



### February Executive Committee Meeting

**Tuesday, March 15, 2016**

Time: 3:00 p.m. – 4:30 p.m.

Hoover State Office Building

1305 E. Walnut St., Des Moines, IA

**Dial: 1-866-685-1580**

**Code: 515-725-1031#**

### AGENDA

- 3:00 Introductions
- 3:05 Approval of Minutes from Previous Meeting
  - Executive Committee: February 16, 2016
- 3:10 IA Health Link Public Comment Meeting Schedule/Assignments
- 3:15 Update from the Long Term Care Ombudsman's Office- Deanna Clingan-Fischer
- 3:35 Provider Transition Update and Discussion
- 4:05 IA Health Link Communications Update
- 4:15 MAAC Processes
  - a. Council Polling Methods
  - b. Nominating Committee Appointment
  - c. Meeting Schedule Adjustments
- 4:25 Public Comment (Non-Executive Committee Members)
- 4:30 Adjourn



### Executive Council Committee Full Meeting Minutes February 16, 2016

EXECUTIVE COMMITTEE MEMBERS	DEPARTMENT OF HUMAN SERVICES
Gerd Clabaugh – <b>present</b>	Mikki Stier – <b>present</b>
Dennis Tibben – <b>present</b>	Deb Johnson – <b>present</b>
Nancy Hale – <b>present</b>	Matt Highland – <b>present</b>
Kristie Oliver – <b>absent</b>	Lindsay Buechel – <b>present</b>
Paula Connolly – <b>present</b>	Sean Bagniewski – <b>present</b>
Shelly Chandler – <b>present</b>	Amy McCoy – <b>present</b>
Anthony Carroll – <b>present</b>	Matt Highland – <b>present</b>
Jim Cushing – <b>present</b>	
Kate Gainer – <b>present</b>	
Cindy Baddeloo – <b>present</b>	
Sara Allen – <b>present</b>	

#### Introduction

Gerd Clabaugh called the meeting to order and conducted a roll call of the Committee members.

#### Approval of Minutes

Gerd stated that the first order of business is the approval of the meeting minutes from January 12, 2016, Special Meeting and January 19, 2016, Executive Committee meeting. Gerd invited comments and several were presented, afterwards, the January 12 minutes were approved. Gerd proceeded with comments for the January 19 meeting minutes. Several updates were requested and Gerd stated that with these changes applied, the meeting minutes for January 19 were approved.

#### Executive Committee Work Plan Documents Follow-Up

Gerd distributed preliminary documents about the development of a work plan regarding discussion topics and the appropriate timing of these topics at specific meetings. He stated that he views this as a working document and that based on the discussions with the Assistant Attorney General at the last meeting, that there are some roles and responsibilities for the Executive Council as laid out in the law. He stated that it will be necessary to elect a Vice Chair. Gerd stated that the intent of the work plan is to get on the schedule – even a working document – important pieces that the Executive Committee wants to get done and to be able to effectively sequence and prioritize the work as reflected on the work plan. Gerd invited reaction to the document. Dennis Tibben asked about the process flow of recommendations, and whether recommendations first come from the Executive Committee or the Full

Council. Gerd confirmed that it would be a Full Council discussion would occur first and then move to the Executive Committee for recommendations and actions. He ended this discussion by offering to work with staff to keep the document up-to-date.

Lindsay stated that there is a request for the Long Term Care Ombudsman to present the Health Care Alliance report, scheduled for the March Executive Committee meeting. Jim Cushing stated that with respect to the Long Term Care Ombudsman's Health Care Alliance Report, the Executive Committee was most interested in how the program will work moving forward with implementation.

### **Status Update on Recently Filed Rules**

Mikki stated that the second hearing on the rules was completed and that rules passed.

