



**IA Health Link Managed Care Program
Stakeholder Toolkit**
September 2015



Dear Iowa Medicaid stakeholders,

The Iowa Department of Human Services (DHS) will be transitioning most Medicaid members to a new managed care program, officially named IA Health Link, as of January 1, 2016. The goals of IA Health Link are to improve the coordination and quality of care that Medicaid members receive, and become a healthier state, while Iowa works towards a balanced, predictable state budget.

This program will be administered by contracted managed care organizations (MCOs) that will provide members with comprehensive health care services, including physical health, behavioral health, and long-term services and support. All members will have six months to two years to remain with or change their current provider(s), depending on the Iowa Medicaid program in which they are currently enrolled. Members may keep their current medical health providers, mental health providers, and case manager until at least June 30, 2016, as long as their provider(s) choose to participate with the MCOs. The IA Health Link program has made sure that long term care or in home and community-based services and support providers will have the chance to be part of the MCOs through the end of December 2017.

Providers should contract with MCOs to continue providing care to Medicaid members. As part of ongoing network contracting, the MCOs will consider the quality of providers within their network. This reflects the priority of the DHS and MCOs to provide members the high quality care they deserve.

We understand that members may have many questions, and we are here to help. We are providing this stakeholder toolkit that includes materials you can use to educate members about the IA Health Link program, as well as information for you to participate in and support communication efforts.

You will notice this toolkit is branded IA Health Link. The IA Health Link brand previously represented the Healthy Behaviors program of the Iowa Health and Wellness Plan in 2014 through 2015, and was designed with the capability to represent future transitions for Medicaid programs, such as this new managed care program. The campaign and its website will work to ensure a seamless transition into the new managed care program.

The enclosed documents have been developed to help you communicate important information to members. Please use these materials in your local outreach efforts.

This toolkit will be continually updated as new information and educational materials are available, visit our website frequently to check for updates.

Thank you for your continued support.

Mikki Stier, MSHA, FACHE
Medicaid Director
Iowa Department of Human Services



IA Health Link Program Overview

Initiative Name

Medicaid Modernization Transition

Implementation Dates

Spring 2015 - January 2016

Project Background

On February 16, 2015, the Iowa Department of Human Services (DHS) released a Request for Proposal (RFP) for Governor Branstad's Iowa High Quality Health Care Initiative also known as Medicaid Modernization. This initiative aims to improve the coordination and quality of care, while providing predictability and sustainability for Iowa taxpayers in Medicaid spending.

Under this initiative, we will enroll the vast majority of Iowa Medicaid members with a managed care organization (MCO). On August 17, 2015, DHS issued a notice of intent to award four MCOs with contracts to administer the program. The MCOs will provide comprehensive health care services, including physical health, behavioral health, and long-term services and supports.

You can learn more about the four MCOs to recently receive a bid award at <http://dhs.iowa.gov/sites/default/files/IAHealthLink-Announcement-NOI.pdf>

The MCOs will begin providing services to members on January 1, 2016. Prior to beginning those services, DHS must prepare and transition the majority of the 560,000 current Medicaid members to the MCOs. In addition to the communications to members during the transition, DHS must also prepare the health care provider community, advocates, community resources, and family members.

Overall Goal

DHS aims to improve the coordination and quality of care while providing predictability and sustainability for Iowa taxpayers in Medicaid spending. To accomplish this goal, DHS has contracted with four MCOs to coordinate care for the vast majority of Medicaid members.

Bidder Awards

On Monday, August 17, 2015, DHS announced the intent to award four bidders. The bidders include:

- Amerigroup Iowa, Inc.
- AmeriHealth Caritas Iowa, Inc.
- UnitedHealthcare of the River Valley, Inc.
- WellCare of Iowa, Inc.



Stakeholder FAQ

Find answers to frequently asked questions from stakeholders.

General Questions

Question: What is Medicaid Modernization?

