

CSA – Retrieving Assessment Referrals and Scheduling

Purpose:

The Core Standardized Assessments (CSA) Unit retrieves assessment referrals through the IoWANS system, the SQL Server Reporting Services, IA CSA Service Desk and from the Managed Care Organizations (MCOs) and schedules assessments.

Identification of Roles:

Case Manager (CM) – Submits request for core standardized assessment.

Scheduler – Identifies referrals and schedules assessments.

Assessor – Reviews workload status and scheduled assessments.

Respondent – Identified as an individual who meets the assessment qualifications and will participate in an assessment.

Manager – Monitors workload assignments, process workflow and deliverables.

Communications Triage Team – Manages and processes incoming assessment requests through centralized scheduling system. Uses the JIRA Service Management platform (IA CSA Service Desk) as the primary tracking system.

Performance Standards:

- Complete and submit to the Agency face-to-face or virtual assessments within thirty (30) days from Agency referral for those newly applying for services.
- The Assessor will complete all reassessments (Continued Stay Reviews known as CSRs) within fourteen (14) calendar days prior to the twelve-month anniversary (CSR) date. Assessments will be submitted to the Agency within five (5) business days from date of completion.
- The Assessor will complete Emergency Needs Assessments and urgent LOCUS reviews and submit them to the Agency within two (2) business days of referral.

Path of Business Procedure:

Step 1: After an application for Medicaid services has been completed and there is a waiver slot assigned or as a Member's twelve-month CSR anniversary date approaches, referrals for assessments and/or reassessments for a Core Standardized Assessment (CSA) will be forwarded to the Scheduler through the IoWANS work page or via a Vendor Import Template.

The Communications Triage Team will manage all incoming assessment requests through the JIRA Service Management platform (IA CSA Service Desk). This

centralized system will be used to track and process all referrals in conjunction with loWANS workflows.

Step 2: The Scheduler will send an introduction letter to each Member who will receive a face-to-face assessment (see Form 1 below).

Step 3: Upon receiving a referral, the Scheduler will identify the Case Manager (CM) for Members in need of face-to-face assessments from the Respondents' tab in the Scheduling Assistant Manager (SAM). If a Case Manager is not listed in SAM, this can be identified via the Roles tab in loWANS for Fee For Service (FFS) Members or by emailing the designated MCO representative.

LTSS_Iowa@elevancehealth.com

ITC_LOC_Review@IowaTotalCare.com

MolinalALOC@MolinaHealthCare.Com

The Scheduler will email an Information Request Form to the CM asking for scheduling information (see Form 2 below). This form will allow the CM to identify key Respondents and will identify any Member needs or concerns for face-to-face assessments.

The Scheduler will utilize the JIRA Service Management platform (IA CSA Service Desk) to track and manage all information requests. SMS-based communications will be used when appropriate to confirm receipt of information and scheduling details.

For Members who are newly entering services and do not have an identified Case Manager, the Scheduler will contact the Member directly and ask the Member if there are other representatives (family, providers, etc.) who should be included in the assessment.

Step 4: The Scheduler will contact the Member (or guardian/representative), CM and identified Respondents to identify a location, date, and time for the assessment. Schedulers will attempt to contact the Member to schedule the assessment within five (5) business days of receiving the referral.

Step 5: The Scheduler and Assessor will demonstrate responsiveness to accommodate the scheduling preferences and limitations of all attendees.

The CSA unit's core business hours are Monday-Friday, 8:00AM – 4:30PM. All efforts will be made to schedule assessments during this time frame. In some cases, it might not be possible for a Member or Respondent to meet during this time frame due to work or school schedules, and other alternatives can be considered:

- Upcoming no school days
- Scheduled 'early release' days within the district
- Conducting the assessment at the school

- Arranging for the Assessor to meet the Member at school prior to beginning the assessment

In the event an alternative solution cannot be arranged, the Scheduler can reach out to the Assessor to identify a time outside of the core hours in which an assessment could be scheduled.

Step 6: While most assessments will be conducted in the Member's home or provider's office, the Scheduler will inquire about the need for accommodations for Members and attendees. Mobility considerations may affect choice of sites other than the Member's home.