### **Medicaid Modernization Communication and Outreach Update**

A packet of communication materials was distributed out to the Executive Committee members in attendance. Mikki stated that the department has put together this packet because it is important for everyone to get a better sense of the scope of the member as well as the provider communications effort surrounding the managed care transition. She stated that the IME has been working directly with providers to ensure that enrollment, claims, and billings issues are addressed. She acknowledged recent billing issues with providers and said that the IME has been asking associations to notify the department that if they have members encountering billing issues, to contact the IME directly and that these will be dealt with individually and quickly. Jim and Shelly expressed concern about confusion with some members involving the process in the WellCare reassignment. Mikki clarified the choice process and she encouraged that any other similar situations should be forward to the IME (to Lindsay) for resolution. Cindy asked if all MCO communications had to be approved by DHS and Mikki confirmed. Cindy cited an example where an MCO claims that they could not provide information on how to fill out a claim form without approval from DHS. Lindsay stated that the provider training covers this particular topic. Sean offered to make a follow up on this point.

### **Listening Sessions Meeting Format, Session Notes, and Reporting Template**

Lindsay went over the listening session materials that were handed out and explained the purpose of the public comment meetings is to allow anyone (members, providers, general public to offer comments to the department on the IA Health Link program. She explained the rationale, logistics, and schedule of the upcoming meetings and explained that for those unable to attend, there will be other options for writing in comments. She confirmed that the meetings will be heavily promoted through various communication channels with the main objective being the collection of comments. Council member comments will be collected at the end of the session. A summary of these comments will be produced and shared with the Full Council and for the Executive Council to discuss. Lindsay confirmed Jim's clarification that the meetings are both for members as well as providers. Sara made the suggestion that the section on the comments sheet that referenced provider payment comments should perhaps simply say "provider comments." Dennis also suggested a section perhaps for recommended solutions. Paula raised the point that at these meetings, there will be attendees who are not necessarily in favor of the managed care transition and that we should make sure the form is able to reflect the diversity of the comments at these meetings. Paula, with Anthony's agreement, stated that she is concerned how we are to handle the logistic of having a large group and wanted to make sure that people do not feel that they were not given ample opportunity to have their voices heard. Lindsay pointed out that in addition to making the expectations clear, setting a time limit for speaking can facilitate more comment opportunities for more people and that it will be made clear that there will be other comment methods that will be available post meeting. Lindsay stated that if the meeting time was unable to accommodate everyone, then the Department will provide other comment options.

### **Notice of Election**

Gerd stated that the administrative rule requires the election of a Vice Chair which was discussed at the last council meeting and the election will occur in May. He stated that there will be an appointment at the February 18 Full Council meeting of three members of the Full Council to serve as the nominating committee for the Vice Chair. Cindy asked who is eligible and Gerd replied that according to the law, a member of the Full Council. Shelly asked if the elected Vice Chair is for both the Full

Council and the Executive Committee. Gerd confirmed that this is his understanding but that this will be discussed at greater length at the Full Council meeting on Thursday during the appointment of the nominating committee.

### **Term Length**

Gerd stated that this is a follow up to the discussion at the last Executive Committee meeting regarding having multiple year appointment. Gerd stated that the administrative rules are silent regarding this matter but wanted to bring this back to gather a consensus understanding or preferences about how to operationalize this. Sara asked if this would mean a back to back two-year term. Gerd confirmed this but added that the rules do not set term limits on the Executive Committee. Jim concurred that in previous elections that two years was implied as the term length. Gerd confirmed that there is agreement on two years as the term length.