Medicaid Modernization is the initiative supporting the Iowa High Quality Health Care Initiative announced by Governor Branstad on February 16, 2015. The initiative aims to improve access and care coordination, promote accountability and outcomes and provide a predictable and sustainable Medicaid budget. Through Medicaid Modernization, the Iowa Department of Human Services will contract with two to four managed care organizations for the delivery of health care services for most Medicaid members.

Question: What is the federal approval process and timeline?

The state will work with Centers for Medicare and Medicaid Services (CMS) to obtain the authority to implement this new Medicaid managed care model through a new 1915(b) waiver, and through amendments to other existing 1915(c) waivers and 1115 demonstration waivers. DHS will also work with CMS to be able to reach the January 1, 2016, timeline.

Question: Is stakeholder input required?

The Department is actively seeking input through the RFP process. Stakeholder input is required by CMS as part of the federal approval process and DHS will assure all requirements are met. The Department has all updated formal public notices and information on the Medicaid Modernization website here:

<http://dhs.iowa.gov/ime/about/initiatives/MedicaidModernization>

Oversight Readiness

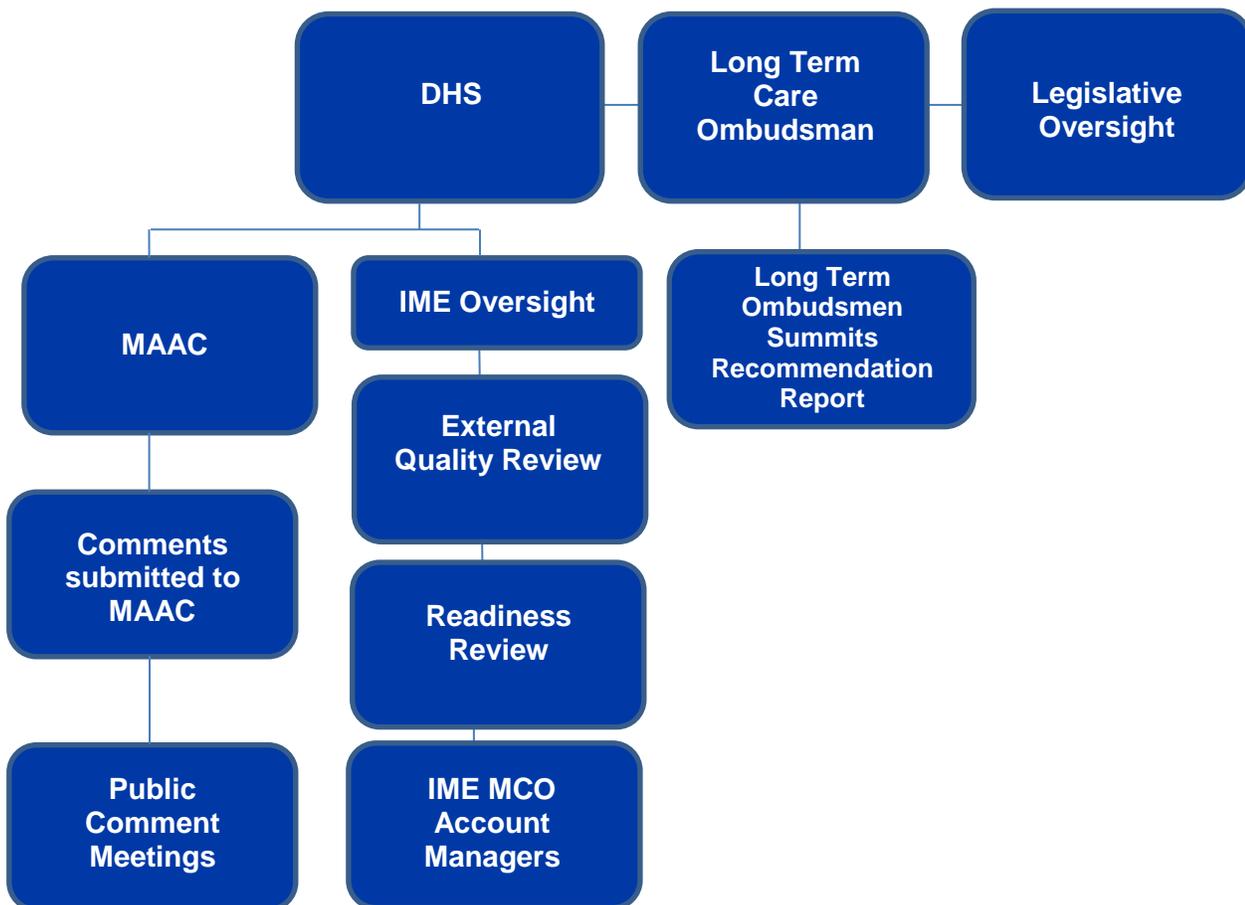
Question: Has there been establishment of Stakeholder Oversight?

