows you to search for a member using the member's name and/or date of birth
 - Click on “Member Lookup”
 - Click the spyglass next to “State ID”



The screenshot shows the Iowa Medicaid Portal Access interface. At the top, there is a header with the text "Iowa Medicaid Portal Access" and a small image of hands. Below the header is a navigation menu with links: "File", "Review", "Manage", "Information", "Messages", and "Logout". The main content area is titled "Member Lookup" and contains a "Search Criteria" section. This section has two radio buttons: "Medicaid" (which is selected) and "Hawki". Below the radio buttons is a text input field labeled "State ID:" with a yellow spyglass icon to its right. To the right of the input field are two buttons: "Search" and "Clear". At the bottom right of the page, there is a footer that reads "Iowa Department of Human Services".

Advanced Search (continued)

- A search box will open
- Enter the member's last name, first name, and/or date of birth
- Click "Search"



The screenshot shows a web form titled "Medicaid Advance Search". It contains three input fields: "Last Name:", "First Name:", and "DOB:". The "DOB:" field includes a calendar icon. Below the input fields are three buttons: "Search", "Clear", and "Close".

Advanced Search (continued)

- The first 15 active and tentative members will display
- You can choose from the list by clicking “select” OR modify the search for narrowed results.
- Click “Close” to close the Medicaid Advance Search screen

The screenshot shows the Iowa Medicaid Portal Access interface. At the top, there is a navigation menu with options: File, Review, Manage, Information, Messages, and Logout. The main heading is "Iowa Medicaid Portal Access". Below this, there is a "Member Lookup" section with "Search Criteria" including radio buttons for "Medicaid" (selected) and "Hawki", and a "State ID" field with a search icon and "Search" and "Clear" buttons. To the right, the "Medicaid Advance Search" section contains input fields for "Last Name", "First Name", and "DOB" (with a calendar icon), and "Search", "Clear", and "Close" buttons. A red message states: "Currently showing 15 members. Please select one OR refine search to continue." Below this is a table with columns "State ID", "Name", and "Birth Date". Each row in the table has a blue "Select" link to its left.

| State ID | Name | Birth Date |
|------------------------|------|------------|
| Select | | |
| Select | | |
| Select | | |
| Select | | |
| Select | | |
| Select | | |
| Select | | |
| Select | | |
| Select | | |
| Select | | |
| Select | | |
| Select | | |
| Select | | |
| Select | | |
| Select | | |

Member Tab

- The Member tab displays the member's name, Medicaid State ID, DOB, gender, Medical Exempt Status, and Federal Poverty Level Eligibility

Member Lookup

Search Criteria

Medicaid Hawki

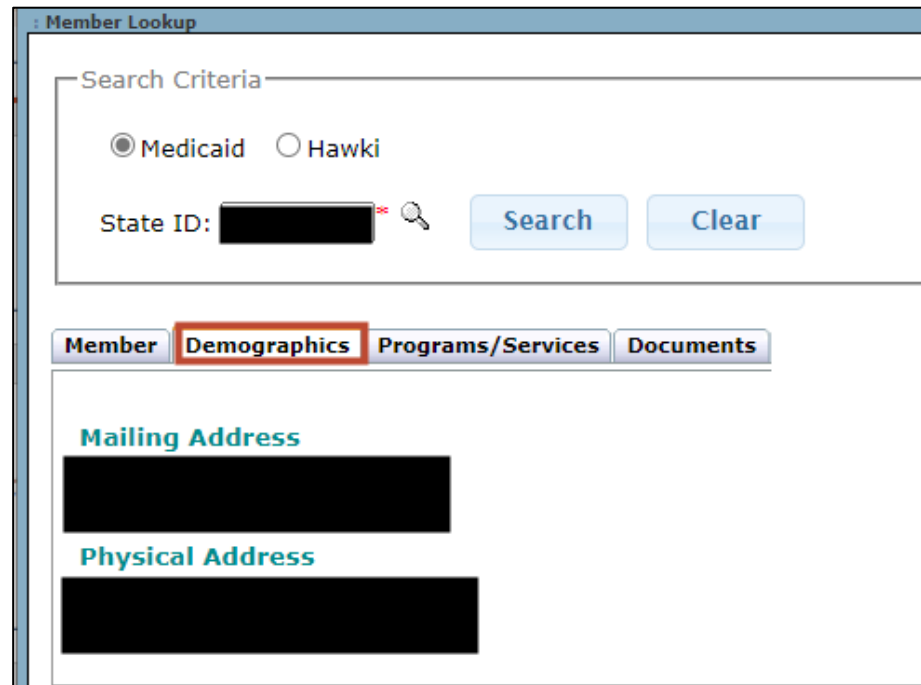
State ID: [REDACTED]

Member Demographics Programs/Services Documents

| | | |
|---------------------------------|---------------------------|--|
| Medicaid State ID [REDACTED] | Member Name [REDACTED] | Medical Exempt Status Medically Exempt |
| Date of Birth [REDACTED] | Gender Female | Federal Poverty Level Eligible |

Member Demographics Tab

- The Demographics tab displays the member's:
 - Mailing address
 - Physical address



The screenshot shows a web application window titled "Member Lookup". It features a "Search Criteria" section with radio buttons for "Medicaid" (selected) and "Hawki". Below this is a "State ID" input field with a search icon and two buttons: "Search" and "Clear". A navigation bar below the search section contains four tabs: "Member", "Demographics" (highlighted with a red border), "Programs/Services", and "Documents". The main content area displays two sections: "Mailing Address" and "Physical Address", both with redacted information represented by black boxes.

Member Programs & Services Tab

- The Program/Services tab identifies the programs and services the member is eligible for.
 - Shown below is a member with full Medicaid, Health Home eligible, and approved for Children’s Mental Health Waiver.
 - Please note the following identifiers in red below
 - For a list of Medicaid program codes see [Looking up member & eligibility](#) slide

File ▶ Review ▶ Manage ▶ Information ▶ Messages Logout

Claim PIN
Health Home
Member Lookup
Upload File

State ID: [REDACTED] Search Clear

Member Demographics **Programs/Services** Documents

Medicaid Program

| Program Code | Program Description | Program Status | Program Effective Date | Elig Review Date |
|--------------|---|----------------|------------------------|------------------|
| 377 | Medicaid Facilities (Fip Mhi Or Pmic Care Pmt Only) | Active | 02/01/2022 | 02/28/2023 |

Long Term Care/Enhanced Services

| Program Description | Tier | Program Status | Program Begin Date | Program End Date | Application Date | CSR Due Date | LTC Case Record |
|---------------------|------|----------------|--------------------|------------------|------------------|--------------|-----------------|
| CMH | -- | Approved | 01/04/2022 | | 11/29/2021 | 12/28/2023 | LTC Case Record |

Member Programs & Services Tab (continued)

- The Program/Services tab also provides access to IMW and CBCM information.
 - To view IMW and CBCM information:
 - Click the “LTC Case Record” active link

Member Demographics **Programs/Services** Documents

Medicaid Program

| Program Code | Program Description | Program Status | Program Effective Date | Elig Review Date |
|--------------|---|----------------|------------------------|------------------|
| 377 | Medicaid Facilities (Fip Mhi Or Pmic Care Pmt Only) | Active | 02/01/2022 | 02/28/2023 |

Long Term Care/Enhanced Services

| Program Description | Tier | Program Status | Program Begin Date | Program End Date | Application Date | CSR Due Date | |
|---------------------|------|----------------|--------------------|------------------|------------------|--------------|---------------------------------|
| CMH | -- | Approved | 01/04/2022 | | 11/29/2021 | 12/28/2023 | LTC Case Record |

Record Date: 11/03/2022 Program: CMH

Income Maintenance Worker

First Name: 78-CW0A
 Last Name: Caseload
 Email: facilities@dhs.state.ia.us
 Phone: (877) 344-9628

Community Base Case Manager

First Name: Lucia
 Last Name: Herman
 Email: Lherman@co.jones.ia.us
 Phone: (319) 462-4457

Core Standardized Assessment

Scheduled Date:
 Completed Date:
 Forwarded to IME Date:
 Comment: --Select--
Service Plan
 Start Date:

Looking up member & eligibility

- Approved program codes

- Full Medicaid Codes

| | | | | | | | | | |
|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|
| 021 | 023 | 027 | 028 | 060 | 061 | 063 | 064 | 100 | 130 |
| 131 | 134 | 135 | 136 | 137 | 138 | 140 | 141 | 142 | 143 |
| 144 | 146 | 246 | 308 | 370 | 372 | 373 | 376 | 377 | 390 |
| 401 | 403 | 407 | 408 | 409 | 411 | 413 | 417 | 418 | 421 |
| 423 | 428 | 429 | 431 | 433 | 437 | 438 | 461 | 462 | 463 |
| 464 | 465 | 481 | 483 | 487 | 488 | 600 | 60M | 630 | 631 |
| 632 | 633 | 634 | 636 | 637 | 638 | 640 | 641 | 642 | 643 |
| 644 | 645 | 646 | 647 | 731 | 732 | 733 | 734 | 735 | 920 |

- IHAWP Medically Exempt

| | |
|-----|-----|
| 501 | 531 |
|-----|-----|

IHAWP Examples

IHAWP Medically Exempt

| | | | | | |
|---|----------------------|-------------------|------------------------|------------------|------------|
| Member | Demographics | Programs/Services | Fostercare | Documents | loading... |
| Medicaid Program | | | | | |
| Program Code | Program Description | Program Status | Program Effective Date | Elig Review Date | |
| 501 | (Iowa Wellness Plan) | Active | 03/01/2021 | 08/31/2022 | |
| Long Term Care/Enhanced Services | | | | | |
| No records found. | | | | | |

