



An Independent Licensee of the Blue Cross and
Blue Shield Association

June 25, 2014

Leah B. Nash
Centers for Medicare & Medicaid Services
Center for Medicare & Medicaid Innovation

Re: Iowa's Response to State Innovation Models (SIM): Round Two of Funding for Design and Test Assistance (Funding Opportunity Number: CMS-1G1-14-001)

Dear Ms. Nash:

On behalf of Wellmark Blue Cross and Blue Shield of Iowa, I am pleased to write this letter in support of Iowa's Model Test Grant Proposal, in response to the Centers for Medicare and Medicaid Services (CMS) Funding Opportunity Number: CMS-1G1-14-001.

Wellmark has a history of a strong relationship with the Iowa Medicaid Enterprise (IME) and is supportive of the work outlined in this proposal. Like the IME, Wellmark is committed to improving population health, transforming health care delivery systems, and decreasing per capita total health care spending in Iowa.

The proposal that has been developed, and the strategies that will be tested as part of this work, have tremendous potential to achieve these goals. Additionally, the strategies build upon the strong work already being done in Iowa, and maximize and leverage the transformative work already underway, including development of a Medicaid Accountable Care Organization contracting methodology that aligns payment and quality measures across payers, promotes transparency and data sharing to improve outcomes, better engages Iowans in their health care, and lowers the cost of health care for all Iowans. A Model Test Grant award would allow Iowa to make incredible progress in its efforts to transform the health care system, test new and innovative ideas, and improve the health of Iowans while reducing costs.

Wellmark is committed to supporting the implementation of this initiative. Wellmark introduced ACOs in Iowa in 2012. The Wellmark ACO program has eight provider participants covering 59 of our 99 counties; over 1,500 primary care providers and 255,000 patients. Wellmark and IME have been sharing our ACO experience for two years. As a result of these conversations, Wellmark and IME have



Leah B. Nash
June 25, 2014
Page 2

chosen the same ACO analytic vendor. This common thread results in a cohesive program between two major payers in Iowa aligning payment and quality measures, promoting transparency and data sharing. Wellmark will continue to collaborate with IME in ways that support delivery system transformation and reduces the health care costs in Iowa. I understand that I may be asked to participate in an in person or video conference meeting with CMS as part of the proposal process.

We have full confidence that the Iowa Medicaid Enterprise, along with its partners, will meet the goals of its proposal. For any questions, please do not hesitate to contact me at 515-376-5252 or jacksonlj@wellmark.com.

Sincerely,

Laura Jackson
Executive Vice President
Health Care Innovation and Business Development



1755 59th Place
West Des Moines, IA 50266
P: (515) 643-4000

June 30, 2014

Leah B. Nash
Centers for Medicare & Medicaid Services
Center for Medicare & Medicaid Innovation

Re: Iowa's Response to State Innovation Models (SIM): Round Two of Funding for Design and Test Assistance (Funding Opportunity Number: CMS-1G1-14-001)

Dear Ms. Nash:

On behalf of the University of Iowa Health Alliance (UIHA) I am pleased to write this letter in support of Iowa's Model Test Grant Proposal, in response to the Centers for Medicare and Medicaid Services (CMS) Funding Opportunity Number: CMS-1G1-14-001.

UIHA has a history of a strong relationship with the Iowa Medicaid Enterprise (IME) and is supportive of the work being proposed in this proposal. Like the IME, UIHA is committed to improving population health, transforming healthcare delivery systems, and decreasing per capita total health care spending in Iowa.

The proposal that has been developed, and the strategies that will be tested as part of this work, have tremendous potential to achieve these goals. Additionally, the strategies build upon the strong work already being done in Iowa, and maximize and leverage the transformative work already underway, including development of a Medicaid Accountable Care Organization contracting methodology that aligns payment and quality measures across payers, promotes transparency and data sharing to improve outcomes, better engages Iowans in their healthcare, and lowers the cost of health care for all Iowans. A Model Test Grant award would allow Iowa to make incredible progress in its efforts to transform the health care system, test new and innovative ideas, and improve the health of Iowans while reducing costs.

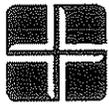
The University of Iowa Health Alliance is committed to supporting the implementation of this initiative. Specifically, UIHA will contribute to the SIM process by expanding our engagement with IME on all aspects of care transformation and population health to include enhanced data exchange and increased incentive alignment. I understand that I may be asked to participate in an in person or video conference meeting with CMS as part of the proposal process

We have full confidence that the Iowa Medicaid Enterprise, along with its partners, will meet the goals of its proposal. For any questions, please do not hesitate to contact me at 563-424-5694 or dkueter@uihealthalliance.com.

Sincerely,

A handwritten signature in black ink, appearing to read "Daniel Kueter". The signature is stylized and includes a long horizontal stroke extending to the right.

Daniel Kueter
Chief Executive Officer



UnityPoint Health

Government Relations
1776 West Lakes Parkway, Suite 400
West Des Moines, IA 50266
Office: (515)-241-3390
Fax: (515) 241-6220
unitypoint.org

June 23, 2014

Leah B Nash
Centers for Medicare & Medicaid Services
Center for Medicare & Medicaid Innovation

Re: Iowa's Response to State Innovation Models (SIM): Round Two of Funding for Design and Test Assistance (Funding Opportunity Number: CMS-1G1-14-001)

Dear Miss Nash,

On behalf of UnityPoint Health (UPH), I am pleased to write this letter in support of Iowa's Model Test Grant Proposal, in response to the Centers for Medicare and Medicaid Services (CMS) Funding Opportunity Number: CMS-1G1-14-001.

UPH has a history of a strong relationship with the Iowa Medicaid Enterprise (IME) and is supportive of the work being proposed in this proposal. Like the IME, UPH is committed to improving population health, transforming healthcare delivery systems, and decreasing per capita total health care spending in Iowa.

The proposal that has been developed, and the strategies that will be tested as part of this work, have tremendous potential to achieve these goals. Additionally, the strategies build upon the strong work already being done in Iowa, and maximize and leverage the transformative work already underway, including development of a Medicaid Accountable Care Organization contracting methodology that aligns payment and quality measures across payers, promotes transparency and data sharing to improve outcomes, better engages Iowans in their healthcare, and lowers the cost of health care for all Iowans. A Model Test Grant award would allow Iowa to make incredible progress in its efforts to transform the health care system, test new and innovative ideas, and improve the health of Iowans while reducing costs.

UPH is committed to supporting the implementation of this initiative. Specifically, UPH will contribute to the SIM process by continuing to participate in the current Iowa Medicaid Wellness ACO and in any future Iowa Medicaid ACO models. UPH is also committed to piloting payment reform initiatives that move the state towards a full

capitation model. We already have a combined team that meets monthly to identify opportunities to continuously improve the quality of care and engage the Iowa Medicaid population. I understand that I may be asked to participate in an in person or video conference meeting with CMS as part of the proposal process

We have full confidence that the Iowa Medicaid Enterprise, along with its partners, will meet the goals of its proposal. For any questions, please do not hesitate to contact me at 515-241-3390 or sabra.rosener@unitypoint.org

Sincerely,

A handwritten signature in black ink that reads "Sabra Rosener". The signature is fluid and cursive, with a long horizontal flourish extending to the right.

Sabra Rosener - VP, GRO, Public Policy and Government Payors
Unitypoint Health



TRINITY PIONEER ACO

July 3, 2014

Leah B. Nash
Centers for Medicare & Medicaid Services
Center for Medicare & Medicaid Innovation

Re: Iowa's Response to State Innovation Models (SIM): Round Two of Funding for Design and Test Assistance
(Funding Opportunity Number: CMS-1G1-14-001)

Dear Ms. Nash,

On behalf of Trinity Pioneer ACO, L.L.C., I am pleased to write this letter in support of Iowa's Model Test Grant Proposal, in response to the Centers for Medicare and Medicaid Services (CMS) Funding Opportunity Number: CMS-1G1-14-001.

