



DATE: [date summary is mailed]

To: Appeals Section, Bureau of Policy Analysis

ATTENTION: Liaison for appeals

FROM: [preparers name], Iowa Medicaid Enterprise

APPEAL SUMMARY

CASE NAME:

APPEAL NUMBER:

ISSUE BEING APPEALED: Whether the Department's actions were correct because the member failed to pay their monthly Iowa Health and Wellness Plan contributions. 441 IAC 74.8(249A, 85GA, SF446, 74.11(2), 74.11(4)

DEPARTMENT SUMMARY STATEMENT:

[Member name] is appealing whether the Department correctly determined the requirement of a monthly contribution for health care coverage. Contributions are assessed to all Iowa Health and Wellness Plan members who have not completed the Healthy Behaviors with incomes between 50 and 133 percent of the federal poverty level (FPL). These Iowa Health and Wellness Plan members are required to contribute to their health care coverage if they chose not to participate in the Healthy Behaviors program. The Healthy Behaviors Program, as outlined below, will allow contribution exemptions in subsequent enrollment years if the member chooses to participate in the program.

[Member name] was required to complete healthy behavior activities, a Health Risk Assessment (HRA) and an annual wellness exam, to allow a waiver of premiums. These activities must be completed each year for premiums to be waived in the next enrollment year (see Exhibit A). In addition, [he/she] did not pay the monthly contribution of \$10 per month timely and was disenrolled from the Iowa Health and Wellness plan.

Members receive information about the healthy behaviors program in advance as part of their enrollment packet. Members are advised and encouraged to participate in the Health Behaviors Program so that their health coverage contribution can be waived, which is stated on page 14 of the IA Health Link Manage Care Program booklet (Member Handbook). In addition, the HRAs can be completed online, by calling Iowa Medicaid Enterprise and completed over the phone, or with a member's primary care provider.

Premium or monthly contributions are addressed under 441 IAC 74.11(2):

74.11(2) Monthly contributions. Members enrolled in the Iowa Health and Wellness Plan with household income at or above 50 percent of the federal poverty level are required to pay monthly contributions pursuant to this rule.

a. Monthly contribution amount. The monthly contribution amount for each member is based on the countable income of the member's household, determined pursuant to rule 441—75.70(249A), as a percentage of the FPL for the household. Monthly contribution amounts are as follows:

- (1) For a member with household income between 50 and 100 percent of the FPL, \$5;
- (2) For a member with household income above 100 percent of the FPL, \$10.

b. Waiver during the first year of enrollment. The monthly contribution will be waived during the member's first 12 months of continuous enrollment."

Contributions may be exempt pursuant to 74.11(2) "c" as follows:

c. Monthly contribution exemptions. A member shall be exempt from monthly contribution payments when any of the following circumstances apply:

- (1) The member completed healthy behaviors pursuant to subrule 74.11(4) in the previous enrollment period.

- (2) The member is determined to be a medically exempt individual pursuant to subrule 74.12(3).
- (3) The member has access to cost-effective, employer-sponsored coverage and is enrolled in the health insurance premium payment program pursuant to 441—Chapter 75.
- (4) The member is exempt from premiums pursuant to 42 CFR 447.56(a)(1)(x) as an Indian who is eligible to receive or has received an item or service furnished by an Indian health care provider or through referral under contract health services.
- (5) The member claims a hardship exemption indicating that payment of the monthly contribution will be a financial hardship. The member may claim a hardship exemption by telephoning the call center designated by the department or by submitting a written statement to the address designated by the department. The member's hardship exemption must be received or postmarked within five working days after the monthly contribution due date. If the hardship exemption request is not made in a timely manner, the exemption shall not be granted.

Healthy Behaviors requirements that allow contribution exemptions in subsequent enrollment years are addressed in the following subrule:

74.11(4) Healthy behaviors. An Iowa Health and Wellness Plan member who completes a wellness examination and health risk assessment during any enrollment year shall have monthly contributions waived in the subsequent enrollment year.

a. Under healthy behaviors, a wellness examination may be related to either physical health or oral health. Physical examinations must be performed by a medical provider and must assess a member's overall physical health consistent with standard clinical guidelines for preventive physical examinations and as defined by the department. Oral examinations must be performed by a dentist consistent with standard oral health guidelines for preventive dental examinations and as defined by the department.

b. A health risk assessment must be one of the following:

- (1) An "Assess My Health" assessment offered through the department;
- (2) An assessment offered by a managed care plan through which the member is receiving Iowa Health and Wellness Plan benefits; or
- (3) An assessment offered by a qualified health plan through which the member is receiving Iowa Health and Wellness Plan Benefits.

Members may be terminated from the Iowa Health and Wellness Marketplace Choice Plan and subject to recovery pursuant to 74.11(2) “e” as follows:

e. Failure to pay monthly contributions.

(1) An Iowa wellness plan member who fails to pay the assessed monthly contributions and who does not qualify for a monthly contribution exemption pursuant to subrule 74.11(2) shall owe the monthly contribution to the department as an unpaid premium subject to recovery in accordance with rule 441—75.28(249A). A member shall have no less than 90 days from the due date to pay any unpaid monthly contribution before the unpaid amount shall be subject to recovery.

(2) A marketplace choice plan member who fails to pay the assessed monthly contribution and who does not qualify for a monthly contribution exemption pursuant to subrule 74.11(2) shall have the member’s eligibility terminated. In addition, the unpaid monthly contribution shall be subject to recovery in accordance with rule 441—75.28(249A) as an unpaid premium.

1. A member shall have no less than 90 days from the due date to pay any unpaid monthly contribution before eligibility will be terminated or the unpaid amount will be subject to recovery.

2. A member whose eligibility is terminated due to nonpayment of monthly contributions must reenroll for Medicaid benefits pursuant to 441—Chapter 76.

CC ALJ [name]
[Appellants name]