IHAWP Not Medically Exempt

| | | | | | |
|---|---|-------------------|------------------------|------------------|--|
| Member | Demographics | Programs/Services | Fostercare | Documents | |
| Medicaid Program | | | | | |
| Program Code | Program Description | Program Status | Program Effective Date | Elig Review Date | |
| 531 | Adult Expansion Group (Iowa Marketplace Choice) | Active | 06/01/2021 | 12/31/2021 | |
| Long Term Care/Enhanced Services | | | | | |
| No records found. | | | | | |

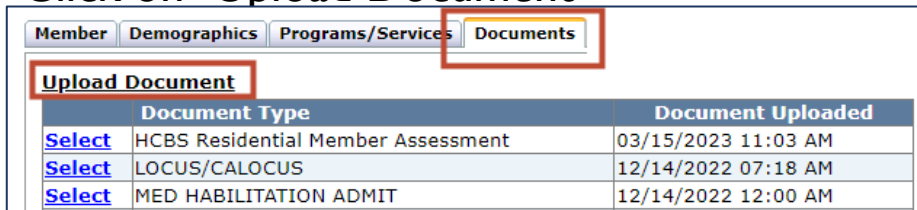
Member Documents Tab

- The Documents tab allows you to view and upload member documents.
 - To view documents:
 - Click “Select” to view the document
 - If applicable, click the arrow in the bottom right to advance to the next page to view additional uploaded documents

| Member | | | |
|------------------------|------------------------------------|---------------------|-----------|
| Member | Demographics | Programs/Services | Documents |
| Upload Document | | | |
| Select | Document Type | Document Uploaded | |
| Select | HCBS Residential Member Assessment | 03/15/2023 11:03 AM | |
| Select | LOCUS/CALOCUS | 12/14/2022 07:18 AM | |
| Select | MED HABILITATION ADMIT | 12/14/2022 12:00 AM | |
| Select | CASH (Comp. Assess & Soc. Hist.) | 12/07/2022 07:29 AM | |
| Select | HCBS Residential Member Assessment | 02/04/2022 10:26 AM | |
| Select | interRAI Community Mental Health | 01/05/2022 06:06 AM | |
| Select | MED HABILITATION SSR | 01/05/2022 12:00 AM | |
| Select | Service Plan | 03/03/2021 11:29 AM | |
| Select | Case Mgmt Comprehensive Assess | 03/03/2021 11:28 AM | |
| Select | HCBS Residential Member Assessment | 02/09/2021 11:23 AM | |

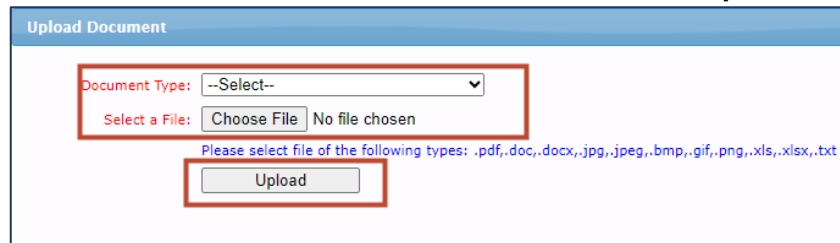
Member Documents Tab (continued)

- The “Upload Documents” feature is used when needing to upload documents into IMPA for members transferring to Molina.
- To upload documents:
 - Click on “Upload Document”



| | Document Type | Document Uploaded |
|------------------------|------------------------------------|---------------------|
| Select | HCBS Residential Member Assessment | 03/15/2023 11:03 AM |
| Select | LOCUS/CALOCUS | 12/14/2022 07:18 AM |
| Select | MED HABILITATION ADMIT | 12/14/2022 12:00 AM |

- Select the Document Type you would like to upload.
- Select the File you would like to upload
 - Once the document is attached, click Upload



Upload Document

Document Type: --Select--

Select a File: Choose File No file chosen

Please select file of the following types: .pdf,.doc,.docx,.jpg,.jpeg,.bmp,.gif,.png,.xls,.xlsx,.txt

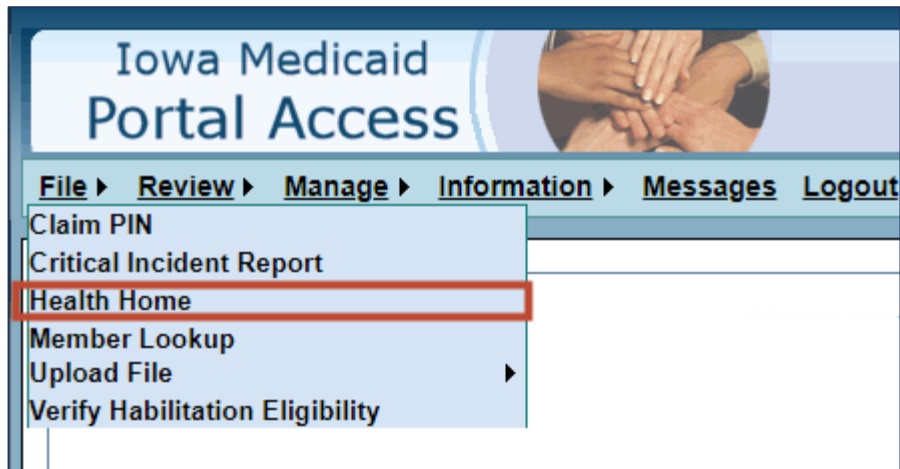
Upload

IMPA Training

Member Enrollment Request

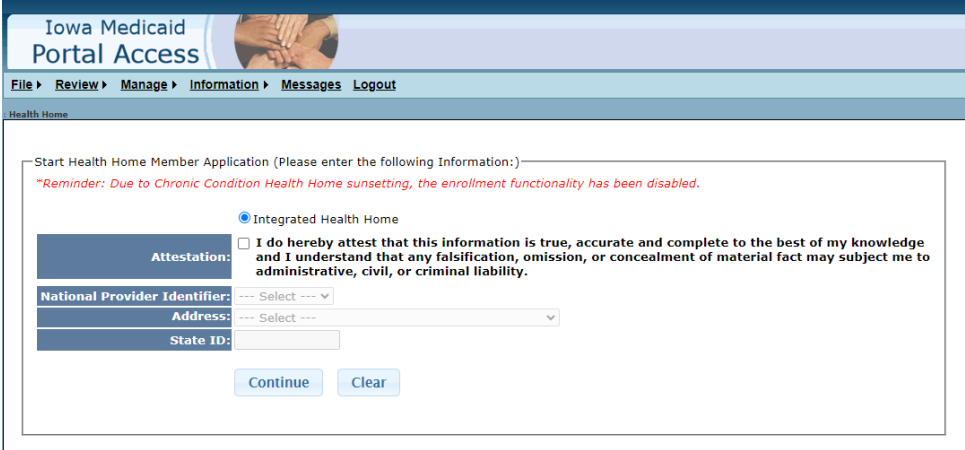
Member Enrollment Request

- Log into IMPA, hover over File and select “Health Home”



Member Enrollment Request (continued)

- Start Health Home Member Application
 - Click the box next to attest to “I do hereby.....”
 - NPI: Select your organization’s NPI
 - Address: Select your organization’s address
 - Enter the member’s State ID
 - Click “Continue”



The screenshot displays the Iowa Medicaid Portal Access interface. At the top, there is a navigation menu with options: File, Review, Manage, Information, Messages, and Logout. Below the menu, the page title is 'Iowa Medicaid Portal Access'. The main content area is titled 'Health Home' and contains a form for starting a Health Home Member Application. The form includes a radio button for 'Integrated Health Home' which is selected. Below this is an attestation checkbox with the text: 'I do hereby attest that this information is true, accurate and complete to the best of my knowledge and I understand that any falsification, omission, or concealment of material fact may subject me to administrative, civil, or criminal liability.' The form also features three dropdown menus: 'National Provider Identifier' (with a '--- Select ---' option), 'Address' (with a '--- Select ---' option), and 'State ID' (with a text input field). At the bottom of the form are 'Continue' and 'Clear' buttons. A red reminder message is visible: '*Reminder: Due to Chronic Condition Health Home sunsetting, the enrollment functionality has been disabled.'

Member Enrollment Request (continued)

- Enter National Provider Identifier (NPI)
- Press tab for the address file. The system will show you the address associated with the NPI – click enter or tab
- Enter the State ID
 - Note: **if** an attestation statement appears (this would appear above NPI), attest to the statement by clicking the box next to the statement.

Iowa Medicaid Portal Access

File • Review • Manage • Information • Messages • Logout

Health Home

Start Health Home Member Application (Please enter the following Information:)

Integrated Health Home

Attestation: I do hereby attest that this information is true, accurate and complete to the best of my knowledge and I understand that any falsification, omission, or concealment of material fact may subject me to administrative, civil, or criminal liability.

National Provider Identifier: --- Select ---

Address: --- Select ---

State ID: ---

Continue Clear

Attestation: I do hereby attest that this information is true, accurate and complete to the best of my knowledge and I understand that any falsification, omission, or concealment of material fact may subject me to administrative, civil, or criminal liability.

National Provider Identifier: --- Select ---

Address: --- Select ---

State ID: ---

Iowa Medicaid Portal Access

File • Review • Manage • Information • Messages • Logout

Health Home

Search Criteria

State ID: [input] Search Clear

Start Health Home Member Application (Please enter the following Information:)

Health Home Integrated Health Home

National Provider Identifier: --- Select ---

Address: --- Select ---

State ID: ---

Continue Clear

Member Enrollment Request (continued)

- Click “New”

An enrollment request processed on or after the 20th of the month may miss month-end processing. Requests processed after month-end processing will be considered for assignment in the following month.