The four organizations that comprise the Trinity Pioneer; Trinity Regional Medical Center, Trimark Physician's Group, Berryhill Center for Mental Health and Trinity Home Care, have a history of a strong relationship with the Iowa Medicaid Enterprise (IME) and are supportive of the work being proposed in this proposal. Like the IME, Trinity Pioneer is committed to improving population health, transforming healthcare delivery systems, and decreasing per capita total health care spending in Iowa.

The proposal that has been developed, and the strategies that will be tested as part of this work, have tremendous potential to achieve these goals. Additionally, the strategies build upon the strong work already being done in the Pioneer, and maximize and leverage the transformative work already underway, including development of a Medicaid Accountable Care Organization contracting methodology that aligns payment and quality measures across payers, promotes transparency and data sharing to improve outcomes, better engages Iowans in their healthcare, and lowers the cost of health care for all Iowans. A Model Test Grant award would allow Iowa to make incredible progress in its efforts to transform the health care system, test new and innovative ideas, and improve the health of Iowans while reducing costs.

Trinity Pioneer is committed to supporting the implementation of this initiative. Specifically, Trinity Pioneer will contribute to the SIM process by focusing on rural populations serving broad spectrum of Medicaid clients in small communities.

I understand that I may be asked to participate in an in person or video conference meeting with CMS as part of the proposal process.

We have full confidence that the Iowa Medicaid Enterprise, along with its partners, will meet the goals of its proposal. For any questions, please do not hesitate to contact me at 515-574-6521 or pam.halvorson@unitypoint.org

Sincerely,

A handwritten signature in cursive script, appearing to read "Pamela Halvorson".

Pamela Halvorson
Executive ACO Sponsor
Trinity Pioneer ACO



July 14, 2014

Leah B. Nash
Centers for Medicare & Medicaid Services
Center for Medicare & Medicaid Innovation

**RE: Iowa's Response to State Innovation Models (SIM): Round Two of Funding for Design and Test Assistance
(Funding Opportunity Number: CMS-1G1-14-001)**

Dear Ms. Nash:

On behalf of Iowa's 118 community hospitals, the Iowa Hospital Association (IHA) writes to support Iowa's Model Test Grant Proposal in response to the Centers for Medicare & Medicaid Services' (CMS) Funding Opportunity Number CMS-1G1-14-001.

IHA has been involved in the SIM planning process from its inception, supports the concepts of care coordination and shares in the vision of the Triple Aim as a means to reduce costs and improve quality. IHA continues to work with Iowa Medicaid concerning ongoing planning and development, particularly in the area of provider readiness and access to care as well as in seeking further clarification and details on the SIM process going forward.

Over the past 18 months, the SIM steering committee and various topical subcommittees completed a significant amount of work in collaboration with multiple stakeholders. The result is a vision plan that has tremendous potential for Iowa. Taking into consideration the progress that has already been made in Iowa on a variety of health care delivery and payment fronts, approval of a Model Test Grant would allow Iowa to continue efforts aimed at transforming the health care system to a value-based model.

IHA would like to reiterate the speedy and overwhelming response to provider adoption of the Iowa Health and Wellness Plan (Medicaid expansion) which underscores the commitment to improvement and eagerness for innovation in Iowa's health care industry.

IHA has been and remains committed to supporting the implementation of this initiative. Specifically, IHA has supported this process already by engaging a number of hospital CEOs and staff in the planning process with Iowa Medicaid and other stakeholders, held educational sessions on the SIM and updates to members, and a strong advocacy campaign that was successful in expanding the Medicaid program in Iowa which sets the stage for the next steps of the SIM.

IHA seeks to continued engagement in this plan, and strongly urges CMS to approve the Model Test Grant phase. IHA continues to work with Iowa Medicaid to seek additional details on remaining concerns, but based on experience thus far, IHA is confident that more details will emerge and hospitals will continue to lead in influencing the development of this plan.

Thank you for the opportunity to provide this information. Feel free to contact me with any questions or for more information at royerd@ihaonline.org or 515-288-1955.

Sincerely,

A handwritten signature in black ink that reads 'Dan Royer'.

Daniel C. Royer
Director, Policy and Regulatory Affairs
Iowa Hospital Association



July 8, 2014

Leah B Nash
Centers for Medicare & Medicaid Services
Center for Medicare & Medicaid Innovation

Re: Iowa's Response to State Innovation Models (SIM): Round Two of Funding for Design and Test Assistance
(Funding Opportunity Number: CMS-1G1-14-001)

Dear Ms. Nash:

On behalf of Iowa Department on Aging, I am pleased to write this letter in support of Iowa's Model Test Grant Proposal, in response to the Centers for Medicare and Medicaid Services (CMS) Funding Opportunity Number: CMS-1G1-14-001.

The Iowa Department on Aging has a history of a strong relationship with the Iowa Medicaid Enterprise (IME) and is supportive of the work being proposed in this proposal. Like the IME, the Iowa Department on Aging is committed to improving population health, transforming healthcare delivery systems, and decreasing per capita total health care spending in Iowa.

The proposal that has been developed, and the strategies that will be tested as part of this work, have tremendous potential to achieve these goals. Additionally, the strategies build upon the strong work already being done in Iowa, and maximize and leverage the transformative work already underway, including development of a Medicaid Accountable Care Organization contracting methodology that aligns payment and quality measures across payers, promotes transparency and data sharing to improve outcomes, better engages Iowans in their healthcare, and lowers the cost of health care for all Iowans. A Model Test Grant award would allow Iowa to make incredible progress in its efforts to transform the health care system, test new and innovative ideas, and improve the health of Iowans while reducing costs.

The Iowa Department on Aging is committed to supporting the implementation of this initiative. Specifically, Iowa Department on Aging will contribute to the SIM process through its administration of the Lifelong Links (Iowa's "No Wrong Door") system and continued work with LTCSS at the local level through the Area Agencies on Aging. I understand that I may be asked to participate in an in person or video conference meeting with CMS as part of the proposal process.

We have full confidence that the Iowa Medicaid Enterprise, along with its partners, will meet the goals of its proposal. For any questions, please do not hesitate to contact me at (515) 725-3333 or donna.harvey@iowa.gov.

Sincerely,

A handwritten signature in black ink that reads "Donna K. Harvey". The signature is written in a cursive, flowing style.

Donna K. Harvey, Director
Iowa Department on Aging



Iowa Department of Public Health
Promoting and Protecting the Health of Iowans

Gerd W. Clabaugh, MPA

Terry E. Branstad
Governor

Kim Reynolds
Lt. Governor

Director

July 10, 2014

Leah B Nash
Centers for Medicare & Medicaid Services
Center for Medicare & Medicaid Innovation

Dear: Ms. Nash

On behalf of the Iowa Department of Public Health, I am pleased to write this letter in support of Iowa's Model Test Grant Proposal, in response to the Centers for Medicare and Medicaid Services (CMS) Funding Opportunity Number: CMS-1G1-14-001.

The IDPH has a history of a strong relationship with the Iowa Medicaid Enterprise (IME) and is supportive of the work being proposed in this application. Improving population health is one of IDPH's key missions and we are committed in working with IME to improve the health of Iowa's population. As Iowa's Director of Public Health, I endorse the Plan for Improving Population Health included in this application.

The proposal that has been developed and the strategies that will be tested as part of this work have tremendous potential to achieve these goals. Additionally, the strategies build upon the strong work already being done in Iowa, and maximize and leverage the transformative work already underway, including the development of a Medicaid Accountable Care Organization contracting methodology that aligns payment and quality measures across payers, promotes transparency and data sharing to improve outcomes, better engages Iowans in their healthcare, and lowers the cost of health care for all Iowans. The SIM testing opportunity will be a critical catalyst in healthcare reform in Iowa. As displayed in the successful design phase, the SIM is opening the doors to wide spread collaboration that will bring stakeholders to the "table" together for the first time.

IDPH is committed to supporting the implementation of this initiative. Specifically, IDPH will be a significant contributor to the SIM process by conducting various initiatives that will support the integration of public health into the delivery model proposed in this application. I understand that I may be asked to participate in an in-person or video conference meeting with CMS as part of the proposal process.

For any questions, please do not hesitate to contact me at Gerd.Clabaugh@idph.iowa.gov.