Stakeholder Oversight is established through the Medical Assistance Advisory Council (MAAC) and the MAAC Executive Committee. They are used as the primary stakeholder group to receive updates on implementation and make recommendations to DHS. This is outlined in Senate File 505.

Question: What does the public involvement look like in Oversight?

The members and the public can share comments with DHS at monthly meetings held through the state in rural and urban areas. Comments are then summarized and shared with the Medical Assistance Advisory Council (MAAC) who makes formal recommendations to DHS.

Modernization Oversight Visual



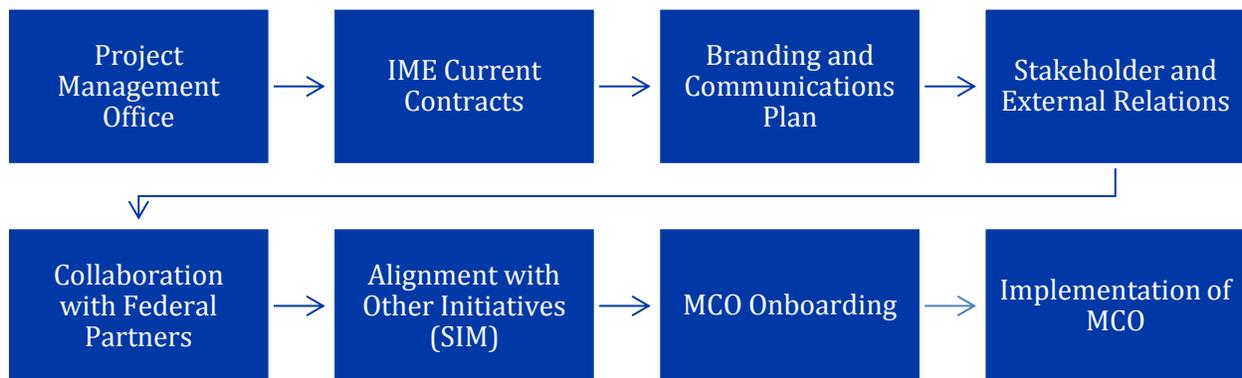
Question: Who is the primary stakeholder group?

Oversight is established through the Medical Assistance Advisory Council (MAAC) and the MAAC Executive Committee. MAAC is used as the primary stakeholder group to receive updates on implementation and make recommendations to DHS.