### **Medicaid Modernization Update**

Mikki stated that one of the key questions that was asked is about credentialing. She stated that Iowa Medicaid did do deemed credentialing and has a universal credentialing form. However, the NCQA standard for the MCOs allowed deemed credentialing for 60 days. Shelly requested clarification regarding the universal credentialing and both Mikki and Sean explained the process. Mikki also provided an update on the process of Ownership and Disclosure. Mikki also discussed prior authorization and the development of a benefit plan grid which takes Medicaid, the Iowa Health and Wellness Plan, the *hawk-i* plan, aligning them with the MCOs and creating a benefits master plan grid that will assist members in simplifying prior authorization. Mikki also provided an update about incident reports and stated that it is being discussed and will continue to keep everyone apprised of developments. She stated that discussions have also started with the MCOs regarding the electronic verifications and an informational letter is currently under development. Mikki provided a brief update on claims processing, stating that the IME is working with MCO on ensuring systems compatibility for providers. Dennis asked about the reporting dashboard and Mikki responded stating that the Department is working on it right now, with over 200 reports with a first year. Jim brought up the Case Management transition and whether there will be some degree of oversight by DHS. Deb Johnson confirmed that there will be oversight of case management. Deb clarified that MCOs do have a right to ask for information from case management in order to gain a better understanding of the process and to be prepared for implementation. Deb stated that MCOs are reporting to the department weekly and that everything is being done to ensure a high degree of training for case managers.

### **Public Comment**

Gerd invited the non-council members to make comments. Sara asked about a provider network status (i.e. data on signed contracts) particularly concerning UnitedHealthcare. Mikki replied that the department will provide more granular information concerning MCO provider data. Sara also asked how rates are negotiated. Shelly stated that she felt UnitedHealthcare is not being responsive to providers that are reaching out. Mikki stated that she will follow up. Dennis asked if Executive Committee members are able to get counts of individual providers, and Amy McCoy stated that provider counts are done by NPI number which does not necessarily equate to one individual provider. Sara asked about "Out-of-State" networks and Cindy shared about a large hospital in the area that chose to sign with only one MCO and members are now under the impression that they need to sign up with that particular MCO in order to be able to utilize services of this hospital. Jim stated that he is getting asked regularly if the provider contracts are executed. Mikki stated that all contracts, including fully executed contracts, are being tracked. Jim made a comment that there is a general concern among members about their provider not signing up with an MCO.

### **Adjourned at 4:30 P.M.**



## IA Health Link Public Comment Meeting Schedule

Meeting Date	Meeting Time	Meeting Location	Location Details
March 22, 2016	3 p.m. – 5 p.m.	Mason City	Historic Park Inn, Ballroom 15 W. State Street Mason City, IA 50401
April 12, 2016	3 p.m. – 5 p.m.	Burlington	Pzazz Convention and Event Center, Hall B 3001 Winegard Dr. Burlington, IA 52601
May 10, 2016	3 p.m. – 5 p.m.	Dubuque	Grand River Center Meeting Room #2 500 Bell Street Dubuque, IA 52001
June 7, 2016	3 p.m. – 5 p.m.	Council Bluffs	Hilton Garden Inn, River City Ballroom 2702 Mid-American Dr. Council Bluffs, IA 51501
July 19, 2016	3 p.m. – 5 p.m.	Cedar Rapids	Kirkwood Community College, 234 Cedar Hall 6301 Kirkwood Blvd SW Cedar Rapids, IA 52404
August 23, 2016	3 p.m. – 5 p.m.	Fort Dodge	Fort Dodge Public Library 424 Central Ave. Fort Dodge, IA 50501
September 14, 2016	3 p.m. – 5 p.m.	Waterloo	Hawkeye Community College, Tama Hall Room 102 1501 E. Orange Rd. Waterloo, IA 50704
October 11, 2016	3 p.m. – 5 p.m.	Sioux City	Western Iowa Tech Community College, Cargil Auditorium (D103) 4647 Stone Ave. Sioux City, IA 51106
November 17, 2016	3 p.m. – 5 p.m.	Ottumwa	Bridge View Center, Room C4 & C5 102 Church St. Ottumwa, IA 52501
December 7, 2016	3 p.m. – 5 p.m.	Des Moines	Des Moines Central Library, Meeting Room 1000 Grand Ave. Des Moines, IA 50309



