



MAAC Full Council Meeting Full Meeting Minutes May 17, 2016

Introductions *(See the roll call document to review the Full Council attendance.)*

Gerd Clabaugh called the roll call of those in attendance (in-person and on the phone) and declared that there was a quorum to proceed with the meeting.

Approval of February 18, 2016 Full Council Meeting Minutes

Gerd declared that the minutes of the Full Council meeting of February 18, 2016, stood approved.

Council Governance from Attorney General's Office

Heather Adams, on behalf of the Attorney General's office, spoke to the Full Council regarding the mission and authority of the MAAC. The MAAC was created as federal requirement to represent the citizens of Iowa and provide aid, direction, and suggestion to the Medicaid director and the DHS director. Heather handed out information on a new bill that had been generated and was to be signed by the Governor for the 2016 legislative session as well as a copy of the administrative rules that govern the work of the Council. It was advised that there had to be quorum in order to take any action or to vote on a recommendation or advice that the council might have for DHS, and 50 percent must be in attendance for a quorum to exist. Once quorum had been met, the rules would further require that two-thirds of members be present in order to take action on any motion and that the votes must be clear on who was voting for or against on any item. Heather then discussed the "Open Meetings Law" and the requirement of three key points – Agendas, Minutes, and Public Access Records.

Heather reviewed laws on accepting gifts, conflicts of interest, the state statute, and the new language in the bill that was pending signature from the governor.

Questions and Comments on the Council Governance from Attorney General's Office:

- When adding items to the approved agenda, items should not be added after approval unless it were under any reason recognized as an emergency; any other agenda item should go through the normal process of setting the agenda.
- The Full Council was advised to have discussions regarding how to make the administrative rules concerning duties of both the Full Council and Executive Committee clear to all.

Executive Committee Report

Previous months activities were reviewed and it was suggested that Council members review the minutes of previous meetings for better understanding of the transition. A workplan was mentioned to enable better communication between the Full Council and Executive Committee as well as to ensure that topics for discussion include subjects that

Review and Discussion of Full Council Guidelines –Action Item

To ensure that the MAAC as a body operate in compliance with the law, the Council was urged to

vote on the guidelines that day. The intent of the vote was to encourage conversation and develop a better understanding of how to go about doing business as a Council. Most of the items within the document were taken directly from the Iowa code or administrative rules such as:

It was requested that the federal document pertaining to the MAAC be included in the document and that potential amendments be added. The topic of amendments was to be discussed again at the August Full Council meeting and the Council was to use to current document as a guide on operational procedures.

Legislative Update and MAAC Elections

On March 28, 2016, an email was sent to the members of the Full Council asking for recommendations for an individual to serve as Vice Chair with the idea that a vote was to take place on that day. There had been five nominees that had been reviewed although with the new pending bill, the potential roles of the Vice Chair, the Co-Chair, and the makeup of the MAAC could change as the Co-Chair may be attached to the consumer representation. Given the bill had not yet been signed, the voting would be delayed although discussion would continue within the Executive Committee should there be any developments prior to the following Full Council meeting. It was agreed that the Council proceed with the vote for the Executive Committee candidate as the Executive Committee would not change with the passing bill. The voting process was explained, and members were to submit their ballots within the following week.

Transition Updates from DHS

In the month and a half following implementation, the IME and MCOs had developed a rapid response team for issues communicated by members, providers or stakeholders that needed to be resolved. The rapid response team had been meeting no less than once a day to discuss outstanding issues. Some of the issues that were being tracked at the time were member prescriptions and pharmacy claims, transportation and Non-Emergent Medical Transportation (NEMT), Prior Authorizations (PAs), and provider claims and billing. It was encouraged that all providers verify eligibility monthly with the IME prior to rendering services as eligibility may change.

Updates from MCOs

a. Amerigroup Iowa, Inc.