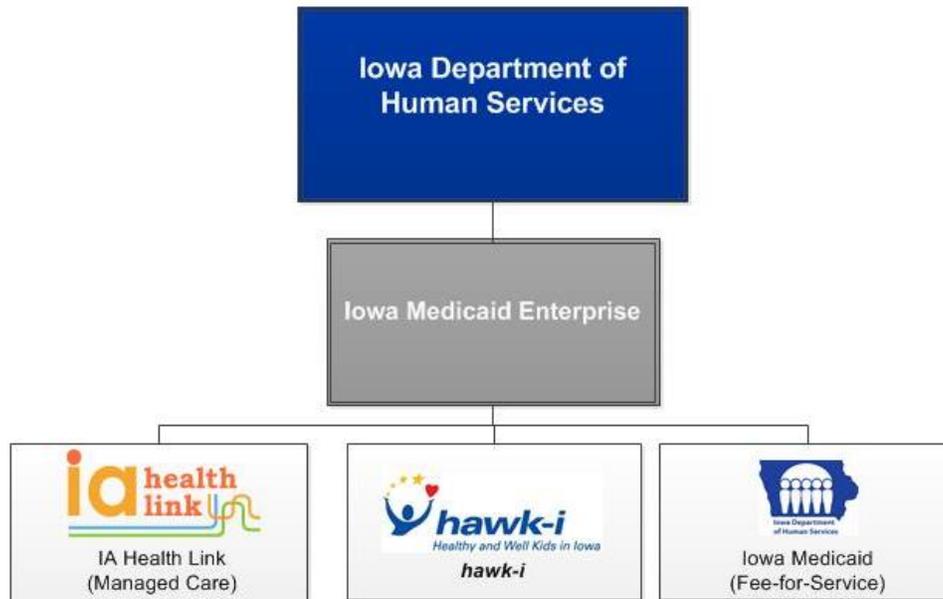
Transitional/Planning Activities

Question: What does Iowa Medicaid's Operational Readiness look like in preparation to implement Medicaid Modernization?

Iowa Medicaid has established Key Areas of Focus in the image below:



Iowa Medicaid Brand Overview Visual



How Can I Help?

Question: My organization is interested in partnering with Iowa Medicaid to help educate members about the transition. What can I do?

The materials in the toolkit serve as a foundation for helping Iowa Medicaid share the message. Use the various documents and sample materials to help spread the message. In the coming months, more materials will be made available and added to this toolkit. You may also contact IMECommunications@dhs.state.ia.us to learn more about how to partner with Iowa Medicaid to help educate members about the upcoming managed care transition.

Question: Will there be opportunities for my organization to learn more about the changes? How do we train our staff and stay up-to date?

Iowa Medicaid will conduct a series of meetings and webinars this fall to help educate stakeholders on the transition process. Look for those dates and details to be added to this toolkit in the coming weeks. Your organization can attend these training sessions to get the information you need. If you're interested in receiving the latest information via email, you can subscribe to the initiative email alerts. Send an email with the subject line "subscribe" along with your name, organization and email address to IMECommunications@dhs.state.ia.us



Question: Where can I learn more about the MCOs?

To learn more about the MCOs, you may contact the awarded bidders. As mentioned, the awarded bidders are: Amerigroup Iowa, Inc., AmeriHealth Caritas Iowa, Inc., UnitedHealthcare of the River Valley, Inc., and WellCare of Iowa, Inc. For more information, please go to Informational Letter 1539 found here:

https://dhs.iowa.gov/sites/default/files/1539_DHS_Announces_Winning_Bidders_for_Medicaid_Modernization_Initiative.pdf

Question: Where can I find more information on the Medicaid Modernization initiative?

To find more information about the Iowa High Quality Health Care Initiative also known as Medicaid Modernization, please visit:

<http://dhs.iowa.gov/ime/about/initiatives/MedicaidModernization>.

To access the updated FAQ please visit:

http://dhs.iowa.gov/sites/default/files/IME_MedicaidModernization_FAQ.pdf

To access the Factsheet please visit:

http://dhs.iowa.gov/sites/default/files/IME_ModernizationFactSheet_03042015.pdf

To access the one page Medicaid Modernization Transition Factsheet please visit:

http://dhs.iowa.gov/sites/default/files/Modernization_Transition_Factsheet_072015.pdf



Member Enrollment Timeline and Process

Overview of Enrollment Process						
September 2015	October 2015	November 2015	December 2015	January 2016	February 2016	March 2016
Introductory Mailings by population	MCO Enrollment Begins	Enrollment assistance continues	December 17, 2015: Last Day to Make MCO Choice for January 2016	January 1: Begin Coverage with MCO		March 19: Member must have Good Cause to make change

Member Enrollment Packets

Member enrollment packets will be mailed in October through November. The tentative assignment is included and based on algorithm to keep families together under one MCO.