Sincerely,

Gerd W. Clabaugh, MPA
Director, Iowa Department of Public Health



Meridian

Health Plan

June 30, 2014

Leah B Nash
Centers for Medicare & Medicaid Services
Center for Medicare & Medicaid Innovation

Re: Iowa's Response to State Innovation Models (SIM): Round Two of Funding for Design and Test Assistance (Funding Opportunity Number: CMS-1G1-14-001)

On behalf of Meridian Health Plan of Iowa, I am pleased to write this letter in support of Iowa's Model Test Grant Proposal, in response to the Centers for Medicare and Medicaid Services (CMS) Funding Opportunity Number: CMS-1G1-14-001.

Meridian has a history of a strong relationship with the Iowa Medicaid Enterprise (IME) and is supportive of the work being proposed in this proposal. Like the IME, Meridian is committed to improving population health, transforming healthcare delivery systems, and decreasing per capita total health care spending in Iowa.

The proposal that has been developed, and the strategies that will be tested as part of this work, have tremendous potential to achieve these goals. Additionally, the strategies build upon the strong work already being done in Iowa, and maximize and leverage the transformative work already underway, including development of a Medicaid Accountable Care Organization contracting methodology that aligns payment and quality measures across payers, promotes transparency and data sharing to improve outcomes, better engages Iowans in their healthcare, and lowers the cost of health care for all Iowans. A Model Test Grant award would allow Iowa to make incredible progress in its efforts to transform the health care system, test new and innovative ideas, and improve the health of Iowans while reducing costs.

Meridian is committed to supporting the implementation of this initiative. Specifically, Meridian will contribute to the SIM process by actively engaging in the work outlined in the SHIP and the proposal. I understand that I may be asked to participate in an in person or video conference meeting with CMS as part of the proposal process

We have full confidence that the Iowa Medicaid Enterprise, along with its partners, will meet the goals of its proposal. For any questions, please do not hesitate to contact me at 515-802-3503 or Andrea.McGuire@mhplan.com.

Sincerely,

Dr. Andrea McGuire, MD, MBA
President & Chief Operating Officer
Meridian Health Plan of Iowa

July 9, 2014

Leah B Nash
Centers for Medicare & Medicaid Services
Center for Medicare & Medicaid Innovation

Re: Iowa's Response to State Innovation Models (SIM): Round Two of Funding for Design and Test Assistance
(Funding Opportunity Number: CMS-1G1-14-001)

Dear Ms. Nash

On behalf of Magellan Behavioral Care of Iowa, I am pleased to write this letter in support of Iowa's Model Test Grant Proposal, in response to the Centers for Medicare and Medicaid Services (CMS) Funding Opportunity Number: CMS-1G1-14-001.

Magellan has a history of a strong relationship with the Iowa Medicaid Enterprise (IME) and is supportive of the work being proposed in this proposal. Like the IME, Magellan is committed to improving population health, transforming healthcare delivery systems, and decreasing per capita total health care spending in Iowa. Our Integrated Health Home collaboration with IME under Section 2703 of the Affordable Care Act is a good example of our capacity to partner with IME on such programs.

The strategies in the proposal build upon the strong work already being done in Iowa, and maximize and leverage the transformative work already underway, including development of a Medicaid Accountable Care Organization contracting methodology that aligns payment and quality measures across payers, promotes transparency and data sharing to improve outcomes, better engages Iowans in their healthcare, and lowers the cost of health care for all Iowans. A Model Test Grant award would allow Iowa to make incredible progress in its efforts to transform the health care system, test new and innovative ideas, and improve the health of Iowans while reducing costs.

Magellan is committed to supporting the implementation of this initiative. Specifically, Magellan will contribute to the SIM process by helping to integrate behavioral health outcomes in to the ACO and structuring incentive payments accordingly. I understand that I may be asked to participate in an in person or video conference meeting with CMS as part of the proposal process.

We have full confidence that the Iowa Medicaid Enterprise, along with its partners, will meet the goals of its proposal. For any questions, please do not hesitate to contact me at mmontanaro@magellanhealth.com

Sincerely,



Maria Montanaro
CEO/Magellan Behavioral Care of Iowa

July 3, 2014



www.ibconline.org

Leah B Nash
Centers for Medicare & Medicaid Services
Center for Medicare & Medicaid Innovation

Re: Iowa's Response to State Innovation Models (SIM): Round Two of Funding for Design and Test Assistance (Funding Opportunity Number: CMS-1G1-14-001)

Dear Ms. Nash,

On behalf of the Iowa Healthcare Collaborative (IHC), I am pleased to write this letter in support of Iowa's Model Test Grant Proposal, in response to the Centers for Medicare and Medicaid Services (CMS) Funding Opportunity Number: CMS-1G1-14-001.

IHC has a history of a strong relationship with the Iowa Medicaid Enterprise (IME) and is supportive of the work being proposed in this proposal. As the Hospital Engagement Network (HEN) for the state, IHC is committed to improving population health, transforming healthcare delivery systems, and decreasing per capita total health care spending in Iowa.

The proposal that has been developed, and the strategies that will be tested as part of this work, have tremendous potential to achieve these goals. Additionally, the strategies build upon the strong work already being done in Iowa, and maximize and leverage the transformative work already underway, including development of a Medicaid Accountable Care Organization contracting methodology that aligns payment and quality measures across payers, promotes transparency and data sharing to improve outcomes, better engages Iowans in their healthcare, and lowers the cost of health care for all Iowans. A Model Test Grant award would allow Iowa to make incredible progress in its efforts to transform the health care system, test new and innovative ideas, and improve the health of Iowans while reducing costs.

IHC is committed to supporting the implementation of this initiative. IHC will contribute to the SIM process by expanding on our HEN learning and engagement beyond the acute care community to the entire spectrum of care offered through ACOs. We will focus on aligning community resources toward a common vision and develop local champions to serve as faculty of best practice. We will also work to align measurement strategies with national conventions to track community progress and reduce reporting burden. Onsite technical assistance will be offered to create enhanced processes of care to better serve vulnerable or high needs populations. We will work to develop learning communities and practice

transformation teams that create pathways for integrating the ACOs with community-based services, and promote the use of social determinants of health (SDH) data for development of community health interventions. I understand that I may be asked to participate in an in-person or video conference meeting with CMS as part of the proposal process.

We have full confidence that the Iowa Medicaid Enterprise, along with its partners, will meet the goals of its proposal. For any questions, please do not hesitate to contact me at 515-283-9347 or evanst@ihconline.org.

Sincerely,

A handwritten signature in black ink that reads "Thomas C. Evans". The signature is written in a cursive style with a large, prominent "T" and "E".

Thomas C. Evans, MD
President/CEO, Iowa Healthcare Collaborative



PUBLIC POLICY CENTER

209 South Quadrangle
Iowa City, Iowa 52242-1192
319-335-6800 Fax 319-335-6801
<http://ppc.uiowa.edu>

July 10, 2014

Leah B Nash
Centers for Medicare & Medicaid Services
Center for Medicare & Medicaid Innovation

Re: Iowa's Response to State Innovation Models (SIM): Round Two of Funding for Design and Test Assistance (Funding Opportunity Number: CMS-1G1-14-001)

Dear Ms. Nash:

On behalf of the Public Policy Center at The University of Iowa, I am pleased to write this letter in support of Iowa's Model Test Grant Proposal, in response to the Centers for Medicare and Medicaid Services (CMS) Funding Opportunity Number: CMS-1G1-14-001.

The Public Policy Center has a history of a strong relationship with the Iowa Medicaid Enterprise (IME) and is supportive of the work being proposed in this proposal. Like the IME, the Public Policy Center is committed to studying programs designed to improve population health, transform healthcare delivery systems, and decrease per capita total health care spending in Iowa.

The Public Policy Center is committed to supporting this initiative by conducting the state-level evaluation and providing data to the CMS evaluation team. The Public Policy Center has a long history of working with IME to evaluate its waiver and other programs. We are very familiar with the nuances of the Medicaid programs and have a Human Subjects protected data repository that houses claims, encounter and enrollment files going back to 2000. We also have extensive experience conducting survey and focus groups with Medicaid enrollees and providers.