Dr. Mark Levy, Managing Medical Director, spoke as a representative for Amerigroup. To date, 27,000 providers were contracted with Amerigroup, 97 percent were loaded into the claims system. Their call centers were receiving 1,500 to 2,000 calls per day and had a connected calls rate of approximately 98 percent. Had received 131,000 claims as of Friday, May 13, 2016, and had received approximately 7,000 per day in the month of May. Approximately 11,000 claims had not yet been processed although the remainder had been adjudicated in the amount of approximately \$33 million dollars. Out of the claims submitted, approximately 6 percent had been denied had all been processed through a manual review process prior to the denial and some of the examples had been services were not covered or coding issues. He stated that 106,911 pharmacy claims had been paid in the month of May, PA requirements were the same as had been with Iowa Medicaid. Prior Authorizations (PAs) were also being addressed and changed as necessary for the state of Iowa. To date had 147 case managers in Iowa and members receiving case management services were able to be referred by their providers, hospital discharges, self-referrals, as well as internal data analytics of high risk members. The number of grievances had been 96 and a majority had been due to transportation issues, and all had been resolved and closed. The organization had also been working with groups such as Health Homes to determine better processes moving forward. Paula requested how the MCOs' advisory boards were set up and how they worked. Dr. Mark Levy stated that their first advisory board meeting had taken place that week, and information was presented by stakeholders, legislatures, listening sessions, and Amerigroup members. The boards consisted of 15 individuals. AmeriHealth Caritas of Iowa, Inc. representative Jeremy Morgan stated that did not have the information and would follow-up. UnitedHealthcare Plan of the River Valley, Inc. representative Paige Pettit stated that had identified advisory board members however she was unsure of when meeting had been scheduled and would follow-up.

b. AmeriHealth Caritas, Iowa, Inc.

Jeremy Morgan, AmeriHealth Caritas representative stated that they had 220,000 members to date. Total number of medical claims had been over 250,000, 355,000 pharmacy claims had been processed for both April and May, and therefore \$55 million claims paid to date on medical side and \$22 million in claims paid to pharmacy. Member Services contact center had taken approximately 35,000 calls, and Provider Services approximately 22,000 calls. He acknowledged that there had been issues with PAs such as how long they had taken to process, and that they had contractual obligation of a maximum of seven days for normal PAs and three days for escalated PAs. Current issues were being addressed and processes determined moving forward with Iowa providers based on member needs. Jeremy stated that the organization was aware of members or providers not receiving a response when contacting AmeriHealth Caritas and the MCO was working toward resolution but if any person were to experience additional issues they could contact Jeremy directly. He advised that if members or providers were having issues to contact AmeriHealth Caritas for resolution.

c. UnitedHealthcare Plan of the River Valley

Paige Pettit, UnitedHealthcare Plan of the River Valley representative stated that they had been communicating dashboard information to the state. She stated that UnitedHealthcare had received feedback regarding issues with the PA process and had therefore relaxed the requirements of PAs for skilled nursing care, home health, occupational, physical and speech therapy, and mental health services. Paige confirmed they continued to attend all of the state meetings and association meetings as requested. She stated that UnitedHealthcare has eight advocates throughout the state who were conducting outreach discussions both in person and through web-based trainings. She cited known issues for CDAC billing so the organization had created a document explaining the billing process for CDAC providers for further assistance which has been made available on the UnitedHealthcare website. Paige confirmed that UnitedHealthcare met with the state Monday, Wednesday and Friday and held sessions to discuss escalated concerns for immediate resolution. She also stated that a newsletter had been available for all provider types and documents would continue to be developed as needs arose. Paige stated when calling the call center, if the call center did not meet expectations, the provider or member should ask to be directed to their local advocate, and if still unresolved, could reach out to Paige directly.

Medicaid secondary claims were to be handled by the primary insurer first and then the MCO as a payer of last resort and case managers should utilize available MCO technologies with member medical history to continue coordination with providers. UnitedHealthcare was to follow-up with the number of claims submitted and there were approximately 180,000 enrolled members. Amerigroup had approximately 185,000 members.

