



Mason City IA Health Link Public Comment Meeting

Tuesday, March 22, 2016

Time: 3 p.m. – 5 p.m.

Historic Park Inn, Ballroom

15 W. State Street

Mason City, IA

Meeting Comments and Questions

IME/DHS Staff	MCO Representatives	MAAC Representatives
Debbie Johnson – present	Amerigroup Iowa, Inc. - present	Cindy Baddeloo - present
Jennifer Steenblock - present	AmeriHealth Caritas Iowa, Inc. - present	
Lindsay Buechel - present	UnitedHealthcare Plan of the River Valley, Inc. - present	
Sean Bagniewski - present		
Allie Timmerman - present		

Comments:

Case Management:

Members and providers expressed concern regarding if members still had a choice in selecting their case managers and how to go about this. Also, persons were unaware of who to contact after April 1, 2016, as case managers had difficulty contacting Managed Care Organizations (MCOs) regarding members before April 1, 2016. Case managers had been told that they were unable to contact MCOs about members until

April 1, 2016, and had experienced difficulty in being credentialed with the MCOs.

Prior Authorizations:

Magellan did not require Prior Authorizations (PAs), so providers are not used to obtaining a PA for every service. Providers stated concern for who to contact to obtain PAs and when to send for PAs.

MCO Enrollment and Provider Networks:

A member stated their son had not yet received his MCO enrollment packet. Members have also received a lot of mail from both the Iowa Medicaid Enterprise (IME) and their MCO, and were unsure of what information was important and what was simply informational. An issue that had been raised frequently was a member's MCO provider being out of their MCO's provider network, and whether the member would be charged for services rendered, or if they would be able to see providers that had not signed with any of the MCOs; such as the Mayo Clinic in Rochester.



Additional Comments:

Home- and Community- Based Services (HCBS) waiver members are unsure of how to obtain incontinence and Durable Medical Equipment (DME). Also, Senior Health Insurance Information Program (SHIIP) counselors had not been aware of which MCOs their members were assigned to and had been told by both the IME and MCOs that this information would not be available. Finally, concern was raised in regards to legislative oversight and whether concerns would be addressed moving forward.

Questions:

1. My son has been treated for a rare cancer at the Mayo Clinic in Rochester for the past five years under the Medicaid program. Have any of the MCOs contracted with Mayo? He is scheduled for a visit at Mayo in late April, will this be covered? Are members required to pay the difference when a member goes to an out-of-network provider?
2. Are case managers expected to be contracted within the first 90 days of April 1, 2016, implementation? What is a case manager's case load going to be? When will case managers begin contacting the MCOs? How are nursing facilities and case management going to work? Are case managers from each of the MCOs going to determine the patient's level of care? What is the difference between a case manager and community-based case manager? Will each agency or facility have someone that they can go to for problems, and will that case manager be able to give us that information?
3. How do members receive Durable Medical Equipment (DME) products and supplies? Are prior authorizations going to be required every time a member needs DME products and services? When do I start sending my prior authorizations to the MCOs?
4. How will Medicare/Medicaid crossover claims be processed? Will this be an automatic transfer of information as it is now?
5. Are members required to have both cards when they see their providers? Or, do they just need their MCO card? Are the MCO ID numbers different than the State ID numbers? When will MCO cards be issued?
6. Is DHS still going to be able to maintain the database for patient information? Can we still contact the IME for confirmation of a member's eligibility? When should I contact the IME and when should I contact the MCO?
7. What authority does the Medical Assistance Advisory Council (MAAC) have in this? How do they oversee this program? It is recommendations and they do not have power?