Iowa Department of Human Services
Notice of Public Comment Period for Changes in the Iowa Health and Wellness Plan

The Iowa Health and Wellness Plan, that began on January 1, 2014, is a Medicaid program created to provide comprehensive health care coverage to low-income, uninsured Iowans ages 19 to 64.

The Iowa Health and Wellness Plan is one program that includes two separate coverage options. Eligibility is based on household income.

- *Iowa Wellness Plan*: Covers adults ages 19 to 64 whose income is at or below 100 percent of the Federal Poverty Level. The Iowa Wellness Plan is administered by Iowa Medicaid. Members have access to the statewide Medicaid provider network which means they have access to care from providers and hospitals in their local communities.
- *Marketplace Choice Plan*: Covers adults age 19 to 64 with income from 101 percent through 133 percent of the Federal Poverty Level. The Marketplace Choice Plan allows members to select from participating commercial health care coverage plans available through the Health Insurance Marketplace. Medicaid pays the premiums to the commercial health plan on behalf of the member. Members have access to the network of local health care providers and hospitals served by the commercial insurance plan.

This notice provides details about the Department of Human Services' (DHS) intent to change the eligibility requirements of 1) the Iowa Wellness Plan to allow coverage for persons who have income up to and including 133 percent of the Federal Poverty Level (FPL) and 2) the Marketplace Choice Plan to eliminate the requirement of mandatory enrollment based on persons having income from 101 to 133 percent FPL. This serves as the **30-day public comment period, which closes December 19, 2014, at 4:30 pm.**

When the Iowa Health and Wellness Plan begin on January 1, 2014, members eligible for the Marketplace Choice Plan had a choice of two commercial health care plans: CoOportunity Health and Coventry Health Care of Iowa. CoOportunity Health recently made the business decision to withdraw from participation in this plan and will cease providing services to members after November 30, 2014. DHS has arranged for all members enrolled with CoOportunity to receive coverage through the Iowa Wellness Plan beginning December 1, 2014. Members will not have to do anything; DHS will automatically enroll members into the plan. In the Iowa Wellness Plan, members will receive consistent, quality coverage and will have a choice of receiving services from any Medicaid provider.

The state is working with the Centers for Medicare and Medicaid Services (CMS) to explore ongoing options for all members eligible for coverage in the Marketplace Choice Plan. The state is committed to making sure coverage options include comprehensive benefits and encourages members to become healthier.

This serves as DHS's notice of intent to 1) amend the Iowa Wellness Plan State Plan Amendment to allow persons who have income up to and including 133 percent of the Federal Poverty Level to receive services in the plan and 2) amend the Marketplace Choice Plan State Plan Amendment to eliminate the requirement of mandatory enrollment based on persons having income from 101 to 133 percent FPL. As required by 42 CFR § 440.386, DHS also provides notice that this change will not impede EPSDT eligible individuals from having access to the full EPSDT benefit available at 42 CFR § 440.345.

Information about the Iowa Health and Wellness Plan is available at: http://dhs.iowa.gov/ime/about/iowa-health-and-wellness-plan/ihawp-fed-docs.

Written comments may be addressed to Maggie Reilly, Department of Human Services, Iowa Medicaid Enterprise, 100 Army Post Road, Des Moines, IA 50315. Comments may also be sent to the attention of: **DHS, Iowa Health and Wellness Plan** at DHSIMEHealthandWellnesPlan@dhs.state.ia.us through December 19, 2014. The public, by contacting Maggie Reilly at the above address, may review comments received.

Submitted by:
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