We understand that we may be asked to participate in an in person or video conference meeting with CMS as part of the proposal process

For any questions, please do not hesitate to contact me at 319-335-6813 or peter-damiano@uiowa.edu.

Sincerely,

Peter Damiano
Director, Public Policy Center

July 3, 2014

Leah B Nash
Centers for Medicare & Medicaid Services
Center for Medicare & Medicaid Innovation

Re: Iowa's Response to State Innovation Models (SIM): Round Two of Funding for Design and Test Assistance (Funding Opportunity Number: CMS-1G1-14-001)

Dear Ms. Nash:

On behalf of University of Iowa Health Care, which consists of the University of Iowa Hospitals and Clinics, the University of Iowa Carver College of Medicine, and University of Iowa Physicians, I am pleased to write this letter in support of Iowa's Model Test Grant Proposal, in response to the Centers for Medicare and Medicaid Services (CMS) Funding Opportunity Number: CMS-1G1-14-001.

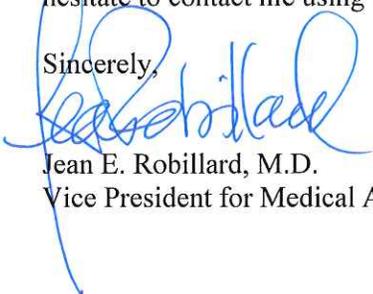
University of Iowa Health Care has a long history of collaboration with the Iowa Medicaid Enterprise (IME) and is supportive of the work described in this proposal. Akin to the IME, University of Iowa Health Care is committed to improving population health, transforming health care delivery systems, and decreasing per capita total health care spending in Iowa.

The proposal that has been developed, and the strategies that will be tested as part of this work, have tremendous potential to achieve Berwick's triple aim. Additionally, the strategies build upon initiatives occurring in Iowa, both maximizing and leveraging the transformative work already underway, including development of a Medicaid Accountable Care Organization contracting methodology that aligns payment and quality measures across payers, promotes transparency and data sharing to improve outcomes, better engages Iowans in their health care, and lowers the cost of health care for all. A Model Test Grant award would allow Iowa to make incredible progress in our efforts to transform the health care system, test new and innovative ideas, and improve the health of Iowans while reducing costs.

University of Iowa Health Care is committed to supporting the implementation of this initiative. Specifically, University of Iowa Health Care will contribute to the SIM process by sharing our expertise in health policy, quality improvement, cost-efficiency, accountable care organization management, and caring for Iowans of all income levels. I understand that I, and/or members of the UI Health Care team, may be asked to participate in an in-person or video conference meeting with CMS as part of the proposal process.

University of Iowa Health Care has complete confidence that the Iowa Medicaid Enterprise, along with its partners, will meet the goals of this proposal. If I can be helpful in answering any questions, please do not hesitate to contact me using the information above.

Sincerely,



Jean E. Robillard, M.D.
Vice President for Medical Affairs



1001 Grand Avenue
West Des Moines, IA 50265-3502
515 223-1401 • 800 747-3070
Fax 515 223-0590
www.iowamedical.org

July 3, 2014

IMS Board of Directors

President

Jeff Maire, DO
Des Moines

President-elect

K. John Hartman, MD
Davenport

Chair

Paul Mulhausen, MD
West Des Moines

Secretary/Treasurer

Joyce Vista-Wayne, MD
Des Moines

Past President

Victoria Sharp, MD
Iowa City

Directors

Marygrace Elson, MD
Iowa City

Janice Kirsch, MD
Mason City

Michael McCoy, MD
West Burlington

Harold Miller, MD
Davenport

Curtis Page, MD
Dubuque

Brian Privett, MD
Cedar Rapids

Michael Romano, MD
Council Bluffs

Douglas Steenblock, MD
Marshalltown

Mark Tannenbaum, MD
West Des Moines

Scott Truhlar, MD
Coralville

William John Yost, MD
Des Moines

John Heineman, MD, R2
Iowa City
(Resident Director)

Helen Myers, M4
Iowa City
(Medical Student Director)

Executive Vice President

Clare M. Kelly
Des Moines

Leah B. Nash
Centers for Medicare & Medicaid Services
Center for Medicare & Medicaid Innovation

Re: Iowa’s Response to State Innovation Models (SIM): Round Two of Funding for Design and Test Assistance (Funding Opportunity Number: CMS-1G1-14-001)

Dear Ms. Nash:

On behalf of the nearly 6,800 physician and medical student members of the Iowa Medical Society (IMS), I am pleased to write this letter in support of Iowa’s Model Test Grant Proposal in response to CMS Funding Opportunity Number: CMS-1G1-14-001.

The core purpose of the Iowa Medical Society is to assure the highest quality health care in Iowa through our role as physician and patient advocate. A key component of this work is our organization’s close working relationship with the Iowa Medicaid Enterprise (IME). IMS supports the work proposed as a part of Iowa’s Model Test Grant Proposal. Like the IME, IMS is committed to improving population health, transforming healthcare delivery systems, and decreasing the per capita total health care spending in Iowa.

The proposal that has been developed, and the strategies that will be tested as part of this work, have tremendous potential to achieve these goals. The strategies build upon the strong work already being done in Iowa, and maximize the transformative work currently underway, including development of a Medicaid Accountable Care Organization contracting methodology that aligns payment and quality measures across payers, promotes transparency and data sharing as appropriate to improve outcomes, better engages Iowans in their healthcare, and lowers the cost of health care for all Iowans. A Model Test Grant award would allow Iowa to make incredible progress in its efforts to transform the health care system, test new and innovative ideas, and improve the health of Iowans while reducing costs.

The Iowa Medical Society is committed to supporting the implementation of this initiative. Iowa physicians have a unique, first-hand view of our state’s health care system, and have been closely involved in many of the delivery and payment reform efforts already underway in our state. IMS stands ready to utilize this experience as we work with IME to develop the strategies necessary to implement Iowa’s Model Test Grant Proposal in a functional manner, with minimal

Leah B Nash
July 3, 2014
Page 2

additional burden on patients and providers. I understand that IMS may be asked to participate in an in-person or video conference meeting with CMS as part of the proposal process

We are confident that the Iowa Medicaid Enterprise, along with its partners, will meet the goals of its proposal. For any questions, please contact Dennis Tibben with IMS at (515) 223-1401 or dtibben@iowamedical.org.

Sincerely,

A handwritten signature in black ink, appearing to read "Jeff Maire". The signature is written in a cursive style with a large, stylized initial "J".

Jeff Maire, DO, FACS, FACOS
President



July 3, 2014

Leah B. Nash
Centers for Medicare & Medicaid Services
Center for Medicare & Medicaid Innovation

Re: Iowa's Response to State Innovation Models (SIM): Round Two of Funding for Design and Test Assistance (Funding Opportunity Number: CMS-1G1-14-001)

Dear Ms. Nash,

On behalf of Child Health Specialty Clinics in the Division of Child and Community Health at the University of Iowa, I am pleased to write this letter in support of Iowa's Model Test Grant Proposal, in response to the Centers for Medicare and Medicaid Services (CMS) Funding Opportunity Number: CMS-1G1-14-001.

Child Health Specialty Clinics (CHSC) has a history of a strong relationship with the Iowa Medicaid Enterprise (IME) and is supportive of the work being proposed in this proposal. CHSC administers the Maternal and Child Health Title V block grant for Children with Special Health Care Needs (CSHCN) and for over 60 years has successfully provided gap filling services to Iowa's children with chronic physical, developmental, behavioral, and emotional health needs. These services include delivering clinical consultation, family support, and care coordination through 13 locally based Regional Centers to improve the system of care for CSHCN and their families. We are committed to improving population health, transforming healthcare delivery systems, and addressing per capita total health care expense.