Health Home Integrated Health Home

National Provider Identifier:
Address:
State ID:

Continue Clear

| State ID | Assessment Date | Tier | Status | Effective Date | Extract Date | Decision Date | Eligibility Date | Assigned Codes | Diagnosis Codes | Reason |
|----------|-----------------|------|--------|----------------|--------------|---------------|------------------|----------------|-----------------|--------|
| | | | | | | | | | | New |

Iowa Department of Human Services

Done Local intranet | Protected Mode: Off 115%

- Click “Verify” after confirming the State ID

Provider Select

State ID:

Start Health Home Member Application (Please enter the following information.)

An enrollment request processed on or after the 20th of the month may miss month-end processing. Requests processed after month-end processing will be considered for assignment in the following month.

Health Home Integrated Health Home

National Provider Identifier:
Address:
State ID:

Continue Clear

| Assessment State ID | Date | Tier | Status | Effective Date | Extract Date | Decision Date | Eligibility Date | Assigned Codes | Diagnosis Codes | Reason |
|---------------------|------|------|--------|----------------|--------------|---------------|------------------|----------------|-----------------|--------|
| | | | | | | | | | | New |

Iowa Department of Human Services

Done Local intranet | Protected Mode: Off 115%

Member Enrollment Request (continued)

- Identify that the State ID matches the patient's name and DOB.
- Click “YES” once verified

Provider Name: [Redacted] National Provider Identifier: [Redacted] Legacy Provider Number: [Redacted]

Select [Redacted]

Start Health Home Member Application (Please enter the following information:)

An enrollment request **processed** on or after the 20th of the month may miss month-end processing. Requests **processed** after month-end processing will be considered for assignment in the following month.

Health Home Integrated Health Home

National Provider Identifier: [Redacted]
Address: [Redacted]
State ID: [Redacted]

Continue Clear

| State ID | Assessment Date | Tier | Status | Effective Date | Extract Date | Decision Date | Eligibility Date | Assigned | Diagnosis Codes | Reason |
|----------|-----------------|------|--------|----------------|--------------|---------------|------------------|----------|-----------------|--------|
| | | | | | | | | | | New |

Iowa Department of Human Services

Local intranet | Protected Mode: Off 115%

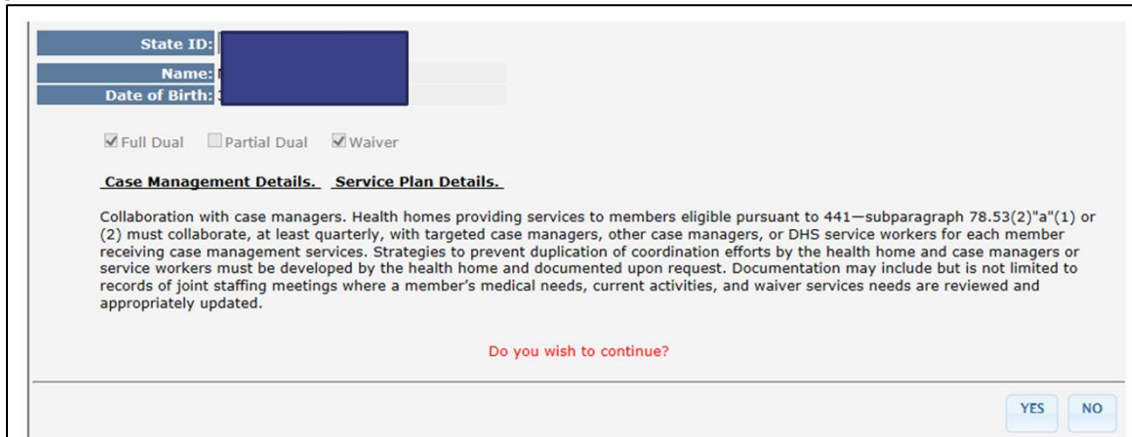
Member Enrollment Request (continued)

- Please notice the buttons under the demographics. If the patient is under any waivers, they will be filled in and require confirmation on another screen.
- Click “YES” to continue

The screenshot shows a web application interface for a member enrollment request. The main form contains several input fields, some of which are redacted with blue boxes. A modal dialog box is open on the right side of the screen, displaying a confirmation screen. The dialog box has a title bar with 'State ID', 'Name', and 'Date of Birth' fields, all of which are redacted. Below these fields are three checkboxes: 'Full Dual', 'Partial Dual', and 'Waiver'. A red text prompt asks 'Do you wish to continue?'. At the bottom of the dialog box are two buttons: 'YES' and 'NO'. A blue arrow points to the 'YES' button. The background form includes a 'Select' dropdown, a 'Start Health Home Member Application' section with a warning message, radio buttons for 'Health Home' and 'Integrated Health Home', and a table with columns for 'State ID', 'Assessment Date', 'Tier', 'Status', 'Effective Date', 'Extract Date', 'Decision Date', 'Eligibility Date', 'Assigned', 'Diagnosis Codes', and 'Reason'. The footer of the page reads 'Iowa Department of Human Services'.

Member Enrollment Request (continued)

- If the member has a case manager this screen will display. If the member has CMH Waiver and/or Habilitation, the IHH is the case manager. If this appears please read the disclosure and select “YES” to continue.



The screenshot shows a web form with the following elements:

- Fields for "State ID:", "Name:", and "Date of Birth:" with redacted values.
- Checkboxes for "Full Dual" (checked), "Partial Dual" (unchecked), and "Waiver" (checked).
- Two underlined links: "Case Management Details." and "Service Plan Details.".
- A paragraph of text: "Collaboration with case managers. Health homes providing services to members eligible pursuant to 441—subparagraph 78.53(2)"a"(1) or (2) must collaborate, at least quarterly, with targeted case managers, other case managers, or DHS service workers for each member receiving case management services. Strategies to prevent duplication of coordination efforts by the health home and case managers or service workers must be developed by the health home and documented upon request. Documentation may include but is not limited to records of joint staffing meetings where a member's medical needs, current activities, and waiver services needs are reviewed and appropriately updated."
- A red question: "Do you wish to continue?"
- Two buttons at the bottom right: "YES" and "NO".

- This disclosure means that you're agreeing that you will, at minimum, make quarterly contact with the member's case manager to ensure nonduplication of services. In most all cases, the case manager is the Integrated Health Home.

Member Enrollment Request (continued)

- Enter Assessment Date
- Enter Tier
- Enter Relating ICD-10 Diagnosis Code(s)
- Click “Enroll”

The screenshot shows a web form for a Member Enrollment Request. The form fields are as follows:

- State ID:** [Empty text box]
- Name:** [Redacted text box]
- Date of Birth:** [Redacted text box]
- Date of Assessment:** 12/13/2023 [Calendar icon]
- Tier:** 1 [Dropdown menu]
- Diagnosis Codes:** 296.35 [Five empty text boxes]

***Qualifying Diagnoses Codes**

Please select file of the following types:
.pdf,.doc,.docx,.jpg,.jpeg,.bmp,.gif,.png,.xls,.xlsx,.txt

Upload a File: Choose File No file chosen

Please upload the documentation relevant to this request. If uncertain about the documentation to upload, send email to Healthhomes@dhs.state.ia.us

Buttons: Enroll, Cancel

Member Enrollment Request (continued)

You have just submitted an enrollment request.

- An enrollment request must be extracted and then processed before final approval of eligibility is established. An enrollment request must be submitted prior to the current month's processing end date to be eligible for enrollment on the 1st of the following month (see [Month End Dates](#) slide).
- An enrollment request can be:
 - Eligible for enrollment and not assigned by the month end process
 - Eligible for enrollment and assigned to the health home by the month end process
 - Not eligible for enrollment at this point in time
 - Pending enrollment. A pending enrollment request is where an existing request for assignment has not been finalized.
 - Enrolled the first of the current month if the member is coming from an MCO. Otherwise, an enrollment request CANNOT be backdated.

Month End Dates 2024

5th Business day before the end of the Month

- January 25, 2024
- February 23, 2024
- March 25, 2024
- April 24, 2024
- May 24, 2024
- June 24, 2024
- July 25, 2024
- August 26, 2024
- September 24, 2024
- October 25, 2024
- November 22, 2024
- December 24, 2024

Member Enrollment Request (continued)

- To finish the enrollment request; complete the attestation and provide the remaining information.

Iowa Medicaid Portal Access

File ▶ Review Manage ▶ Information ▶ Messages Logout

Start Application (Please enter the following information:)

Attestation: I do hereby attest that this information is true, accurate and complete to the best of my knowledge and I understand that any falsification, omission, or concealment of material fact may subject me to administrative, civil, or criminal liability.

National Provider Identifier: [Redacted]

Address: [Redacted]

State ID: [Redacted]

Continue Clear

| State ID | Assessment Date | Tier | Status | Effective Date | Extract Date | Decision Date | Eligibility Date | Assigned | Reason |
|------------|-----------------|------|--------|----------------------|--------------|---------------|------------------|----------|---------------|
| [Redacted] | 5/7/2012 | 3 | Enroll | 5/21/2012 2:35:23 PM | | | | | Update Cancel |

Iowa Department of Human Services

Enrollment Complete!

Iowa Medicaid Portal Access

File ▶ Review Manage ▶ Information ▶ Messages Logout

Start Application (Please enter the following information:)

Attestation: I do hereby attest that this information is true, accurate and complete to the best of my knowledge and I understand that any falsification, omission, or concealment of material fact may subject me to administrative, civil, or criminal liability.

