



Full Council Committee Minutes November 25, 2015

COMMITTEE MEMBERS

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DEPARTMENT OF HUMAN SERVICES

Julie Lovelady Bob Schlueter
Jennifer Steenblock Liz Matney
Debbie Johnson Maddisen Kies
Lindsay Buechel Marni Bussell

IA Health Link Member Enrollment Update:

Lindsay Buechel provided a comprehensive update on the IA Health Link activities including member enrollment mailings to all Medicaid populations indicating completion of all enrollment mailings by the end of November. She reviews details involving the member choice timeline and the choice counseling process and provides a review of all the member and provider/stakeholder outreach activities that have either been completed or are still currently in progress. She provides samples and links to relevant sites and documents used for these outreach efforts. She engages various members of the council in a Q&A covering information involving MCO and provider network information, use of existing eligibility systems, informational letters that will be sent out covering logistics and PAs, member support services, the enrollment process, and other member-specific situations encountered thus far by council members.

Provider Rate Discussion:

Liz Matney discussed more detailed information regarding provider rates that covered areas such as managed care plans, hospital rebased rates, EPSDT including palliative care. She also discussed Iowa Medicaid fee schedule plans, nursing facility rates, and HCBS providers and the “weighted average” reimbursement rates given to the four MCOs. Questions around oversight of case management was discussed (both in-house and contracted case management).

Provider Contracting:

Sean Bagniewski discussed the recently released application process that allows simultaneous provider enrollment with Iowa Medicaid and the MCOs through use of a jointly developed “universal” application (developed with input from MCOs). He also discussed issues involving credentialing with MCOs to allow greater access to members versus in-network providers process. Sean also engages the council members in a Q&A involving logistics of providers signing up with MCOs. The Q&A went into more detailed points involving the universal application and how MCO requests were incorporated into the universal application process. Discussion also included questions regarding Magellan providers enrolling with Iowa Medicaid prior to contracting with an MCO. Sean reiterated the current priority of IME provider services on mental health (Magellan) providers.

MCO Presentations:

All four MCO representatives introduced their companies and gave an overview of the “current state of affairs” within each MCO with regard to the transition. All MCO reps gave assurances of how hard they are working to make sure that everything is in place for the Jan 1 date. They all provided reassurances on staffing to meet needs and provided direct contact information to address ongoing issues.

- Cheryl Harding: AmeriHealth Caritas –
- Amerigroup: Kyle Carlson:
- United: Kim Foltz:
- WellCare: Laurile Rubel:

MCOs addressed the specific questions involving credentialing which were asked earlier when Sean Bagniewski was presenting. All four MCOs gave their take on credentialing. Suggestion was made on creating a centralized FAQ with MCO-specific questions. Discussion also shifted to Prior Authorizations (PA) which was address directly by WellCare and Amerihealth reps. Eligibility verification was also discussed. Discussion also shifted to training, billing, and IT requirements where IME revealed plans for MCO training for providers that is being scheduled for December where all providers can come for MCO training. Dates were given for all four training sessions. WellCare reiterates that they will have nine offices statewide to service members and providers. Discussion pivoted also to case management and the plans to bring all case management “in-house” within the MCOs or a hybrid combination of in-house and contracted case management services.

Q&A

The questions revolved around a lot of detailed issues from WebX training webinars to ACOs and MCOs working with ACOs. Discussion also reverted to the still outstanding CMS approval of the waiver and contingency plans- particularly as it relates to Magellan shutting down for mental health coverage.

Adjourned at 11:20 AM