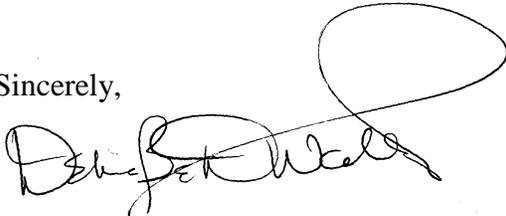
The proposal that has been developed, and the strategies that will be tested as part of this work, have tremendous potential to achieve these goals, especially for our vulnerable population of children with complex medical conditions and special needs. Additionally, the strategies build upon the strong work already being done in Iowa around access to well-coordinated, family centered care delivered through medical/health homes. This aligns with the state and national priority of enhanced systems integration for CSHCN, including development of appropriate payment methodologies. A Model Test Grant award would allow Iowa to make incredible progress in its efforts to transform the health care system, test new and innovative ideas, and improve the health to all Iowans, inclusive of children, while reducing costs.

Our Division commits to supporting this project through continuous collaboration by participating in the development of appropriate pediatric quality measures; coordinating existing Title V CSHCN activities to align with population health objectives of the Model

Test Proposal; and ensuring that children's health and well-being will be addressed in a holistic manner, including health, education and other socio-economic factors that are essential for improving long-term health and reducing healthcare costs. I understand that I may be asked to participate in an in person or video conference meeting with CMS as part of the proposal process.

We have full confidence that the Iowa Medicaid Enterprise, along with its partners, will meet the goals of its proposal. For any questions, please do not hesitate to contact me at 319-356-1117 or debra-waldron@uiowa.edu.

Sincerely,

A handwritten signature in black ink, appearing to read "Debra B. Waldron". The signature is fluid and cursive, with a large loop at the end.

Debra B. Waldron, MD, MPH, FAAP
Vice Chair, Child Health Policy and Statewide Services
Professor, Stead Family Department of Pediatrics
University of Iowa Children's Hospital

Director, Division of Child and Community Health
Child Health Specialty Clinics/
Center for Child Health Improvement and Innovation



June 30th, 2014

Leah B. Nash
Centers for Medicare & Medicaid Services
Center for Medicare & Medicaid Innovation

Re: Iowa's Response to State Innovation Models (SIM): Round Two of Funding for Design and Test Assistance (Funding Opportunity Number: CMS-1G1-14-001)

Dear Ms. Nash:

On behalf of the Iowa Primary Care Association (Iowa PCA), I am pleased to write this letter in support of Iowa's Model Test Grant Proposal, in response to the Centers for Medicare and Medicaid Services (CMS) Funding Opportunity Number: CMS-1G1-14-001.

The Iowa PCA has a long history of a strong relationship with the Iowa Medicaid Enterprise (IME) and is supportive of the work being proposed in this proposal. Like the IME, the Iowa PCA is committed to improving population health, transforming health care delivery systems, and decreasing per capita total health care spending in Iowa.

The proposal that has been developed, and the strategies that will be tested as part of this work, have tremendous potential to achieve these goals. Additionally, the strategies build upon the strong work already being done in Iowa, and maximize and leverage the transformative work already underway, including development of a Medicaid Accountable Care Organization contracting methodology that aligns payment and quality measures across payers, promotes transparency and data sharing to improve outcomes, better engages Iowans in their health care, and lowers the cost of health care for all Iowans. A Model Test Grant award would allow Iowa to make incredible progress in its efforts to transform the health care system, test new and innovative ideas, and improve the health of Iowans while reducing costs.

The Iowa PCA is committed to supporting the implementation of this initiative. Specifically, the Iowa PCA will contribute to the SIM process by working with IME to: 1) identify ways in which to fortify and better integrate safety net providers through delivery system changes, 2) gain a better understanding of cost-based reimbursement and how it fits into new payment methodologies, and 3) work to expand the community care coordination initiative already underway in the state. I understand that I may be asked to participate in an in person or video conference meeting with CMS as part of the proposal process

We have full confidence that the Iowa Medicaid Enterprise, along with its partners, will meet the goals of its proposal. For any questions, please do not hesitate to contact me at 515-244-9610 or tboesen@iowapca.org.

Sincerely,

A handwritten signature in black ink, appearing to read "T. Boesen, Jr.", is written over a white background.

Theodore J. Boesen, Jr.
CEO
Iowa Primary Care Association



June 19, 2014

Leah B Nash
Centers for Medicare & Medicaid Services
Center for Medicare & Medicaid Innovation

Re: Iowa's Response to State Innovation Models (SIM): Round Two of Funding for Design and Test Assistance (Funding Opportunity Number: CMS-1G1-14-001)

Dear Ms. Nash:

On behalf of Eyerly Ball Community Mental Health Services, I am pleased to write this letter in support of Iowa's Model Test Grant Proposal, in response to the Centers for Medicare and Medicaid Services (CMS) Funding Opportunity Number: CMS-1G1-14-001.

Eyerly Ball has a history of a strong relationship with the Iowa Medicaid Enterprise (IME) and is supportive of the work being proposed in this proposal. Like the IME, Eyerly Ball is committed to improving population health, transforming healthcare delivery systems, and decreasing per capita total health care spending in Iowa.

The proposal that has been developed, and the strategies tested as a part of this work, have tremendous potential to achieve these goals. Additionally, the strategies build upon the strong work already being done in Iowa, and maximize and leverage the work already underway, including development of a Medicaid Accountable Care Organization. This development will include contracting methodology that aligns payment and quality measures across payers, promotes transparency and data sharing to improve outcomes, better engages Iowans in their healthcare, and lowers the cost of health care for all Iowans. A Model Test Grant award will allow Iowa to make incredible progress in its efforts to transform the health care system, test new and innovative ideas, and improve the health of Iowans while reducing costs.

Eyerly Ball is committed to supporting the implementation of this initiative. Specifically, Eyerly Ball will contribute to the SIM process by contributing our time and staff to develop the necessary structures to assure the ACO is effective and efficient with the population we serve which is SMI population. I understand that I may be asked to participate in meetings with CMS as part of the proposal process.

We have full confidence that the Iowa Medicaid Enterprise, along with its partners, will meet the goals of its proposal. For any questions, please do not hesitate to contact me 515-235-8849 or earlk@eyerlyball.org .

Sincerely,

S/Earl P. Kelly
CEO
Eyerly Ball Community Mental Health Services



July 3, 2014

Leah B Nash
Centers for Medicare & Medicaid Services
Center for Medicare & Medicaid Innovation

Re: Iowa's Response to State Innovation Models (SIM): Round Two of Funding for Design and Test Assistance
(Funding Opportunity Number: CMS-1G1-14-001)

Dear Ms. Nash:

On behalf of the State Hygienic Laboratory (SHL) established under the auspices of the University of Iowa in 1904 and statutorily charged with the responsibility to provide scientific support to all agencies of state and local government I am pleased to write this letter in support of Iowa's Model Test Grant Proposal in response to (CMS) Funding Opportunity Number: CMS-1G1-14-001.

Over the last 110 years the SHL's charter has expanded to include federal agencies, private organizations and any individual who is concerned about health or the environment. Our resources come from general fund appropriations as well as grants, contracts and re-imbursements from Iowa's public and private payers. The passage of the Affordable Care Act introduces new considerations in how we will continue to provide public health disease surveillance, analysis of infectious and communicable disease, newborn and maternal screening and the development of new understandings of the association between chronic conditions and environmental exposures through genomics. Iowa's development of its State Innovation Model (SIM) program appreciates the necessity of a wide array of public and private organizations in the achievement of a vision that Iowa will be the healthiest state in the nation.

It also has been my honor to have chaired a Phase One SIM workgroup addressing "member engagement". From this experience I am confident that the leadership of Iowa's SIM project is inclusive with the goal of optimal member engagement in personal health care improvement. Aligning these factors is critical to improving health outcomes and reducing long term costs in the health system, all purposes of the national SIM effort. The award of a phase two grant to Iowa would enable the further development of the innovative strategies for the alignment of comprehensive services through accountable care models thereby further enabling an emerging patient centered care system of medical and health homes. I would look forward to further contributions by the Laboratory and myself to further this vision. For any questions, please do not hesitate to contact me at 319/335-4259 or chris-atchison@uiowa.edu.

