

Integrated Health Home Termination Process

This SPA termination will be statewide as of a certain date or may phase-out the program over time. Notifications of the program termination should be sent to all participants and providers, giving information about the program termination and how it will affect them. CMS must approve the state's plans to terminate the program, as described below.

Rational for Termination

Challenges and Reasons for Sunset

Despite its strong foundation, the IHH program has faced persistent challenges in key areas:

- Meeting timely assessment and service planning requirements.
- Maintaining adequate staffing and retaining trained personnel.
- Consistently meeting quality standards, as outlined in a recent review by the Centers for Medicare & Medicaid Services (CMS).

To better serve members and improve care delivery, the program will be gradually phased out and replaced by more effective and sustainable models.

Approach

Transition Plan

Summarize the termination plan in a way that is sufficiently clear, detailed, and complete to permit the reviewer to determine that it meets applicable federal statutory, regulatory and policy requirements.

Planning

Iowa HHS plans to sunset the current Integrated Health Home (IHH) program by December 31, 2025.

Iowa HHS has been working to align our Behavioral Health Service state plan and system to make it easier for mental health and substance use providers to connect Iowans with the care they need— no matter where they seek help.

HHS is working to improve the quality and oversight of case management services across the state. As part of this effort, we're setting consistent training requirements, adding new reporting measures, and establishing caseload ratio guidelines.

The state's description of the process used to transition all beneficiaries should include how the beneficiaries may continue to access services, how referrals will be made to other services and the methods of communication that will take place to the beneficiaries, providers, and other stakeholders so that the affected beneficiaries will continue to be able to access medical care and other social and supportive services.

This program is not tied to eligibility and will not affect Medicaid coverage for members. There are no changes to the member benefits/services available.

Describe the process that will be used to transition all the participants and how referrals will be made to other health care providers.

This process will begin 6 months prior to the termination of the program (July 1, 2025).

Transition Strategy

The IHH sunset aligns with Iowa's new behavioral health system launch, including Certified Community Behavioral Health Clinics (CCBHCs) and enhanced Targeted Case Management (TCM) options.

A structured transition plan is in place to minimize disruption for members, providers, and Managed Care Organizations (MCOs).

Iowa HHS will provide ongoing updates and support to all stakeholders during the transition.

Key Transition Dates

- July 1, 2025 – Begin transition meetings for adults in the Habilitation and Non-Intensive Case Management (Non-ICM) programs.
- August 1, 2025 – Begin transition meetings for children in the Children's Mental Health Waiver and Non-ICM programs.
 - IHH will stop enrolling new members after this date.
- September 30, 2025 – Complete transition of all eligible adults to:
 - Targeted Case Management (TCM)

- MCO Community-Based Case Management (CBCM)
- CCBHCs
- December 30, 2025 – Complete transition of all eligible children to the same services.
- December 31, 2025 – The IHH program will officially end.