National Provider Identifier:

Address:

State ID:

| State ID | Assessment Date | Tier | Status | Effective Date | Extract Date | Decision Date | Eligibility Date | Assigned | Reason |
|------------|-----------------|------|--------|-----------------------|-----------------------|-----------------------|------------------|----------|------------------|
| [REDACTED] | 5/6/2012 | 3 | Enroll | 5/25/2012 11:00:00 PM | 5/25/2012 11:00:00 PM | 5/25/2012 11:00:00 PM | 6/1/2012 | Yes | |
| | 5/6/2012 | 3 | Enroll | 5/10/2012 1:00:00 AM | 5/11/2012 1:00:00 AM | | | | Update Disenroll |

Iowa Department of Human Services

IMPA Training

Enrollment/Disenrollment/Transfer Request Scenarios

Member Enrollment/Disenrollment Request Scenarios

Enrollment scenarios

- For an enrollment request submitted on June 15 the member's enrollment would begin on July 1.
- For an enrollment request submitted on June 27 the member's enrollment would begin on August 1.

Disenrollment scenarios

- For a disenrollment request submitted on June 15 the member's disenrollment would occur on June 30.
- For a disenrollment request submitted on June 27 the member's disenrollment would occur on July 31.

Member Enrollment Request Transfer Scenarios

Member Transferring Health Homes:

- The transferring Health Home submits a disenrollment request on June 15. The receiving Health Home submits an enrollment request on June 15, directly after the disenrollment request is submitted. Member enrollment with the receiving Health Home would begin on July 1.
- The transferring Health Home submits a disenrollment request on June 26. The receiving Health Home submits an enrollment request June 27. The member disenrollment would occur July 31 and the enrollment with the receiving Health Home would begin on August 1.

Member Enrollment Transferring From MCO Scenarios

Health Home member transferring from an MCO to FFS:

- An enrollment request is submitted on June 15. The member's enrollment would begin on June 1. You will be able to see this in IMPA as early as June 16.
- An enrollment request is submitted on June 28. The member's enrollment would begin on July 1.

IMPA Training

Updating an Assessment and/or Tier Change

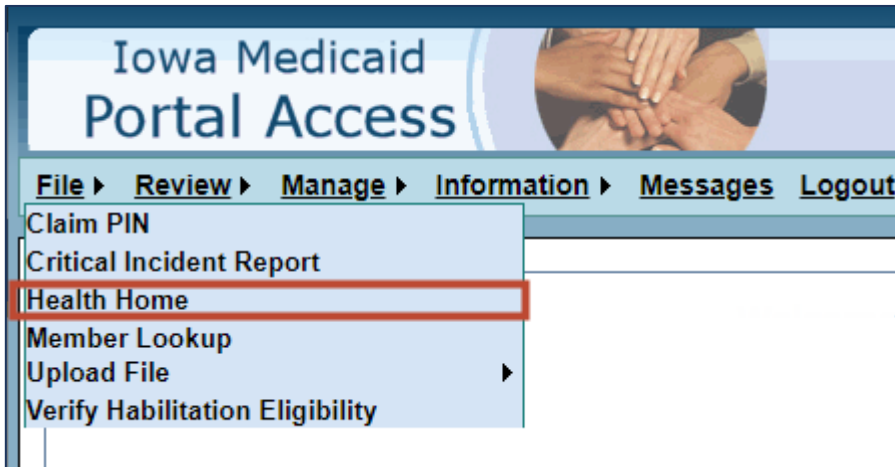
What Does an Assessment Mean?

The assessment for IMPA is the Health Home's review of the member's eligibility to be enrolled in a Health Home.

- The assessment date in IMPA is not the same as the due date for the comprehensive assessment and/or level of care (LOC).
 - The Health Home must conduct a file review of the member that includes functional impairment as defined in the SPA.
 - The file review must be documented in the member's chart.
 - The member's tier must be supported in the documentation.
 - The assessment for IMPA must be conducted annually.
 - If the assessment date is not updated at least annually, at month 13 (month after the due date), the member's tier will change to 0.
 - If the assessment date is not updated in IMPA by month 14 (2 months after due date), the system will automatically disenroll the member.

Updating an Assessment and/or Tier Change

- Log into IMPA, hover over File and select “Health Home”



Updating an Assessment and/or Tier Change (continued)

- Enter State ID
- Click “Search”
- Click “Select”

Search Criteria

State ID:

Name:

| | Provider Name | National Provider Identifier | Legacy Provider Number |
|--|---------------|------------------------------|------------------------|
| <input type="button" value="Select"/> <input type="button" value="Select"/> | | | |

Updating an Assessment and/or Tier Change (continued)

- Click “Update”

| State ID | Assessment Date | Tier | Status | Effective Date | Extract Date | Decision Date | Eligibility Date | Assigned | Reason | |
|----------|-----------------|------|--------|----------------------|----------------------|---------------|------------------|----------|--------|------------------|
| | 31/2012 | 1 | Enroll | 7/25/2012 | 7/26/2012 7:55:00 AM | 7/25/2012 | 8/1/2012 | Yes | | Update Disenroll |
| | 31/2012 | 1 | Enroll | 6/23/2012 | 6/25/2012 2:00:00 PM | 6/23/2012 | 7/1/2012 | Yes | | |
| | 31/2012 | 1 | Enroll | 6/12/2012 9:42:55 AM | 6/12/2012 1:00:00 PM | | | | | |

- Enter Date of Assessment, Tier, Reason, and related ICD-10 diagnosis code(s).

State ID:

Name:

Date of Birth:

Date of Assessment: 12/13/2023

Tier: 1

Diagnosis Codes: 296.35

***Qualifying Diagnoses Codes**

Please select file of the following types:
.pdf,.doc,.docx,.jpg,.jpeg,.bmp,.gif,.png,.xls,.xlsx,.txt

Upload a File: No file chosen

Please upload the documentation relevant to this request. If uncertain about the documentation to upload, send email to Healthhomes@dhs.state.ia.us

Updating an Assessment and/or Tier Change (continued)

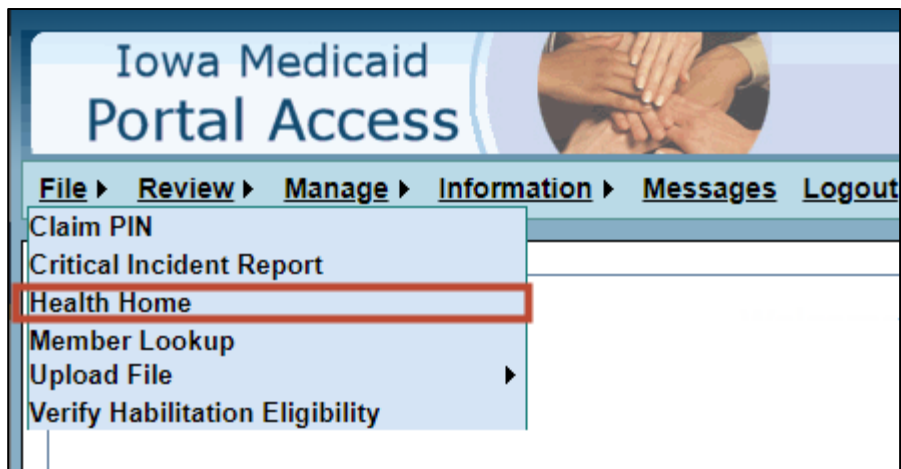
- The reason drop down menu has the selections of:
 - Tier Change
 - Assessment Date Change
 - Assessment Date and Tier Change

IMPA Training

Member Disenrollment

How to Disenroll a Member

- Log into IMPA, hover over File and select “Health Home”



How to Disenroll a Member (Continued)

- Enter State ID
- Click “Search”
- Click “Select”

Search Criteria

| | |
|-----------|----------------------|
| State ID: | <input type="text"/> |
| Name: | <input type="text"/> |

| | Provider Name | National Provider Identifier | Legacy Provider Number |
|--|----------------------|------------------------------|------------------------|
| <input type="button" value="Select"/> <input type="button" value="Select"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |

How to Disenroll a Member

(Continued)

- Click “Disenroll”

| Decision Date | Eligibility Date | Assigned | Diagnosis Codes | Reason | |
|----------------------|------------------|----------|-----------------|--------|---|
| 5/12/2022 8:30:05 PM | 6/1/2022 | Yes | F33.3 | | Update Disenrol |
| | | | F33.3 | | |

How to Disenroll a Member (Continued)

- Select the “Reason” for disenrollment
 - (See [Reasons for Disenrollment](#))
- Click “Disenroll”
 - (See [Disenrollment Request Scenarios](#))

State ID: [redacted]

Reason: --Select--

Diagnosis Codes: 493.90, 278.02, , , , ,

[Disenroll] [Cancel]

| Decision Date | Eligibility Date | Assigned | Diagnosis Codes | Reason |
|---------------|------------------|----------|-----------------|--------|
|---------------|------------------|----------|-----------------|--------|

Reasons for Disenrollment

- Member Requested
 - A member can request to disenroll from the program as this is a voluntary program to participate in.
- Provider Requested
 - A provider can request disenrollment on behalf of a member.
- Death
- Failure to comply to Policy
 - This would be when a member is not abiding by the agreement they signed with the provider. The provider can disenroll them.

The screenshot shows a web form with the following fields and controls:

- State ID:** A text input field.
- Reason:** A dropdown menu currently showing "--Select--".
- Diagnosis Codes:** A section containing a dropdown menu and two rows of three text input fields each, separated by commas.
- Buttons:** "Disenroll" and "Cancel" buttons at the bottom right.