Sincerely,

Christopher G. Atchison, Director, Associate Dean and Clinical Professor
The State Hygienic Laboratory at the University of Iowa

June 30, 2014



Ms. Leah B Nash
Centers for Medicare & Medicaid Services
Center for Medicare & Medicaid Innovation

Re: Iowa's Response to State Innovation Models (SIM): Round Two of Funding for Design and Test Assistance (Funding Opportunity Number: CMS-1G1-14-001)

Dear Ms. Nash:

On behalf of Broadlawns Medical Center I am pleased to write this letter in support of Iowa's Model Test Grant Proposal, in response to the Centers for Medicare and Medicaid Services (CMS) Funding Opportunity Number: CMS-1G1-14-001.

Broadlawns Medical Center has a history of a strong relationship with the Iowa Medicaid Enterprise (IME) and is supportive of the work being proposed in this proposal. Like the IME, Broadlawns is committed to improving population health, transforming healthcare delivery systems, and decreasing per capita total health care spending in Iowa.

The proposal that has been developed, and the strategies that will be tested as part of this work, have tremendous potential to achieve these goals. Additionally, the strategies build upon the strong work already being done in Iowa, and maximize and leverage the transformative work already underway, including development of a Medicaid Accountable Care Organization contracting methodology that aligns payment and quality measures across payers, promotes transparency and data sharing to improve outcomes, better engages Iowans in their healthcare, and lowers the cost of health care for all Iowans. A Model Test Grant award would allow Iowa to make incredible progress in its efforts to transform the health care system, test new and innovative ideas, and improve the health of Iowans while reducing costs.

Broadlawns is committed to supporting the implementation of this initiative. Specifically, Broadlawns will contribute to the SIM process as one of the three Medicaid ACO's, Broadlawns believes that our quality and costs are an example of how we can deliver high quality medical care to the citizens of Iowa. I understand that I may be asked to participate in an in person or video conference meeting with CMS as part of the proposal process

We have full confidence that the Iowa Medicaid Enterprise, along with its partners, will meet the goals of its proposal. For any questions, please do not hesitate to contact me at 515-282-2410 or jjenner@broadlawns.org.

Sincerely,

A handwritten signature in black ink, appearing to read "Jody Jenner", is written over the word "Sincerely,".

Jody Jenner
President/CEO



Child & Family POLICY CENTER

July 7, 2014

Leah B. Nash

Center for Medicare and Medicaid Services

Center for Medicare and Medicaid Innovation

Re: Iowa's Response to State Innovation Models (SIM): Round Two of Funding for Design and Test Assistance
(Funding Opportunity Number: CMS-1G1-14-001)

Dear Ms. Nash:

On behalf of the Child and Family Policy Center, I am pleased to write this letter of support for the Iowa grant proposal being submitted for Design and Test Assistance under the State Innovation Models. At the outset, CFPC joined with other child health experts and organizations to encourage Iowa Medicaid Enterprise to include children as a focal area within its SIM planning process (letter attached). Iowa Medicaid Enterprise was very receptive to and proactive about this request and designed the planning process to include these and other child health representatives.

As a result, work during the planning period identified three specific populations of children which deserved specific attention in the development of contracting strategies, innovative practice development, and metrics establishment: (1) medically fragile children with complex medical treatments; (2) socially and behaviorally challenging children with substantial current systems involvement; and (3) young children (0-5) with high environmental risk for early childhood adversity, toxic stress, and adverse life trajectories leading to long-term health care and social costs.

CFPC is particularly excited about the last of these three populations and the opportunity for Iowa to be a national leader in innovations to improve health trajectories for young children. While not drivers of current health costs, affecting the health trajectory in the first years of life has the potential for some of the greatest long-term returns on investment and future health costs.

As outlined in our work with the University of Iowa Child Health Specialty Clinics and Iowa Medicaid Enterprise in providing this framework, within the SIM framework, CFPC believes that focused work in this area has the potential to produce highest-level results across the triple aim:

Population 3 – Young Children (0-5) with High Environmental Risk for Early Childhood Adversity/Toxic Stress

The first five years of life, and particularly the first two, are ones of very rapid growth and the development of personal identity that affects life course development and health. The research on early childhood adversity (including adverse childhood experiences ACEs), toxic stress, risk and protective factors, and epigenetics all point to the impact social as well as bio-medical determinants of health have on lifelong health and lifestyles and chronic health conditions which are current cost drivers in health.

Research suggests that 10 to 15 percent of young children (six months to five years) already are experiencing some developmental delays or behavioral disabilities, and at least 20 to 30 percent are living in families under substantial stress with strong likelihood of compromising healthy child development. For the 0 to 5 population, this translates to 20,000 to 40,000 young children currently in Medicaid. Addressing stress and social determinants of health involves the primary health practitioner but extends well beyond the practitioner's own scope of practice.

Metrics

Environmental screens around social determinants of health and family stress factors
Developmental surveillance and screening for early identification of developmental concerns
Referrals and follow-up to appropriate community services
Measures of protective factors in families and family stability and nurturing

Contracting

Pediatric accountable care organizations with long-term horizons for improved health
Expectations within all contacts serving young children for completing developmental surveillance and screening and identification of and responses to social determinants through a protective factor approach
Time horizons for addressing children at high social determinant risk and measuring impacts over multiple years
Imputation of long-term cost impacts and savings as well as identification of cost offsets
Use of shared savings from other populations served for investing in young children

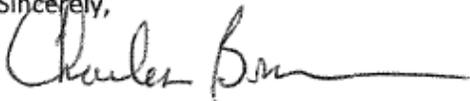
Testing New Approaches

Strengthening links between primary care and home visiting and other family support programs
Support for patient self-help and mutual assistance and peer network models for addressing social determinants, particularly around common family affinities
[Meeting the Triple Aim for Children within the SIM/SHIP Framework – 2014]

While much attention is being given to the immediate cost drivers in our health systems, we value the commitment within the SIM grant to also take a longer range perspective. CFPC looks forward to further contributing to and supporting the work of Iowa Medicaid Enterprise in the Design and Test Assistance phase of the Iowa SIM work.

Respectfully submitted,

Sincerely,



Charles Bruner, PhD
Executive Director
Child and Family Policy Center

July 1, 2013

Jennifer Vermeer, Iowa Medicaid Enterprise
Iowa Department of Human Services
Des Moines, IA 50309

Dear Ms. Vermeer:

We are excited about your leadership in Iowa to promote effective redesign of Medicaid in the context of overall state health reform and your commitment to addressing the needs of children, in particular. We want to share our rationale for providing explicit attention to children within the SIM planning process.

In 2010, Governor Branstad committed to making Iowa “the healthiest state in the nation,” and we believe this year’s efforts to both expand and redesign Medicaid are key to achieving this goal. The General Assembly enacted legislation calling for broad-based redesign of Iowa’s Medicaid program, with attention to expanding medical homes and care coordination and establishing payment systems to meet the triple aim of improving health quality, improving population health, and reducing per capita health expenditures. Iowa Medicaid Enterprise worked with the Governor to secure a federal State Innovations in Medicaid (SIM) grant to develop new payment and delivery systems which similarly meet this triple aim.

These ambitious actions present Iowa with unprecedented opportunities to transform Iowa’s health system and meet the goal of being the healthiest state in the nation.

Much of the work and attention in health care redesign – in Iowa and around the country – has been upon responding differently to patients who already have significant health conditions and concerns and are high cost users of health services. It is important to focus attention on these individuals and develop both service and payment strategies that can better address their needs while reducing the costs of the services provided to and needed by them. It would be a mistake, however, to limit the focus to these individuals.

If Iowa is to be the healthiest state in the nation, Iowa must produce the healthiest children. Children are not current drivers of health care costs, but their healthy development is key to containing such costs into the future.

As the SIM planning process proceeds, we encourage Iowa Medicaid Enterprise to devote significant attention to designing both service and payment redesign systems that draw upon the research and evidence on improving children’s healthy development. Unlike adults, where many of the needed health interventions to meet the triple aim focus upon health maintenance and better managing conditions so they do not result in high cost treatment episodes, children are growing and developing and interventions must focus upon raising the trajectory of that development, through a life course approach which deals as much with social as bio-medical determinants of health.