- Mailings will be staggered by program enrollment similar to introductory mailing
- Current members have until December 17 to choose for January 2016, with an additional 90 days after the assignment to change MCOs for any reason
- DHS notifies MCO of selection through enrollment file

Member Choice of MCO

Iowa Medicaid Member Services will be the Enrollment Broker and is responsible for providing information and conflict free choice counseling for members in the selection of a MCO. Key activities to share information and support member selection of MCO:

- In-person meetings throughout state with special focus on long term care members, schedules upcoming and posted online
- Email: IMEMemberServices@dhs.state.ia.us
- Call Center: 1-800-338-8366, 8am-5pm, M-F
- Members can select their MCO through voice system option 24/7 daily



The Enrollment Broker will offer health plan choice counseling to members. Choice counseling includes answering member questions about each health plan such as:

- Is my provider in the MCO network?
- Is my pharmacy in the MCO network?
- Does the MCO have specialists close to my community?
- Does the plan have value-added services that would benefit me?
- Are there special health programs that would help me?
- Does the MCO have call centers or helplines available beyond regular business hours?

Changing MCOs for Good Cause

Members may disenroll from their MCO at any time throughout the year for reasons of “good cause.” “Good cause” reasons can include:

- A member’s provider is not enrolled with the MCO and that provider disenrollment impacts the members’ health outcomes
- A member needs related services to be performed at the same time and not all related services are available in the MCO network
- If there is a change in eligibility (for example PACE)

To make a change:

- Members call the Iowa Medicaid Enrollment Broker to request disenrollment for “good cause”
- Members tell the Enrollment Broker which MCO they want to switch to
- If a member has a question about whether they have a “good cause” they can call the Enrollment Broker for more information



Member Promotional Materials

The next section of the toolkit includes several materials that can be used to communicate information about the IA Health Link program to Medicaid members. Additional materials will be released on an on-going basis.

The following promotional materials include:

- Member FAQs
- Sample email content to members
- Sample social media posts
- Estimated campaign timeline



Member FAQs

What is the IA Health Link program?

IA Health Link is Iowa's new managed care program for Medicaid members. On January 1, 2016, most Iowa Medicaid programs will be joined together in a single managed care program that will give you the same health care coverage you know and use, but will be covered by a managed care organization (MCO).

What is a managed care organization?

A managed care organization (MCO) is a health plan. It is a type of health coverage that makes sure you get complete care that's just right for you from the managed care organization's network of providers. You will have the opportunity to choose from one of the four MCOs in the coming months, or the state will match you with a MCO. You will receive more information about MCOs soon, so **you do not need to do anything right now.**

Can I change my managed care organization after January 1, 2016?

We want you to have a managed care organization (MCO) that you are comfortable with and can help you meet your medical needs. You may change your managed care organization at any time for good cause. Needing services from a provider within a different MCO network is an example of good cause.

Are Iowa Medicaid members *required* to enroll with a managed care organization?

Almost all Iowa Medicaid members are required to enroll with a managed care organization (MCO), but you will be able to keep seeing your current provider if they contract with a MCO. You may choose a MCO that best fits your health care needs, or the state will match you with a MCO in the coming months.

Will there be continuing education for members?

Yes, ongoing education will be available in the coming months. Please check our website (dhs.iowa.gov) periodically for event schedules and updated documents.

Will my benefits or provider change?

Your benefits will not change. Your physical health, behavioral health, and long-term care benefits will be covered by a MCO beginning January 1, 2016. The MCO will have a network of providers across the state of Iowa for you to choose from. Your provider(s) may change if they choose not to contract with a MCO. More information will be sent to you about the managed care organizations in the near future, so **you do not need to do anything right now.**



Why is the program changing to IA Health Link?

Understanding health care coverage can be difficult for members, especially if there are lots of different programs with different rules. IA Health Link brings Iowa Medicaid programs together into one program for individuals and families to all get the best care that they need.

Will there be continuing education for members?

Yes, ongoing education will be available in the coming months. Please check our website (dhs.iowa.gov) periodically for event schedules and updated documents.

How do I know if a service is covered with IA Health Link or not?