The dropdown menu for "Reason" is open, showing the following options:

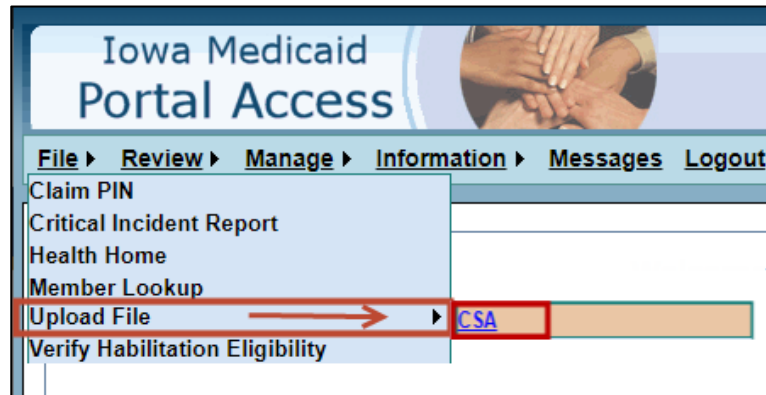
- Select--
- Member Requested
- Provider Requested
- Death
- Failure to Comply to Policy

IMPA Training

Uploading a CASH

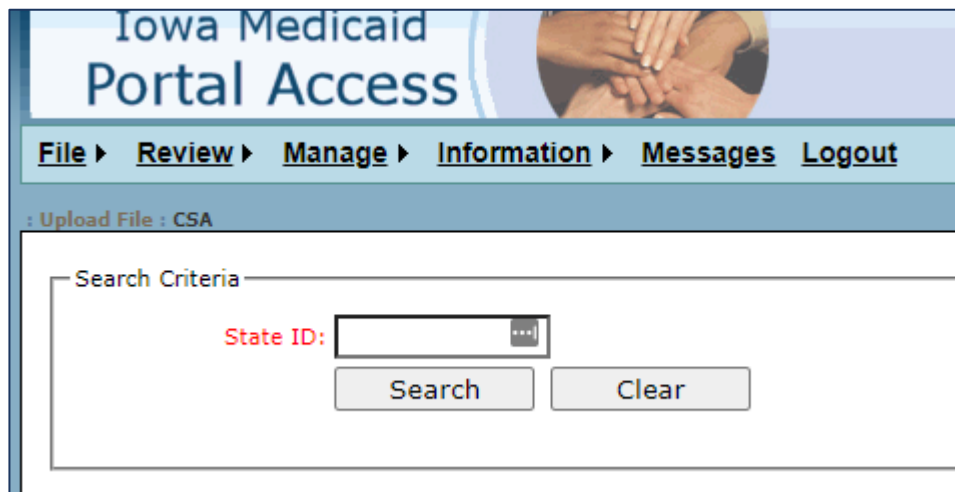
Uploading a CASH

- To upload the CASH and supplemental documents
 - Log into IMPA
 - Go to File > Upload File > CSA
 - This process is used by the IHHs and Targeted Case Management (TCM) to submit the member's CASH and PCSP along with any supplemental documentation.
 - Note: If you do not have access to the CSA upload file functionality, please request access by completing this form: <https://www.tfaforms.com/5057291>



Uploading a CASH (continued)

- Enter the member's State ID and click "Search"



The screenshot displays the Iowa Medicaid Portal Access interface. At the top, there is a header with the text "Iowa Medicaid Portal Access" and a circular image of hands stacked together. Below the header is a navigation menu with the following items: [File](#), [Review](#), [Manage](#), [Information](#), [Messages](#), and [Logout](#). Below the navigation menu is a sub-header that reads ": Upload File : CSA". The main content area is titled "Search Criteria" and contains a form with a "State ID:" label, a text input field with a dropdown arrow, a "Search" button, and a "Clear" button.

Uploading a CASH (continued)

- Document Type: Select “CASH” (Comp.Assess & Social Hist.) when uploading the CASH or any supplemental documents.
- Select a File: Click on “Choose File”. Browse to the location of the file on your computer and select the file you want to upload.
 - If this step does not work, follow the instructions on the page to update your Adobe Flash player; then close and reopen your browser and log into IMPA again).
- Click on “Upload” to begin the upload.

Upload File - CSA

Search Criteria

State ID: [redacted]

Search Clear

Upload/View Documents (Hide Upload/View Documents...)

State ID: [redacted]

Member Name: [redacted]

Date of Birth: [redacted]

Document Type: --Select--

Select a File: Choose File No file chosen

Please select file of the following types: .pdf,.doc,.docx,.jpg,.jpeg,.bmp,.gif,.png,.xls,.xlsx,.txt

Upload View Documents

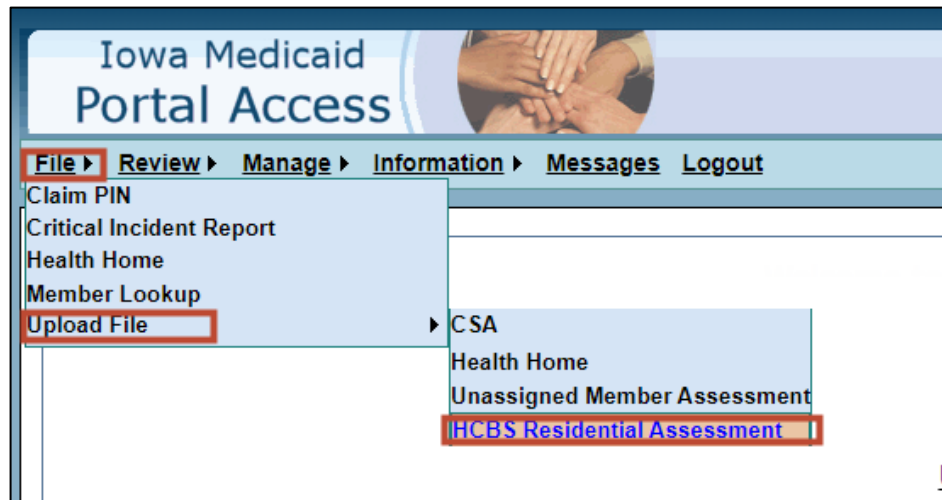
| State ID | Document Type | Document Name | Uploaded User |
|----------|---------------|----------------------------|---------------|
| 11501360 | Comp Assess | 11501360-0001-NEW-IMP-1000 | 11501360 |

IMPA Training

Uploading a Residential Setting Member Assessment

Uploading a Residential Setting Member Assessment

- Login to IMPA
- Go to File > Upload File > HCBS Residential Assessment
 - Note: A step-by-step instruction on downloading and use instructions can be found here: [HCBS Residential Member Assessment Form Instructions \(state.ia.us\)](https://www.state.ia.us/hcbs/residential-member-assessment-form-instructions)



Uploading a Residential Setting Member Assessment (continued)

- Enter the State ID and click “Search”.



The screenshot displays the Iowa Medicaid Portal Access interface. At the top, the text "Iowa Medicaid Portal Access" is visible next to a graphic of hands. Below this is a navigation menu with links for "File", "Review", "Manage", "Information", and "Messages". A sub-menu item "Upload File: HCBS Residential Assessment" is highlighted. The main content area is titled "Search Criteria" and contains a form with a "State ID:" label, a text input field containing a redacted value, and two buttons labeled "Search" and "Clear".

Uploading a Residential Setting Member Assessment (continued)

- Select a File: Click on “Choose File”. Browse to the location of the file on your computer and select the file you want to upload.
- Click on “Upload” to begin the upload.



The screenshot displays the Iowa Medicaid Portal Access interface. At the top, there is a navigation menu with links for File, Review, Manage, Information, Messages, and Logout. Below this, a section titled "Upload File: HCBS Residential Assessment" contains a search criteria form with a "State ID" field and "Search" and "Clear" buttons. The main section, "Upload/View Documents", includes a "State ID" field, a "Member Name" field, and a "Select a File" section with a "Choose File" button and "No file chosen" text. Below this, it states "Please select file of the following type: .pdf" and features an "Upload" button. A red rectangular box highlights the "Choose File" button, the "No file chosen" text, and the "Upload" button.

Uploading a Residential Setting Member Assessment (continued)

- Once the document is uploaded an “uploaded successfully” message displays.
- If you are an administrator, you will see all documents uploaded by all users for the State ID.

The screenshot displays the Iowa Medicaid Portal Access interface. At the top, there is a navigation menu with options: File, Review, Manage, Information, Messages, and Logout. Below the menu, the page title is "Iowa Medicaid Portal Access" and the current page is "Upload File: HCBS Residential Assessment".

The main content area includes a "Search Criteria" section with a "State ID" input field and "Search" and "Clear" buttons. Below this is the "Upload/View Documents" section, which includes a "State ID" input field, a "Member Name" input field, and a "Select a File" section with a "Choose File" button and the text "No file chosen". Below the file selection is a note: "Please select file of the following type: .pdf" and an "Upload" button.

A red-bordered box highlights a confirmation message: "HCBS Residential Setting Member Assessment(HCBSRSA1202021.pdf) uploaded successfully. Assigned Number is 125475."

At the bottom, a table displays the uploaded document details:

| State ID | Process ID | Document Name | Uploaded User | Date/Time Uploaded |
|----------|------------|---|---------------|---------------------|
| Select | | HCBS Residential Member Assessment - .pdf | | 04/08/2021 03:05 PM |

Uploading a Residential Setting Member Assessment (continued)

- Once uploaded the document can be viewed, downloaded, or printed. Click on “Select”.

The screenshot displays the Iowa Medicaid Portal Access interface. At the top, there is a navigation menu with options: File, Review, Manage, Information, Messages, and Logout. Below this, a search criteria section includes a text input for 'State ID' and buttons for 'Search' and 'Clear'. The main section is titled 'Upload/View Documents (Hide Upload/View Documents...)' and contains fields for 'State ID' and 'Member Name'. A file selection area shows a 'Choose File' button, 'No file chosen', and a note: 'Please select file of the following type: .pdf'. An 'Upload' button is located below. At the bottom, a table lists uploaded documents with columns for State ID, Process ID, Document Name, Uploaded User, and Date/Time Uploaded. Each row has a 'Select' button in the first column.