While the largest share of the costs in the Iowa Medicaid program currently goes to treating seniors and persons with disabilities and chronic health conditions, half of all Medicaid recipients are children. And, when it comes to the youngest children (those below the age of five), half of all Iowa children are served by Medicaid or *hawk-I*, and an even larger percentage of those children most vulnerable to early childhood adversity and toxic stress are served by Medicaid. While the health cost gains in improving health are not as immediate for children as they are for adults with current high medical needs, the long-term returns and impacts upon both health and health costs are greatest with respect to children, and young children in particular.

Iowa has exemplary programs and strategies upon which to build in developing more effective responses to young child development, but these need to be more fully incorporated into both practice and payment design if their benefits, in terms of child health trajectories and long-term health costs, are to be realized. Largely, these require community models that involve both primary care practitioners and community service systems.

While hospitals, medical institutions, and insurers play dominant roles in redesign efforts to address current health costs related to chronic care populations, they play much smaller roles and have less applicable expertise in child health service and payment redesign.

We are calling for the SIM planning process to direct a share of its focus specifically to improving the healthy development of children, starting with young children (birth to five) – addressing how redesign of the health system will enable primary practitioners to respond effectively to social, as well as bio-medical, determinants of health. This is needed to ensure that goals in the legislation as well as the SIMs grant will be met.

We are willing and eager to share our own expertise and perspective on these issues and to enlist others with expertise in child health for this work. As you proceed with hearings on the SIMs grant, we hope you will establish a process that explicitly focuses upon young children's health and draws upon those who are most key to designing and diffusing innovative and successful efforts to improve child health.

Respectfully submitted,

Christopher Atchison

Director, University of Iowa Hygienic Lab; Associate Dean for Public Health Practice; Professor of Health Management and Policy, University of Iowa

Theodore J. Boesen Jr.

CEO, Iowa Primary Care Association

Charles Bruner, PhD

Executive Director, Child and Family Policy Center

Kathy Legget

Director, Center for Advocacy and Outreach, Blank Children's Hospital

Cheryll A Jones ARNP, CPNP

Director of Policy and Advocacy, Health Services Coordinator, Ottumwa Regional Center CHSC

Suzanne Mineck

President, Mid-Iowa Health Foundation

Jody R Murph MD, MS

Associate Professor of Pediatrics, University of Iowa Children's Hospital

David Stark FACHE

President and COO, Blank Children's Hospital

Debra Waldron, MD

Director and Chief Medical Officer, Child Health Specialty Clinics and Vice-Chair for Child Health Policy and Statewide Services



2055 Kimball Avenue Ste 101
Waterloo, IA 50702-5047
Telephone (319) 272-2525
Facsimile (319) 272-2527
www.FamilyPracticeCenter.org

July 8, 2014

Leah B Nash

Centers for Medicare & Medicaid Services
Center for Medicare & Medicaid Innovation

Re: Iowa's Response to State Innovation Models (SIM): Round
Two of Funding for Design and Test Assistance (Funding Opportunity Number: CMS-1G1-14-001)

Dear Ms. Nash:

On behalf of Northeast Iowa Medical Education Foundation (NEIMEF), I am pleased to write this letter in support of Iowa's Model Test Grant Proposal, in response to the Centers for Medicare and Medicaid Services (CMS) Funding Opportunity Number: CMS-1G1-14-001.

NEIMEF has a history of a strong relationship with the Iowa Medicaid Enterprise (IME) and is supportive of the work being proposed in this proposal. Like the IME, NEIMEF is committed to improving population health, transforming healthcare delivery systems, and decreasing per capita total health care spending in Iowa.

The proposal that has been developed, and the strategies that will be tested as part of this work, have tremendous potential to achieve these goals. Additionally, the strategies build upon the strong work already being done in Iowa, and maximize and leverage the transformative work already underway, including development of a Medicaid Accountable Care Organization contracting methodology that aligns payment and quality measures across payers, promotes transparency and data sharing to improve outcomes, better engages Iowans in their healthcare, and lowers the cost of health care for all Iowans. A Model Test Grant award would allow Iowa to make incredible progress in its efforts to transform the health care system, test new and innovative ideas, and improve the health of Iowans while reducing costs.

NEIMEF is committed to supporting the implementation of this initiative. Specifically, NEIMEF will contribute to the SIM process by contributing quality of care information to Iowa Medicaid as well to teach the family medicine residents about the process of continual improvement and measurement of quality to prepare the future generations of physicians. I understand that I may be asked to participate in an in person or video conference meeting with CMS as part of the proposal process

We have full confidence that the Iowa Medicaid Enterprise, along with its partners, will meet the goals of its proposal. For any questions, please do not hesitate to contact me at 319-272-2525 or aday@neimef.org

Sincerely,

Anthony A. Day, M.D.
Executive and Program Director
Northeast Iowa Medical Education Foundation

AAD:jbc

Primary HealthCare

July 1, 2014

Leah B Nash
Centers for Medicare & Medicaid Services
Center for Medicare & Medicaid Innovation

Re: Iowa's Response to State Innovation Models (SIM): Round Two of Funding for Design and Test Assistance (Funding Opportunity Number: CMS-1G1-14-001)

Dear Ms. Nash:

On behalf of Primary Health Care, Inc., I am pleased to write this letter in support of Iowa's Model Test Grant Proposal, in response to the Centers for Medicare and Medicaid Services (CMS) Funding Opportunity Number: CMS-1G1-14-001.

Primary Health Care has a history of a strong relationship with the Iowa Medicaid Enterprise (IME) and is supportive of the work being proposed in this proposal. We have participated actively in the planning phase. Like the IME, Primary Health Care is committed to improving population health, transforming healthcare delivery systems, and decreasing per capita total health care spending in Iowa.

The proposal that has been developed, and the strategies that will be tested as part of this work, have tremendous potential to achieve these goals. Additionally, the strategies build upon the strong work already being done in Iowa, and maximize and leverage the transformative work already underway, including development of a Medicaid Accountable Care Organization contracting methodology that aligns payment and quality measures across payers, promotes transparency and data sharing to improve outcomes, better engages Iowans in their healthcare, and lowers the cost of health care for all Iowans. A Model Test Grant award would allow Iowa to make incredible progress in its efforts to transform the health care system, test new and innovative ideas, and improve the health of Iowans while reducing costs.

Primary Health Care is committed to supporting the implementation of this initiative. Specifically, Primary Health Care will contribute to the SIM process by continuing to refine our work with the Treo data base, participate in ACO development, and advise IME on such matters as Social Determinants of Health, data collection issues, and change issues at the Primary Care level. I understand that we may be asked to participate in an in person or video conference meeting with CMS as part of the proposal process.

We have full confidence that the Iowa Medicaid Enterprise, along with its partners, will meet the goals of its proposal. For any questions, please do not hesitate to contact me at 515-248-1441 or khuntsman@phcinc.net.

Sincerely,


Kelly Huntsman,
Chief Executive Officer


Bery Engebretsen, MD
Medical Director

9943 Hickman Road • Suite 105 • Urbandale, Iowa 50322-5304 • Phone 515-248-1447 • Fax 515-248-1440

Mission Statement: Primary Health Care, Inc. is a team of caring professionals providing health care and supportive services for people in Central Iowa to improve their quality of life.

iCare



Leah B Nash

Centers for Medicare & Medicaid Services

Center for Medicare & Medicaid Innovation

Re: Iowa's Response to State Innovation Models (SIM): Round Two of Funding for Design and Test Assistance (Funding Opportunity Number: CMS-1G1-14-001)

Dear Leah:

On behalf of Siouxland Medical Education Foundation, I am pleased to write this letter in support of Iowa's Model Test Grant Proposal, in response to the Centers for Medicare and Medicaid Services (CMS) Funding Opportunity Number: CMS-1G1-14-001.