Note: Per Informational Letter No 2449-MC-FFS-CVD, assessments shall occur face-to-face unless virtual/telehealth processes are specifically requested by the Member because of documented health concerns with annual documentation from a physician. Alternatively, a Member who has applied for waiver services in the state of Iowa, but is currently residing out of state may also receive a virtual assessment when a slot becomes available for them. The Scheduler should ensure the Member intends to return to the state of Iowa if they are approved for waiver services prior to scheduling.

Step 7: The Scheduler will enter the identified appointment into the Assessor's Microsoft Outlook calendar and in the Scheduling Assessment Management (SAM) Program. The Scheduler will confirm the appointment date, time, and location in writing to those scheduled to attend (see Form 3 below). The confirmation materials will also include a fact sheet explaining the purpose of the assessment and prepare the respondents/attendants by answering frequently asked questions (see Form 4 below).

The Scheduler will utilize the digital scheduling platform to manage appointments and send automated SMS confirmations to all participants. The JIRA Service Management platform will be used to track all scheduling activities and communications.

Step 8a: The Scheduler will attempt to contact the Member to schedule the assessment within five (5) business days of receiving the referral. If the Member does not answer, the scheduler will leave a voicemail if able.

Step 8b: If the number is not in service, the Scheduler will contact the CM and/or Eligibility Benefits Specialist at facilities@hhs.iowa.gov for additional contact information for the Member.

An Unable to Reach (UTR) letter (see Form 5 attached) will be sent to the Member and CM at this time. The letter will inform the Member they have ten (10) days to reach out to Telligen to schedule their assessment, or their application will be closed. This letter clearly states failure to comply with the eligibility requirement of an annual assessment will lead to the loss of waiver. Upon receipt of a new phone number, the Scheduler will call the Member within one business day.

Step 8c: A second attempt to reach the Member will be made by the Scheduler. It is best practice that this will be completed within ten (10) days of receiving the referral, but this may not always be possible. If the Scheduler is still unable to contact the Member with the current information on the second attempt, they will email the CM and/or Eligibility Benefits Specialist at facilities@hhs.iowa.gov to gather alternate contact information. If the Scheduler is unable to reach the Member, and cannot leave a voicemail for the Member, a UTR letter will be issued to the Member and the CM.

Step 8d: A third and final attempt to reach the Member will be made within 15 business days from the date of referral. If the Member is unable to be reached with three (3) contact attempts via multiple communication channels (phone, email, mail) over a 15 business day period, the Scheduler will send an email to the CM and/or Eligibility Benefits Specialist at facilities@hhs.iowa.gov to request closure of the Member's application. If the Member is FFS, the Member's IoWANS milestone will be answered 'Unable to Contact Member' at this time.

Step 8e: If a Member contacts Telligen within 14 calendar days, the Eligibility Benefits Specialist will be notified that the case needs to be re-opened in IoWANS. If a Member contacts Telligen after 14 calendar days, they will be directed to..... (this is new and we need feedback from HHS what to put here).

Step 9: If an assessment is cancelled, the Scheduler will notify the Assessor, Member, Case Manager, and all Respondents. The assessment will be cancelled in the SAM application, and the assessment will be marked as cancelled on the Assessor's calendar. The Home and Community Based Services (HCBS) Slot Manager at Iowa Medicaid will be notified to change the workflow in IoWANS. A letter notifying the Member of the cancellation will be sent to the Member (see Form 6 attached).

Communication Systems and Channels:

Staff will utilize the JIRA Service Management platform (IA CSA Service Desk) for:

- Managing assessment requests
- Tracking scheduling activities
- Processing incoming communications
- Callback system management

Forms/Reports:

- [Form 1: Introduction Letter](#)
- [Form 2: Information Request Form](#)
- [Form 3: Confirmation Letter interRAI](#)
- [Form 4: Frequently Asked Questions Flier](#)
- [Form 5: Unable to Reach Letter](#) (Assessment to be scheduled)
- [Form 6: Unable to Reach Letter](#) (Assessment cancelled)

Form 1: Introduction Letter



September 3, 2025 Page 1

«MemFirstName» «MemLastName»
«Add1»
«Add2»
«City», «State» «ZIP»

Medicaid Assessment to be Scheduled

Case ID: «ReviewId»

Dear «MemFirstName» «MemLastName»:

Telligen has been contracted by Iowa Medicaid to complete a Medicaid waiver assessment interview regarding your functional abilities. The assessment will be used to identify what services best fit your needs and guide your eligibility for receiving these services. The assessment is a requirement for individuals applying for or currently receiving Medicaid waiver and habilitation services.