Public Comment Listening Sessions

Lindsay stated that all materials comment meeting summaries had been handed out prior to the start of the meeting and that were available on the DHS MAAC webpage.

a. Mason City

Mason City meeting that was held in March had had more questions than comments as it was prior to implementation.

b. Burlington

Meeting had been held the second week of April and was primarily an audience of providers and again had consisted of primarily questions regarding billing, and operational concerns as opposed to direct comments.

c. Dubuque

Dubuque meeting had been held the second week of May and consisted of providers, members, and family members with many comments and approximately 100 persons in attendance. The topics that had been discussed were PAs, response time, how to contact the MCOs, and transportation.

Meetings were to continue once every month for the remainder of the year in various cities throughout Iowa and members were encouraged to attend on behalf of their organizations.

Workplan Review

The workplan was to be utilized as reflection of new issues to be discussed in future council meetings, and new agenda items to be added moving forward. It was further suggested to record in the minutes where questions have been asked to allow for future follow-up.

Public Comments

No public comments.

Adjourn

4:00 p.m.

441—79.7(249A) Medical assistance advisory council.

79.7(1) Officers. Officers shall be a chairperson and a co-chairperson.

- a.* The director of public health shall serve as chairperson of the council.
- b.* The co-chairperson's term of office shall be two years. A co-chairperson shall serve no more than two consecutive terms.
- c.* The co-chairperson shall serve in the absence of the chairperson.
- d.* The co-chairperson shall have the right to vote on any issue before the council. The chairperson serves as a non-voting member of the council.
- e.* The chairperson shall appoint members to other committees approved by the council.
- f.* The co-chairperson shall be filled by one of the ten publically appointed council member positions.

(1) The co-chairperson shall be elected at the beginning of the state fiscal year and a slate of candidates will be presented to all voting full council members. Ballots will be distributed at the quarterly meeting closest to the beginning of the next state fiscal year and will be collected in paper and electronic format and administered by the department of human services staff.

- g.* The chairperson and co-chairperson shall also serve on the executive committee and will serve as the chairperson and co-chairperson of that committee.
- h.* Responsibilities. The chairperson and co-chairperson shall be responsible for development of the agenda for the full council. Agendas will be developed and distributed in compliance with the advance notice requirements of the Iowa Code section 21.4.

(1) The chairperson and co-chairperson shall be responsible for agenda creation, which will be developed in consultation with the staff of the department of human services, taking into consideration the following tasks of the council:

- i.* Workplans. Agenda items will be added to the council agenda as various tasks for the council are due to be discussed based on calendar requirements. Council deliberations are to be conducted within a timeframe to allow the executive committee to receive the council's feedback, make recommendations to the director, and for the director to consider those recommendations as budgets and policy for the medical assistance program are developed for the review of the council on human services, the governor, as well as for upcoming legislative session.
- ii.* Requests from the director of human services.
- iii.* Discussion and action items from council members. The chairperson and co-chairperson will review any additional suggestions from council members after the agenda is distributed. The agenda will be distributed in draft form five (5) business days prior to the council meeting, with the final agenda being distributed no later than 24 hours prior to the council meeting.

(2) The chairperson shall preside over all council and executive committee meetings, calling role, determining quorum, counting votes and following the agenda for the meeting.

- i.* In the absence of the chairperson, the co-chairperson shall assume the chairperson's duties during council and executive committee meetings.

ii. The chairperson and co-chairperson shall consult with the department of human services on other administrative tasks to oversee the council and participate in workgroups and subcommittees as appropriate.

79.7(2) Membership. The membership of the council and its executive committee shall be as prescribed at Iowa Code section 249A.4B, subsections 2 and 3.

a. Council membership of professional and business entities shall consist of those outlined in Iowa Code section 249A.4B, subsection 2 and 3.