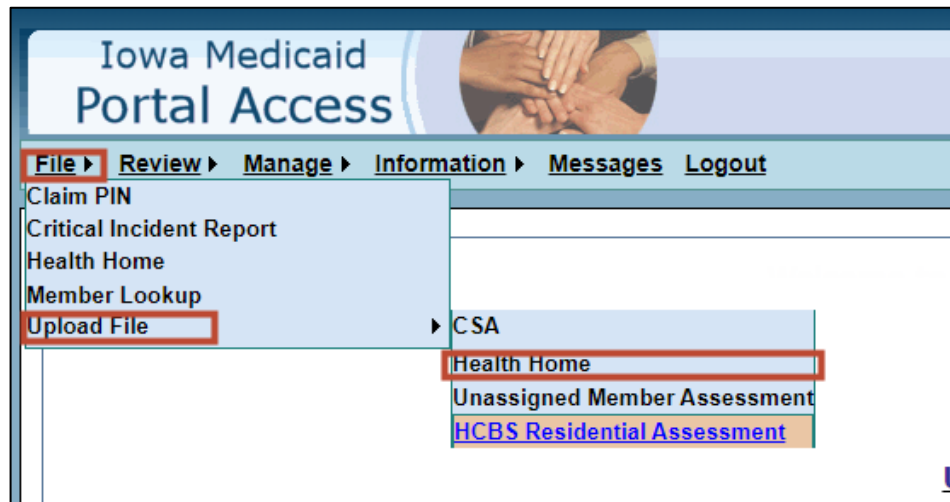
| | State ID | Process ID | Document Name | Uploaded User | Date/Time Uploaded |
|--------|------------|------------|---|---------------|---------------------|
| Select | [REDACTED] | [REDACTED] | HCBS Residential Member Assessment - [REDACTED] | [REDACTED] | 04/08/2021 12:00 AM |
| Select | [REDACTED] | [REDACTED] | HCBS Residential Member Assessment - [REDACTED] | [REDACTED] | 04/08/2021 12:00 AM |
| Select | [REDACTED] | [REDACTED] | HCBS Residential Member Assessment - [REDACTED] | [REDACTED] | 04/08/2021 12:00 AM |
| Select | [REDACTED] | [REDACTED] | HCBS Residential Member Assessment - [REDACTED] | [REDACTED] | 02/01/2021 12:00 AM |
| Select | [REDACTED] | [REDACTED] | HCBS Residential Member Assessment - [REDACTED] | [REDACTED] | 02/01/2021 12:00 AM |
| Select | [REDACTED] | [REDACTED] | HCBS Residential Member Assessment - [REDACTED] | [REDACTED] | 02/01/2021 12:00 AM |

IMPA Training

Uploading Documentation for Chart Reviews

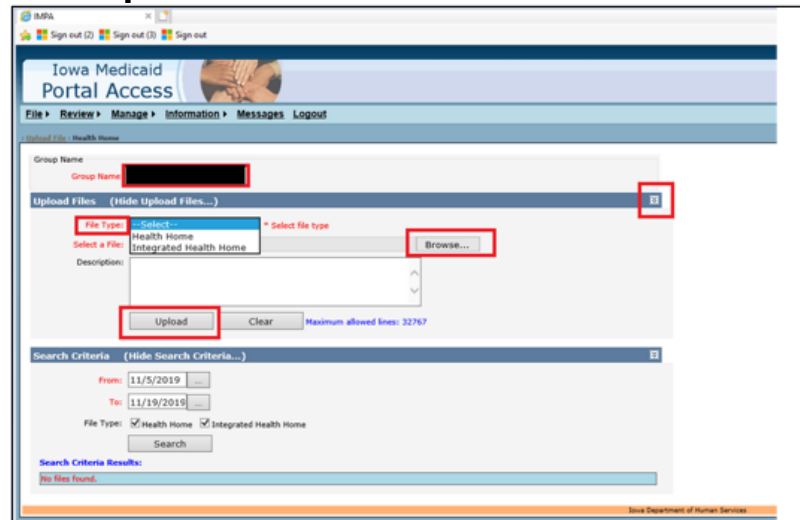
Uploading Chart Review Documentation

- Login to IMPA
- Hover Over File then Upload File
- Select “Health Home”
 - Note: If you do not have access to the Health Home upload file functionality, please request access by completing this form <https://www.tfaforms.com/5057291>



Uploading Chart Review Documentation (continued)

- Select:
 - Group Name
 - File Type (you may need to expand Upload Files section)
- Select a File: browse to the location of the file on your computer and select the file you want to upload.
- Description is optional
- Click on “Upload”



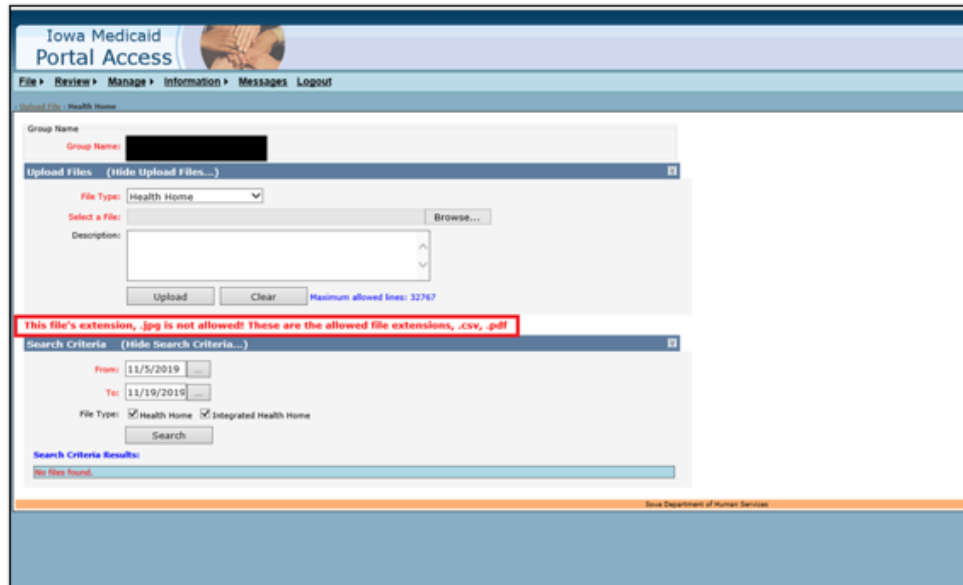
The screenshot displays the Iowa Medicaid Portal Access interface. The main heading is "Iowa Medicaid Portal Access" with a navigation menu including "File", "Review", "Manage", "Information", "Messages", and "Logout". The "Upload Files" section is expanded, showing a form with the following fields and controls:

- Group Name:** A text input field with a red box around it.
- File Type:** A dropdown menu with "Health Home" selected and a red box around it.
- Select a File:** A text input field with "Integrated Health Home" entered and a red box around it.
- Browse...:** A button with a red box around it.
- Description:** A text area.
- Upload:** A button with a red box around it.
- Clear:** A button.
- Maximum allowed files:** 32767.

Below the upload section is the "Search Criteria" section, which includes date range inputs for "From" (11/5/2019) and "To" (11/19/2019), and checkboxes for "Health Home" and "Integrated Health Home". A "Search" button is located below these options. The "Search Criteria Results" section shows "No files found."

Uploading Chart Review Documentation (continued)

- Only two type files can be uploaded now - csv and pdf files. When trying to upload file types other than csv and pdf, you will receive an error message.



The screenshot displays the Iowa Medicaid Portal Access interface. At the top, there is a navigation menu with options: File, Review, Manage, Information, Messages, and Logout. Below this, the 'Upload Files' section is visible, showing a 'Group Name' field with a redacted value. The 'File Type' is set to 'Health Home'. A 'Select a File' button is present, along with a 'Browse...' button. Below the file selection area, there is a 'Description' field and 'Upload' and 'Clear' buttons. A red error message is displayed: 'This file's extension, .jpg is not allowed! These are the allowed file extensions, .csv, .pdf'. Below the error message, the 'Search Criteria' section is visible, showing 'From' and 'To' date pickers set to 11/5/2019 and 11/19/2019 respectively. The 'File Type' section has checkboxes for 'Health Home' and 'Integrated Health Home', both of which are checked. A 'Search' button is located below the search criteria. At the bottom of the page, it says 'Iowa Department of Human Services'.

Uploading Chart Review Documentation (continued)

- If you upload documentation in error, use the delete option shown below

The screenshot displays the Iowa Medicaid Portal Access interface. At the top, there is a navigation menu with options: File, Review, Manage, Information, Messages, and Logout. Below this, the 'Upload Files' section is visible, showing a form for uploading a file. The file type is set to 'Health Home', and the selected file is 'C:\Users\Bhatta\Desktop\2019 Walking Path Events Flyer.g'. The description field is empty. The 'Upload' button is highlighted, and a message below it states '2019 Walking Path Events Flyer.pdf uploaded successfully!'. Below the upload section, the 'Search Criteria' section is visible, showing search filters for 'From' (11/5/2019) and 'To' (11/19/2019), and checkboxes for 'Health Home' and 'Integrated Health Home'. The 'Search' button is highlighted. Below the search criteria, the 'Search Criteria Results' table is displayed, showing a list of uploaded files. The table has columns for Reference Number, User Name, File Type, File Name, Description, File Status, Date/Time Uploaded, and Delete. The 'Delete' button for the first row is highlighted with a red box.

| Reference Number | User Name | File Type | File Name | Description | File Status | Date/Time Uploaded | Delete |
|------------------|-----------|-------------|------------|-------------|-------------|------------------------|--------|
| [REDACTED] | silhanna | Health Home | [REDACTED] | | Uploaded | 11/19/2019 11:52:44 AM | Delete |
| [REDACTED] | silhanna | Health Home | [REDACTED] | | Uploaded | 11/19/2019 11:49:32 AM | Delete |