This letter is to inform you that a staff member from Telligen will be calling you to schedule this interview. The assessment is a set of questions about your activities of daily living, needs, strengths and preferences. The assessment will occur in person and may take 1.5 to 2.5 hours to complete. You may have a family member or other important person participate in your interview with you. If you have a case manager, please let them know you have received this letter.

Any delay in completing this assessment could impact the services you receive and your ability to remain on the Medicaid waiver. If you have questions, please call 877-563-6972 and ask for an Assessment Scheduler. Please refer to the Case ID shown above.

Sincerely,
Telligen / Iowa Core Standardized Assessments Team

Telligen Scheduling Team Contact Information:

Phone: 877-563-6972

Email: IowaScheduling@Telligen.com

Please refer to the Case ID above when contacting us.

Form 2: Information Request Form



(800)383-2856

(515)223-2900

1776 West Lakes Pkwy

West Des Moines, Iowa 50266

www.telligen.com

February 20, 2025

Dear Case Manager:

We are scheduling an interRAI assessment for the member listed below. This assessment is necessary for members newly entering or continuing services. **The assessor must meet the member prior to/during the assessment; however, the member is not required to attend the entire assessment.** For those newly entering services, the assessment must be completed within thirty (30) days from Agency/MCO referral. For continuing services, the assessment must be completed on or before the yearly continued stay review date. In order to assist in the scheduling process, please complete the information below and return the form to iowaScheduling@telligen.com at your earliest convenience.

CSR due date for this assessment is «CSR_Due_Date». We are considering scheduling this interview between «From»-«To», during normal business hours (8:00AM-4:30PM).

Tab through the form to enter the requested information and type or print legibly.

Please check box if member is MFP.

Assessment Informant Form	
Member Name:	
SID/Medicaid #:	
DOB:	
Address:	
Member Phone #:	
Member Email: (if available)	
Waiver(s) Type:	
Review Type: (CSR, Initial, PE-LOC, etc.)	
CSR Date: (anniversary date of previous assessment)	
Assessment Type:	
Is an interpreter required to schedule and/or complete assessment?	
Member's Full Scale IQ/date of psych eval: (ID waiver only)	
Preferred method of Assessment: (Zoom, telephonic, face-to-face, any)	

Preferred date/time to complete assessment:	
Location of Assessment: (member's home, provider office, etc.)	
Address of Assessment Location:	
CM Name:	
CM Phone #:	
CM Email:	
List any safety/environmental concerns and/or important information:	
Member Diagnosis:	
Member Medications: (please include route, dose, and frequency for prescription and/or over the counter medications if available)	
Member Primary Care Physician: (Name, address, phone number if available)	
Please provide contact information for all Respondents/Informants who wish to be included in the assessment.	
Respondent/Informant 1:	
Name:	
Email Address:	
Phone #:	
Respondent/Informant 2:	
Name:	
Email Address:	
Phone #:	
Respondent/Informant 3:	
Name:	
Email Address:	
Phone #:	

Thank you for your prompt assistance.

Form 3: Confirmation Letter interRAI



1776 West Lakes Pkwy
West Des Moines, IA 50266

September 4, 2025 Page 1

«ToName»
«Add1»
«Add2»
«City», «State» «ZIP»

Medicaid Assessment Scheduled

Review ID: «ReviewId»

Dear «MemberName»:

Your interview to complete a Medicaid Waiver assessment has been scheduled with a Telligen assessor. The assessor will ask about support you need at home, in the community and at school or work, if it applies to you. We will meet with you and your support team. Please allow 1.5 to 2.5 hours to complete your scheduled assessment.

Your interview is scheduled as follows:

Date: «IntDate» Time: «IntTime»

Location: «AssessmentLocationID»

If available, please have the following suggested information available for the assessor:

- A list of your medical conditions and/or diagnoses
- A list of your current medications
- Contact information for your Primary Care Physician (PCP)
- Date of most recent psychological exam and full-scale IQ (FSIQ) if applicable

The assessor must speak with you before or at the start of the interview. If this is not possible, please contact us to re-schedule the interview.