Siouxland Medical Education Foundation has a history of a strong relationship with the Iowa Medicaid Enterprise (IME) and is supportive of the work being proposed in this proposal. Like the IME, Siouxland Medical Education Foundation is committed to improving population health, transforming healthcare delivery systems, and decreasing per capita total health care spending in Iowa.

The proposal that has been developed, and the strategies that will be tested as part of this work, have tremendous potential to achieve these goals. Additionally, the strategies build upon the strong work already being done in Iowa, and maximize and leverage the transformative work already underway, including development of a Medicaid Accountable Care Organization contracting methodology that aligns payment and quality measures across payers, promotes transparency and data sharing to improve outcomes, better engages Iowans in their healthcare, and lowers the cost of health care for all Iowans. A Model Test Grant award would allow Iowa to make incredible progress in its efforts to transform the health care system, test new and innovative ideas, and improve the health of Iowans while reducing costs.

Siouxland Medical Education Foundation is committed to supporting the implementation of this initiative. Specifically, Siouxland Medical Education Foundation will contribute to the SIM process by providing quality of care information and teaching residents about the process of continual improvement and measurement of quality to prepare the future generations of physicians. I understand that I may be asked to participate in an in person or video conference meeting with CMS as part of the proposal process

We have full confidence that the Iowa Medicaid Enterprise, along with its partners, will meet the goals of its proposal. For any questions, please do not hesitate to contact me at 712-294-5000 or s.erickson@slmef.org.

Sincerely,

A handwritten signature in black ink that reads "Susan Erickson". The script is cursive and fluid.

Susan Erickson
Chief Operating Officer
Siouxland Medical Education Foundation

June 22, 2014

Leah B Nash
Centers for Medicare & Medicaid Services
Center for Medicare & Medicaid Innovation

Re: Iowa's Response to State Innovation Models (SIM): Round Two of Funding for Design and Test Assistance (Funding Opportunity Number: CMS-1G1-14-001)

Dear Ms. Nash:

On behalf of Treo Solutions, I am pleased to write this letter in support of Iowa's Model Test Grant Proposal, in response to the Centers for Medicare and Medicaid Services (CMS) Funding Opportunity Number: CMS-1G1-14-001.

Treo Solutions has a history of a strong relationship with the Iowa Medicaid Enterprise (IME) and is supportive of the work described in this proposal. Like the IME, Treo Solutions is committed to improving population health, transforming healthcare delivery systems, and decreasing per capita healthcare spending in Iowa.

The proposal that has been developed, and the strategies that will be tested as part of this work, have tremendous potential to achieve these goals. Additionally, the strategies build upon the strong work already being done in Iowa, and maximize and leverage the transformative work already underway, including development of a Medicaid Accountable Care Organization contracting methodology that aligns payment and quality measures across payers, promotes transparency and data sharing to improve outcomes, better engages Iowans in their healthcare, and lowers the cost of healthcare for all Iowans. A Model Test Grant award would enable Iowa to make significant progress in its efforts to transform the healthcare system, test new and innovative ideas, and improve the health of Iowans while reducing costs.

Treo Solutions supports the implementation of this initiative. Specifically, Treo Solutions will contribute to the SIM process by providing data analytics that support the research, testing and validation of metrics that represent social determinants of health (SDH). Treo will also analyze the impact SDH metrics have on risk adjustment methods that use administrative claims data. I understand that I may be asked to participate in an in person or video conference meeting with CMS as part of the proposal process.

We have full confidence that the Iowa Medicaid Enterprise, along with its partners, will meet the goals of its proposal. For any questions, please do not hesitate to contact me at 518-426-4315 or bpirtle@treosolutions.com.

Sincerely,
Bob Pirtle
Engagement Leader, Treo Solutions

A handwritten signature in black ink that reads 'Bob Pirtle'.

July 1, 2014

Leah B. Nash
Centers for Medicare & Medicaid Services
Center for Medicare & Medicaid Innovation

Re: Iowa's Response to State Innovation Models (SIM): Round Two of Funding for Design and Test Assistance
(Funding Opportunity Number: CMS-1G1-14-001)

Dear Ms. Nash:

On behalf of Noridian Healthcare Solutions (Noridian), I am pleased to write this letter in support of Iowa's Model Test Grant Proposal, in response to the Centers for Medicare and Medicaid Services (CMS) Funding Opportunity Number: CMS-1G1-14-001.

As the Iowa Medicaid Enterprise Core MMIS contractor responsible for claims processing, Noridian has a history of a strong relationship with the Iowa Medicaid Enterprise and is supportive of the work proposed in this proposal. Like the IME, Noridian is committed to improving population health, transforming healthcare delivery systems, and decreasing per capita total healthcare spending in Iowa.

The proposal that has been developed, and the strategies that will be tested as part of this work, have tremendous potential to achieve these goals. Additionally, the strategies build upon the strong work already being done in Iowa, and maximize and leverage the transformative work already underway, including development of a Medicaid Accountable Care Organization contracting methodology that aligns payment and quality measures across payers, promotes transparency and data sharing to improve outcomes, better engages Iowans in their healthcare, and lowers the cost of healthcare for all Iowans. A Model Test Grant award would allow Iowa to make incredible progress in its efforts to transform the healthcare system, test new and innovative ideas, and improve the health of Iowans while reducing costs.

Noridian is committed to supporting the implementation of this initiative. Specifically, we will contribute to the SIM process by working closely with IME on system changes required and by making ourselves available for administrative or care coordination support if requested. I understand that I may be asked to participate in an in person or video conference meeting with CMS as part of the proposal process.

We have full confidence that the Iowa Medicaid Enterprise, along with its partners, will meet the goals of its proposal. For any questions, please do not hesitate to contact me at 701-277-6596 or sandeep.wadhwa@noridian.com.

Sincerely,



Sandeep Wadhwa, MD, MBA, FACP
Chief Medical Officer and Senior Vice President, Care and Delivery Management
Noridian Healthcare Solutions, LLC



(515)223-2900

(800)383-2856

1776 West Lakes Parkway
West Des Moines, Iowa 50266
telligen.com

July 7, 2014

Leah B Nash
Centers for Medicare & Medicaid Services
Center for Medicare & Medicaid Innovation

Re: Iowa's Response to State Innovation Models (SIM): Round Two of Funding for Design and Test Assistance (Funding Opportunity Number: CMS-1G1-14-001)

Dear Ms. Nash,

On behalf of Telligen, I am pleased to write this letter in support of Iowa's Model Test Grant Proposal, in response to the Centers for Medicare and Medicaid Services (CMS) Funding Opportunity Number: CMS-1G1-14-001.

Telligen has a history of a strong relationship with the Iowa Medicaid Enterprise (IME) and is supportive of the work being proposed in this proposal. Like the IME, Telligen is committed to improving population health, transforming healthcare delivery systems, and decreasing per capita total health care spending in Iowa.

The proposal that has been developed, and the strategies that will be tested as part of this work, have tremendous potential to achieve these goals. Additionally, the strategies build upon the strong work already being done in Iowa, and maximize and leverage the transformative work already underway, including development of a Medicaid Accountable Care Organization contracting methodology that aligns payment and quality measures across payers, promotes transparency and data sharing to improve outcomes, better engages Iowans in their healthcare, and lowers the cost of health care for all Iowans. A Model Test Grant award would allow Iowa to make incredible progress in its efforts to transform the health care system, test new and innovative ideas, and improve the health of Iowans while reducing costs.

Telligen is committed to supporting the implementation of this initiative. Specifically, we will contribute to the SIM process by providing project management services, support healthcare transformation as the Iowa Quality Improvement Organization (QIO), and support the adoption of Health Information Technology in Iowa as the HIT Regional Extension Center. I understand that I may be asked to participate in an in person or video conference meeting with CMS as part of the proposal process

We have full confidence that the Iowa Medicaid Enterprise, along with its partners, will meet the goals of its proposal. For any questions, please do not hesitate to contact me at

jchungat@telligen.com.

Sincerely,
Jeff Chungath

A handwritten signature in black ink, appearing to read "Jeff Chungath". The signature is fluid and cursive, with the first name "Jeff" being more prominent and the last name "Chungath" following in a similar style.

Chief Executive Officer
Telligen