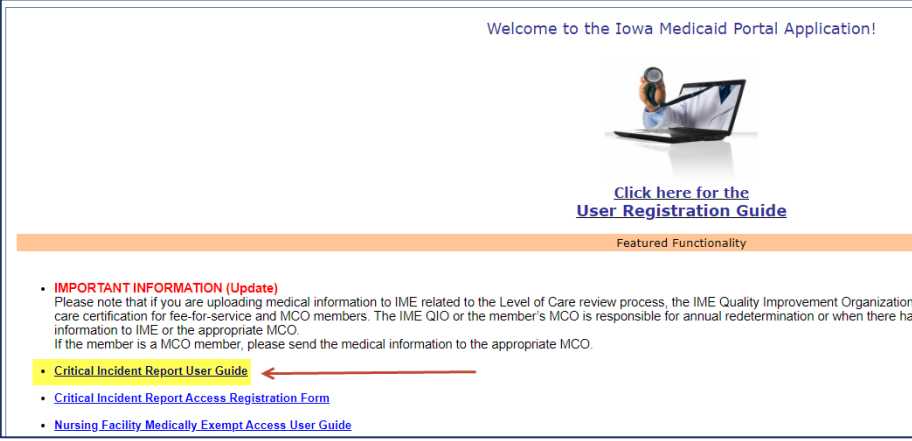
IMPA Training

Completing and Viewing Critical Incident Reports


Completing and Viewing Critical Incident Reports

The Critical Incident Reporting Application within IMPA is designed as a central location for reporting and storing critical incident reports for Iowa Medicaid members enrolled for HCBS Waiver, Habilitation, or other designated programs.

- To complete or view a Critical Incident Report please refer to the Critical Incident Report User Guide located on the IMPA main page: [IMPA \(state.ia.us\)](http://state.ia.us)



Welcome to the Iowa Medicaid Portal Application!



[Click here for the User Registration Guide](#)

Featured Functionality

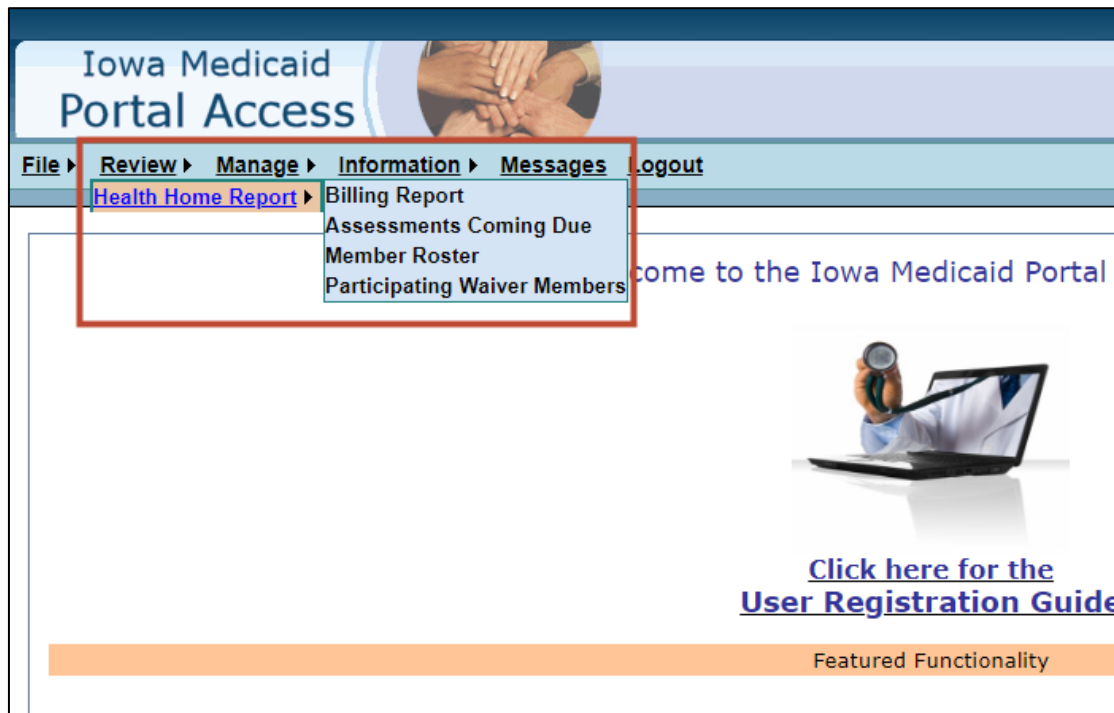
- **IMPORTANT INFORMATION (Update)**
Please note that if you are uploading medical information to IME related to the Level of Care review process, the IME Quality Improvement Organization care certification for fee-for-service and MCO members. The IME QIO or the member's MCO is responsible for annual redetermination or when there ha information to IME or the appropriate MCO.
If the member is a MCO member, please send the medical information to the appropriate MCO.
- [Critical Incident Report User Guide](#) ←
- [Critical Incident Report Access Registration Form](#)
- [Nursing Facility Medically Exempt Access User Guide](#)

IMPA Training

Available Reports

Available Reports

- Login to IMPA, hover over Review, click Health Home Reports:



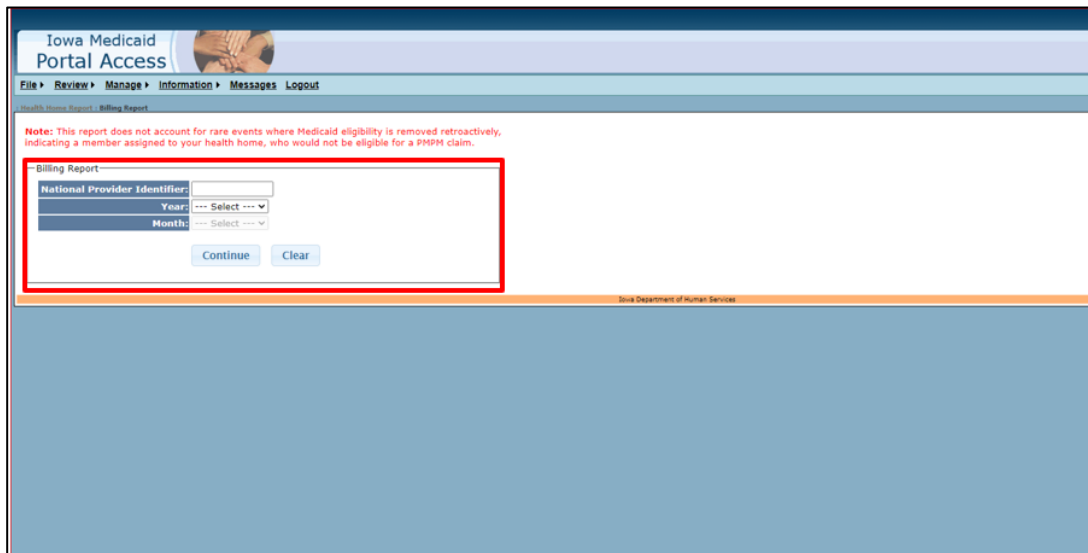
Available Reports (continued)

- Billing Report
- Assessment Coming Due
- Member Roster Report
 - The Assigned report
 - The Unassigned report
 - Not Processed report
- Participating Waiver Members Report

Available Reports (continued)

Billing Report

- The Billing Report provides information on all your members enrolled in the program.
- Enter in your organization's NPI, the applicable year and month.



The screenshot shows the Iowa Medicaid Portal Access interface. At the top, there is a navigation menu with links for File, Review, Manage, Information, Messages, and Logout. Below this, a red note states: "Note: This report does not account for rare events where Medicaid eligibility is removed retroactively, indicating a member assigned to your health home, who would not be eligible for a PMPH claim." The main form area is titled "Billing Report" and contains three input fields: "National Provider Identifier:" (a text box), "Year:" (a dropdown menu with "-- Select --"), and "Month:" (a dropdown menu with "-- Select --"). Below these fields are "Continue" and "Clear" buttons. The footer of the page reads "Iowa Department of Human Services".

Available Reports (continued)

Billing Report

Note: This report does not account for rare events where Medicaid eligibility is removed retroactively, indicating a member assigned to your health home, who would not be eligible for a PPM claim.

Billing Report

National Provider Identifier: [REDACTED]

Year: 2023

Month: January

[Continue](#) [Clear](#)

[Export to CSV](#) [Print Billing Member List](#)

NPI: [REDACTED] Status: Enrolled and Assigned

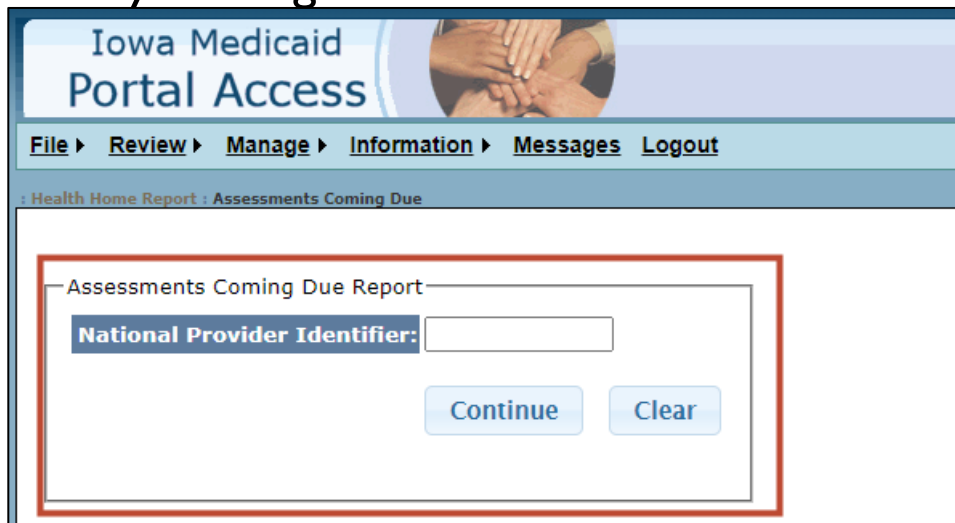
Total Number of State IDs : 13

| State ID | Member Name | Tier |
|------------|-------------|------|
| [REDACTED] | [REDACTED] | 5 |
| [REDACTED] | [REDACTED] | 8 |
| [REDACTED] | [REDACTED] | 5 |
| [REDACTED] | [REDACTED] | 8 |
| [REDACTED] | [REDACTED] | 7 |
| [REDACTED] | [REDACTED] | 6 |
| [REDACTED] | [REDACTED] | 6 |
| [REDACTED] | [REDACTED] | 7 |
| [REDACTED] | [REDACTED] | 8 |
| [REDACTED] | [REDACTED] | 6 |
| [REDACTED] | [REDACTED] | 5 |
| [REDACTED] | [REDACTED] | 0 |
| [REDACTED] | [REDACTED] | 8 |

Available Reports (continued)

Assessments Coming Due

- The assessment coming due report will provide the state IDs that are currently enrolled in Medicaid and have an assessment coming due within the next 3 months.
- Enter your organization's NPI number and click continue.