If you have questions or are unable to keep this appointment, please reach out to the Telligen Scheduling team prior to the assessment.

Sincerely,
Telligen/Iowa Core Standardized Assessments Team

Telligen Scheduling Team Contact Information:

Phone: 877-563-6972

Email: lowascheduling@Telligen.com

Please refer to the Case ID above when contacting us.

Next Steps: Following the assessment interview, Iowa Medicaid Medical Services will complete a level of care review to determine whether you are eligible for the waiver. **You will be notified by the Department or your Case Manager with the review determination.** For questions regarding the determination process, please reach out to your MCO or email:

AssessmentsIowa@Telligen.com

Iowa Total Care

Phone: 1-833-404-1061

Molina Healthcare of Iowa

Phone: 1-844-236-0894

Wellpoint Iowa, Inc

Phone: 1-833-731-2140

CC: «CM_NAME»
«Respond1»

Form 4: Frequently Asked Questions Flier

How to Prepare for Your Assessment Interview

What is the interRAI (iRAI) Assessment?

The interRAI assessment is an assessment of a person's functioning, needs, strengths and preferences. It helps guide planning of care and services to help people live in their home and community.

This checklist will help you prepare for the interview and provide the best information:

- You may include another person or persons in the interview who know you well.
- The questions are about how you carry out your regular activities.

These questions will help the Medicaid program know if you qualify for services and what services best fit your needs.

- Before the interview – think about the types of support you need and how often you need them.
- If possible, please obtain a list of your medications and diagnoses from your physician so you can give the list to the assessor.
- If you are not able to have the list ready, please be able to provide contact information for your doctor.
- During the interview you can request to speak privately to the assessor. Your family members or support staff may also wish to speak privately to the assessor.
- You may need to demonstrate how you do some activities such as walking or moving across the room.
- After the interview, the results of the assessment will be sent to Iowa Medicaid.



Questions?
Phone: 1-877-563-6972
Email: IowaScheduling@Telligen.com

Healthcare Intelligence



Form 5: Unable to Reach Letter



1776 West Lakes Pkwy
West Des Moines, IA 50266

September 4, 2025 Page 1

«MemFirstName» «MemLastName»
«Add1»
«Add2»
«City», «State» «ZIP»

Medicaid Assessment to be Scheduled

Case ID: «ReviewId»

Dear «MemFirstName» «MemLastName»:

Telligen's Core Standardized Assessments Team is contracted to complete assessments for the Medicaid waiver programs. Your assessment for «Program» Waiver needs to be completed by «CompleteBy». We have been unsuccessful in our attempts to reach you by phone. State and Federal eligibility criteria for waiver enrollment requires that an assessment be completed during the application process and at least every 365 days. Failure to comply with these requirements can lead to loss of the waiver, and potentially loss of Medicaid coverage.

Please call the Telligen scheduler by «UTR_ResponseDate» or your waiver program may be closed. The number to call is 877-563-6972. Please refer to Case ID «ReviewId». Thank you.

Questions?

Phone: 877-563-6972

Email: lowascheduling@Telligen.com

Please refer to the Case ID above when contacting us, thank you!

Form 6: Unable to Reach Letter



N1776 West Lakes Pkwy
West Des Moines, IA 50266

September 4, 2025

«MemFirstName» «MemLastName»
«Add1»
«Add2»
«City», «State» «ZIP»



Medicaid Assessment Cancelled

Case ID: «ReviewId»

Dear «MemFirstName» «MemLastName»:

Telligen's Core Standardized Assessment Team is contracted to complete assessments for the Iowa Medicaid waiver programs. You were previously notified that your assessment was scheduled for . This letter is to notify you that this assessment has been cancelled. Please contact Iowa Medicaid Member Services at 800-338-8366 if you have any questions regarding this.

If you believe this assessment has been cancelled in error, please call the Telligen scheduling team. The number to call is 877-563-6972. Please refer to Case ID «ReviewId». Thank you.

Sincerely,
Telligen / Iowa Assessments Team

Questions?

Phone: 877-563-6972

Email: IowaScheduling@Telligen.com

Please refer to the Case ID above when contacting us, thank you!

RFP Reference:

1.3.1.2.A

Interfaces:

IoWANS
SAM
ILS
Microsoft Outlook
JIRA
Talkdesk

Attachments:

N/A