## Attendee Schedule: IA Health Link Public Comment Meetings

Meeting Date	Meeting Location	IME/DHS Staff	Member and Provider Services Staff	MAAC Exec. Committee Members	Other Support Staff	MCO Staff
March 22, 2016	Mason City	1. Debbie Johnson 2. Jennifer Steenblock	Member: Lindsay Buechel Provider: Sean Bagniewski	1. Cindy Baddeloo 2. Kate Gainer	Allie Timmerman	AG: AH: UH:
April 12, 2016	Burlington	1. Julie Lovelady 2. Debbie Johnson	Member: Lindsay Buechel Provider: Sean Bagniewski	1. Shelly Chandler 2. Anthony Carroll	Stefanie Madsen	AG: AH: UH:
May 10, 2016	Dubuque	1. Liz Matney 2. Debbie Johnson	Member: Lindsay Buechel Provider: Sean Bagniewski	1. Kristie Oliver 2. Gerd Clabaugh	Nicole Kaplan Bryan Dempsey	AG: AH: UH:
June 7, 2016	Council Bluffs	1. Jennifer Steenblock 2. Julie Lovelady	Member: Lindsay Buechel Provider: Sean Bagniewski	1. Jim Cushing 2. Paula Connolly	Sarah Belmer	AG: AH: UH:
July 19, 2016	Cedar Rapids	1. Liz Matney 2. Jennifer Steenblock	Member: Lindsay Buechel Provider: Sean Bagniewski	1. Dennis Tibben 2. Sara Allen	Korey Buchanan Bryan Dempsey	AG: AH: UH:
August 23, 2016	Fort Dodge	1. Mikki Stier 2. Debbie Johnson	Member: Lindsay Buechel Provider: Sean Bagniewski	1. Anthony Carroll 2. Kate Gainer	Allie Timmerman	AG: AH: UH:
September 14, 2016	Waterloo	1. Julie Lovelady 2. Liz Matney	Member: Lindsay Buechel Provider: Sean Bagniewski	1. Shelly Chandler 2. Sara Allen	Stefanie Madsen	AG: AH: UH:
October 11, 2016	Sioux City	1. Jennifer Steenblock	Member: Lindsay Buechel	1. Kristie Oliver 2. Dennis	Nicole Kaplan	AG: AH:



Meeting Date	Meeting Location	IME/DHS Staff	Member and Provider Services Staff	MAAC Exec. Committee Members	Other Support Staff	MCO Staff
		2. Debbie Johnson	Provider: Sean Bagniewski	Tibben		UH:
November 17, 2016	Ottumwa	1. Liz Matney 2. Julie Lovelady	Member: Lindsay Buechel Provider: Sean Bagniewski:	1. Jim Cushing 2. Paula Connolly	Sarah Belmer	AG: AH: UH:
December 7, 2016	Des Moines	1. Mikki Stier 2. Liz Matney	Member: Lindsay Buechel Provider: Sean Bagniewski	1. Cindy Baddeloo 2. Gerd Clabaugh	Korey Buchanan Allie Timmerman Bryan Dempsey	AG: AH: UH:

# Health Consumer Ombudsman Alliance Report

Presented by

**Deanna Clingan-Fischer, State Long-Term Care Ombudsman  
on behalf of the HCO Alliance Workgroup**

**Medical Assistance Advisory Council (MAAC)**

**March 15, 2016**



**Senate File 505**  
**Final Report: Health Consumer Ombudsman Alliance**  
**December 2015**

# Background

- Senate File 505 tasked the Office of the State Long-Term Care Ombudsman with convening a multiagency workgroup to gather information and provide recommendations to carry out the various aspects of the bill.
- Senate File 505 states in part:
  - ***Sec. 66. PROPOSAL FOR A HEALTH CONSUMER OMBUDSMAN ALLIANCE.*** *The office of long-term care ombudsman shall collaborate with the department on aging, the office of substitute decision maker, the department of veteran affairs, the department of human services, the department of public health, the department of inspections and appeals, the designated protection and advocacy agency as provided in section 135C.2, subsection 4, the civil rights commission, the senior health insurance information program, the Iowa insurance consumer advocate, Iowa legal aid, and other consumer advocates and consumer assistance programs develop a proposal for the establishment of a health consumer ombudsman alliance.*
  - *The proposal developed shall include annual budget projections and shall be submitted to the governor and the general assembly no later than December 15, 2015.*