The screenshot displays the Iowa Medicaid Portal Access interface. At the top, there is a header with the text 'Iowa Medicaid Portal Access' and a circular image of hands. Below the header is a navigation menu with links: 'File', 'Review', 'Manage', 'Information', 'Messages', and 'Logout'. The main content area shows a breadcrumb trail: 'Health Home Report : Assessments Coming Due'. A red rectangular box highlights a form titled 'Assessments Coming Due Report'. Inside this form, there is a label 'National Provider Identifier:' followed by an empty text input field. Below the input field are two buttons: 'Continue' and 'Clear'.

Available Reports (continued)

Assessments Coming Due

Assessments Coming Due Report

National Provider Identifier: [REDACTED]

[Continue](#) [Clear](#)

[Export to CSV](#) [Print Assesments Coming Due List](#)

NPI: [REDACTED] Status: Enrolled and Assigned
[REDACTED]

Total Number of State IDs : 1

| State ID | Member Name | Assessment Date | Tier | Diagnosis1-10 |
|------------|-------------|-----------------|------|---------------|
| [REDACTED] | [REDACTED] | 3/22/2022 | 6 | [REDACTED] |

Available Reports (continued)

Member Roster Report

- **IMPORTANT:** This report is not the source of truth for your member enrollment (see Billing Report for member enrollment)
- This report has 3 different options for selection.
- Using the radio button at the top choose Integrated Health Home
- Choose address – click tab or enter
- Enter the start and ending dates for the report.
- Using the radio buttons choose “Assigned”, “Unassigned”, or “Not Processed”

The screenshot shows the Iowa Medicaid Portal Access interface. At the top, there is a navigation menu with options: File, Review, Manage, Information, Messages, and Logout. Below this, the page title is "Health Home Report - Member Roster". The main form area is titled "Member Roster Report" and contains the following fields and controls:

- Radio buttons for "Health Home" (unselected) and "Integrated Health Home" (selected).
- A text input field for "National Provider Identifier".
- A dropdown menu for "Address" with the text "--- Select ---".
- Two date pickers: "Start Date" (03/12/2022) and "End Date" (04/12/2023).
- Radio buttons for "Status": "Assigned" (selected), "Unassigned", and "Not processed".
- Buttons for "Continue" and "Clear".
- A red box highlights the "Status" radio buttons, with an arrow pointing to the "Assigned" button and the text "Select applicable radio button".

Available Reports

(continued)

Assigned Member Roster Report

- Provides a listing of members currently assigned to a health home or an integrated health home.
- The information provided on this report are:
 - State ID
 - Name
 - Assessment Date
 - Tier
 - Assigned
 - Last Action Date

Available Reports (continued)

Assigned Member Roster Report

1 of 1 | Select a format | Export

IOWA DEPARTMENT OF HUMAN SERVICES
Member Roster Report

Date of Report: 04/12/2023
NPI: [REDACTED]
Address: [REDACTED]
Date Range: 03/12/2022 - 04/12/2023

*The Assigned report provides a listing of members assigned to a health home or an integrated health home.

Total Number of State IDs: 12

| StateID | Name | Assessment Date | Tier | Assigned | Last Action Date |
|------------|------------|-----------------|------|----------|------------------|
| [REDACTED] | [REDACTED] | 03/28/2023 | 5 | Y | 04/07/2023 |
| [REDACTED] | [REDACTED] | 12/21/2022 | 8 | Y | 12/21/2022 |
| [REDACTED] | [REDACTED] | 09/15/2022 | 5 | Y | 10/31/2022 |
| [REDACTED] | [REDACTED] | 07/22/2022 | 8 | Y | 10/28/2022 |
| [REDACTED] | [REDACTED] | 09/30/2022 | 7 | Y | 10/06/2022 |
| [REDACTED] | [REDACTED] | 12/28/2022 | 8 | Y | 01/25/2023 |

Available Reports

(continued)

Unassigned Member Roster Report

Provides a listing of members that are no longer assigned or have never been assigned to a health home or an integrated health home.

- The information provided on this report are:
 - State ID
 - Name
 - Assessment Date
 - Tier
 - Assigned
 - Last Action Date
 - Reason

Available Reports (continued)

Unassigned Member Roster Report

| StateID | Name | Assessment Date | Tier | Assigned | Last Action Date | Reason |
|---------|------|-----------------|------|----------|------------------|---------------------|
| | | 04/22/2022 | 7 | N | 11/04/2022 | Assigned to MCO |
| | | 01/01/1900 | 4 | N | 10/12/2022 | IHAWP Participation |
| | | 01/01/1900 | 4 | N | 10/27/2022 | Assigned to MCO |
| | | 11/30/2021 | 6 | N | 06/27/2022 | Assigned to MCO |
| | | 07/15/2021 | 6 | N | 08/31/2022 | System Disenroll |

Available Reports

(continued)

Not Processed Member Roster Report

Provides a listing of members that have requested enrollment into a health home or an integrated health home and will be processed at month end processing. Approximately 6 business days before the end of each month.

- The information provided on this report are:
 - State ID
 - Name
 - Assessment Date
 - Tier
 - Assigned
 - Last Action Date

Available Reports (continued)

Not Processed Member Roster Report

| StateID | Name | Assessment Date | Tier | Assigned | Last Action Date |
|---------|------|-----------------|------|----------|------------------|
| | | 12/21/2022 | 8 | | 12/21/2022 |
| | | 09/15/2022 | 5 | | 10/31/2022 |
| | | 07/22/2022 | 8 | | 10/28/2022 |
| | | 09/30/2022 | 7 | | 10/06/2022 |
| | | 12/28/2022 | 8 | | 01/25/2023 |

Available Reports (continued)

Participating Waiver Members Report

This report provides users with a listing of eligible and enrolled members that are also participating in an active waiver program along with their case manager contact information. The information provided in this report is for the current month only.

Use the radio button to select “Integrated Health Home”

- Enter: NPI
- Select: Address
- Click: Continue



The screenshot displays the Iowa Medicaid Portal Access interface. At the top, there is a header with the text "Iowa Medicaid Portal Access" and a small image of hands. Below the header is a navigation menu with links: "File", "Review", "Manage", "Information", "Messages", and "Logout". The main content area is titled "Health Home Report : Participating Waiver Members". Below this title is a form titled "Participating Waiver Members Report". The form contains two radio buttons: "Health Home" (unselected) and "Integrated Health Home" (selected). Below the radio buttons are two input fields: "National Provider Identifier:" with a text box, and "Address:" with a dropdown menu showing "--- Select ---". At the bottom of the form are two buttons: "Continue" and "Clear".

Available Reports (continued)

Participating Waiver Members Report

The screenshot shows a web application interface for generating a report. At the top, there are navigation controls (back, forward, page 1 of 1) and an 'Export' button with a 'Select a format' dropdown menu. The main heading is 'IOWA DEPARTMENT OF HUMAN SERVICES Participating Waiver Members'. Below this, the report parameters are displayed: 'Date of Report: 04/12/2023', 'NPI: [REDACTED]', 'Address: [REDACTED]', and 'Date Range: 04/01/2023 - 04/30/2023'. A red note states: '*This report provides users with a listing of eligible and enrolled members that are also participating in an active waiver program along with their case manager contact information. The information provided in this report is for the current month only.' Below the note is a legend: 'HS = Habilitation Services | ID = Intellectual Disability | PD = Physical Disability | HD = Health & Disability | IHS = Iowa Plan Habilitation Services'. The main data is presented in a table with the following columns: State ID, Name, Waiver, Case Manager, Email, Phone, and Address. The table contains four rows of data, all of which are redacted with black boxes. The 'Waiver' column shows values of CMH, HS, CMH, and CMH.

| State ID | Name | Waiver | Case Manager | Email | Phone | Address |
|------------|------------|--------|--------------|------------|------------|------------|
| [REDACTED] | [REDACTED] | CMH | [REDACTED] | [REDACTED] | [REDACTED] | [REDACTED] |
| [REDACTED] | [REDACTED] | HS | [REDACTED] | [REDACTED] | [REDACTED] | [REDACTED] |
| [REDACTED] | [REDACTED] | CMH | [REDACTED] | [REDACTED] | [REDACTED] | [REDACTED] |
| [REDACTED] | [REDACTED] | CMH | [REDACTED] | [REDACTED] | [REDACTED] | [REDACTED] |

Contact Information

For questions, contact:

- Iowa Medicaid Health Home program specific questions: Healthhomes@dhs.state.ia.us
- IMPA access questions/issues: impasupport@dhs.state.ia.us