All of your benefits that you were eligible for before IA Health Link will stay the same after January 1, 2016, unless your eligibility changes. All services are based on medical necessity. Your doctor is the best person to determine the medical necessity of a procedure for you. Your provider will work with Provider Services to determine if the service is covered.

If I am part of the Iowa Health and Wellness Plan, will I still need to engage in healthy behavior practices?

Yes, Iowa Health and Wellness Plan members will still need to engage in healthy behavior practices if you are enrolled in the Iowa Health and Wellness Plan. These help you stay healthy and can save you money. Getting a physical or dental exam is the first of many preventive health care services that ensure you get the care you need. Remember, Iowa Health and Wellness Plan members who complete their healthy behavior requirements each year will not be charged a monthly contribution in the following year.

How and where can I learn more?

If you have questions or comments about this change or your current health coverage, please call the Iowa Medicaid Member Services Unit at 1-800-338-8366 or 515-256-4606. Representatives will be available Monday-Friday, 8:00 a.m. to 5:00 p.m.



Sample Email Content to Members

Below is a generic email to use when receiving questions about the IA Health Link program, and what members can expect during this transition.

Sample

Dear [member name],

Thank you for your questions, comments, and concerns about the new managed care program provided by Iowa Medicaid. The new program is called IA Health Link and will go into effect on January 1, 2016. IA Health Link will join together Medicaid programs under a single managed care program. This new program will give you the high quality health care coverage you know and use, but will be covered by a managed care organization (MCO).

A managed care organization (MCO) is a health plan. It is a type of health coverage that makes sure you get complete care that's just right for you from the managed care organization's network of providers. Almost all Iowa Medicaid members are required to enroll with a MCO, but you will be able to keep seeing your current provider if they contract with a MCO.

You do not need to do anything right now. You can continue to work with your current provider(s), and coverage for health care services by the MCO will begin on January 1, 2016. The MCO will have a network of providers across the state for you to choose from. More information will be sent to you about health plan options later in the fall.

If you have questions or comments about this change or your current health care coverage, please call the Iowa Medicaid Member Services Unit at 1-800-338-8366 or 515-256-4606, if calling from the Des Moines area. Iowa Medicaid representatives will be available Monday-Friday, 8:00 a.m. to 5:00 p.m.

Sincerely,

[Signature]

[Typed name]

[Position]



Sample Social Media Posts

Below are sample social media posts your center can distribute through your social media channels. The goal is to provide high-level information about the IA Health Link program.

Example Facebook Posts

Are you a current Iowa Medicaid member? Most Iowa Medicaid programs will be joined together in a single managed care program called IA Health Link as of January 1, 2016. Learn more about this new program at dhs.iowa.gov.

The new IA Health Link program will give current Iowa Medicaid members access to high quality health care coverage through a managed care organization, or MCO. A MCO is a health insurance company that will make sure you receive complete health care that's right for you.

You can learn more about the new IA Health Link program at meetings that will occur around the state of Iowa to educate members on the coming change.

Current Medicaid members: **You do not need to do anything at this time.** You will get a notice to let you know when you need to make a health plan choice.

Example Twitter Posts

Are you a current #IowaMedicaid member? Learn more about the #IAHealthLink program and what it means to you: dhs.iowa.gov.

Most #IowaMedicaid programs will join together in a managed care program called #IAHealthLink on 1/1/16: dhs.iowa.gov.

Learn more about the new #IAHealthLink program at meetings near you. dhs.iowa.gov

Current #IowaMedicaid members: You do not need to do anything right now. You can continue to work with your current provider, and coverage by the MCO will begin on January 1, 2016.