# Purpose of Alliance & Role of OSLTCO

## Purpose of Health Consumer Ombudsman Alliance:

- *“The purpose of the alliance is to provide a permanent coordinated system of independent consumer supports to ensure that consumers, including consumers covered under Medicaid managed care, obtain and maintain essential health care, are provided unbiased information in understanding coverage models, and are assisted in resolving problems regarding health care services, coverage, access, and rights.”*  
(Senate File 505, Sec. 66)

## OSLTCO Role:

- Facilitate workgroup tasked with creating independent system of consumer supports
- Research best practices supporting workgroup recommendations and oversee development of corresponding budget projections for different scenarios
- Submit Report on behalf of workgroup to the General Assembly and Governor by December 15, 2015

# Report Highlights

- 1) Establish a Health Consumer Ombudsman Alliance.
- 2) Develop a Medicaid Managed Care Information Program.
- 3) Implement a Statewide Single Point of Entry.
- 4) Expand the Managed Care Ombudsman Program.
- 5) Expand the Current Legal Assistance Network.

# Recommendations

## **1) Establish a Health Consumer Ombudsman Alliance**

Under the proposal developed, the HCO Alliance would identify gaps and discuss the overall health care needs of Iowans, make recommendations to address issues encountered and make appropriate consumer referrals. This would be accomplished through a tiered implementation approach, with the HCO Alliance starting with managed care and expanding into other health care arenas.

# Recommendations

## **2) Develop a Medicaid Managed Care Information Program**

The HCO Alliance workgroup proposes the establishment of a program to assist Medicaid members in obtaining objective and unbiased information, counseling and options for enrollment beyond what they are able to receive independently. The program, based upon the current Senior Health Insurance Information Program (SHIIP) model, will provide free, in-depth, one-on-one counseling and assistance to Medicaid members and their families and caregivers.

# Recommendations

## **3) Implement a Statewide Single Point of Entry**

A single point of entry, or “no wrong door” approach, will streamline efforts and maximize efficiencies for HCO Alliance partners by connecting consumers to experts who provide unbiased information and support in a specified area of need. The HCO Alliance workgroup proposes the expansion of the established LifeLong Links™ to serve as the statewide single point of entry for health care consumer information.

# Recommendations

## 4) Expand the Managed Care Ombudsman Program

The HCO Alliance workgroup recommends expanding the Managed Care Ombudsman Program (MCOP). The OSLTCO, based upon this recommendation, conducted research of other states' programs to identify best practices to achieve that objective. The best-practice ratio of moving to one ombudsman for every 3,500 members emerged as the most significant finding. This Report also offers details on two proposals that may implement the spirit and intent of Senate File 505, one expanding the current MCOP to act as the designated advocacy agency for all 560,000 of Iowa's Medicaid managed care members (the HCO Alliance workgroup's recommended option) and an alternative proposal, focused only on providing more resources for the current, limited program serving approximately 57,000 Iowans.

# Recommendations

## **5) Expand the Current Legal Assistance Network**

The HCO Alliance workgroup foresees there will be an increased need for legal advocacy for Iowa's Medicaid members who will be served by managed care organizations. The workgroup recommends expanding the current legal assistance network to assist with appeals, grievances and state fair hearings.



Office of the State Long-Term Care  
**OMBUDSMAN**

*Established within the Iowa Department on Aging*  
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