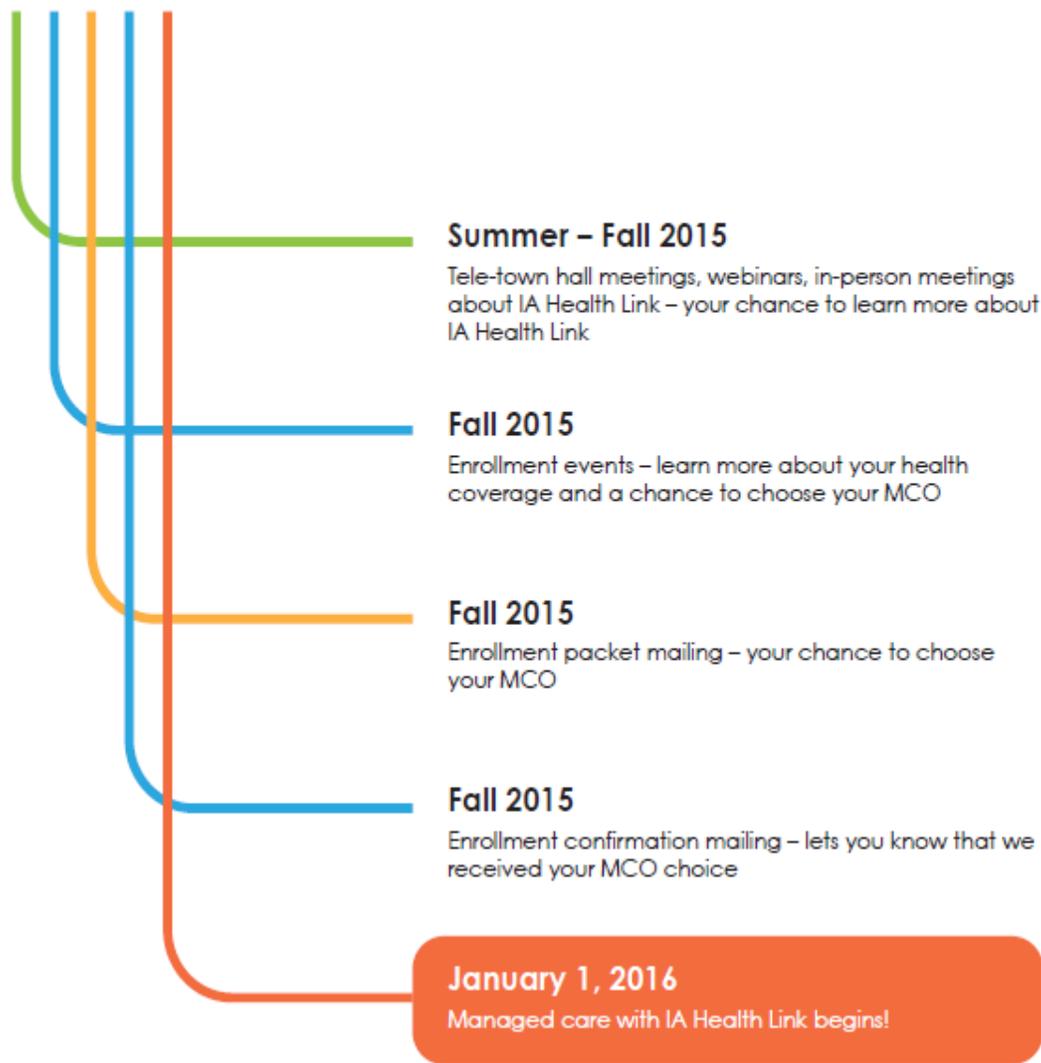
Visit dhs.iowa.gov for more information about the #IAHealthLink transition.



Planned Communications Timeline

The image below outlines stakeholder communication efforts that will take place over the next several months leading to the launch of the new IA Health Link program.

Steps to IA Health Link Timeline





Contact Information

For additional information on the new managed care program called IA Health Link and the Iowa High Quality Healthcare Initiative also known as Medicaid Modernization please visit the DHS Website or email MedicaidModernization@dhs.state.ia.us.

Members are encouraged to call Iowa Medicaid Member Services Unit at 1-800-338-8366 or in the Des Moines area at 515-256-4606. Medicaid representatives will be available Monday-Friday, 8:00 a.m. to 5:00 p.m.

Additional Resources for Medicaid Modernization Information

[Medicaid Modernization Fact Sheet](#)

[Medicaid Modernization Frequently Asked Questions](#)

[Medicaid Modernization One Page Fact Sheet](#)