(1) Professional and business entities shall identify their representative and report information to the department of human services.

i. If an entity's representative does not attend more than three (3) consecutive meetings, the department of human services will notify the entity and representative and verify if an alternative contact is needed.

ii. Professional and business entities shall determine the length of their representative's appointment. The department of human services will confirm representative participation every two years, regardless of meeting attendance.

iii. All professional and business entities will be voting members of the council.

(2) Council membership of public representatives shall consist of ten (10) representatives which may include members of consumer groups, including recipients of medical assistance or their families, consumer organizations, and others, appointed by the governor for staggered terms of two years each, none of whom shall be members of, or practitioners of, or have a pecuniary interest in any of the professional or business entities specifically represented in subsection 2 and 3 and a majority of whom shall be current or former recipients of medical assistance or member of families of current or former recipients.

i. All public representatives will be voting members of the council.

(3) Council membership shall also consist of state agency and medical school partners, including representatives from the department on aging, the long-term care ombudsman, Des Moines University and the University of Iowa College of Medicine.

i. Partner agency and medical school representatives will be non-voting members of the council.

ii. If an agency or school's representative does not attend more than three (3) consecutive meetings, the department of human services will notify the agency and school.

iii. Partner agencies and medical schools shall determine the length of their representative's appointment. The department of human services will confirm representative participation every two years, regardless of meeting attendance.

(4) Members of the general assembly shall participate in the council, each for a term of two years as provided in Iowa Code section 69.16B

i. Two members of the house of representatives, one appointed by the speaker of the house of representatives and one appointed by the minority leader of the house of representatives from their respective parties.

- ii. Two members of the senate, one appointed by the president of the senate after consultation with the majority leader of the senate and one appointed by the minority leader of the senate.
- iii. Members appointed from the general assembly will serve as non-voting members of the council.

b. Executive committee membership shall consist as follows:

- (1) Five individuals from the professional and business entities identified in Iowa Code section 249A.4B, subsection 2.
- (2) Five individuals appointed as public members, pursuant to Iowa Code section 249A.4B, subsection 2.
 - i. One of the five public member positions on the executive committee will be held by the co-chairperson identified in section 79.7 (1).
- (3) The chairperson and co-chairperson identified in section 79.7(1) shall serve as the chairperson and co-chairperson of the executive committee.
- (4) The executive committee will be elected for two (2) year terms, beginning at the start of a state fiscal year.
 - i. All voting members of the council will be eligible for election to the executive committee, based on the criteria outlined in this section.
 - ii. A slate of candidates will be presented to all voting council members once every two years. Ballots will be distributed at the quarterly meeting closest to the beginning of the next state fiscal year and will be collected in paper and electronic format and administered by the department of human services staff.
 - iii. Should any vacancies occur on the executive committee, a special election will be held following the same standards outlined in this section.

79.7(3) Responsibilities, duties and meetings. The responsibility of the medical assistance advisory council is to provide recommendations on the medical assistance program to the department of human services.

a. Recommendations of the council shall be advisory and not binding upon the department of human services or the professional and business entities represented. The director of the department of human services shall consider the recommendations offered by the council and the executive committee in:

- (1) The director's preparation of medical assistance budget recommendations to the council on human services, pursuant to Iowa Code section 217.3 and
- (2) Implementation of medical assistance program policies.

b. Council

(1) Council meetings

- i. The council will meet no more than quarterly.
- ii. Meetings may be called by the chairperson or co-chairperson, upon written request of at least 50 percent of members, or by the director of the department of human services.
- iii. Meetings shall be held in the Des Moines, Iowa, area, unless other notification is given. Meetings will also be made available via teleconference, when available.
- iv. Written notice of council meetings shall be electronically mailed at least five (5) business days in advance of the meeting. Each notice shall

include an agenda for the meeting. The final agenda will be distributed no later than 24 hours prior to the meeting.

- (2) The council may choose subjects for consideration and recommendation. It shall consider all matters referred to it by the department of human services.
 - i. Any matter referred by a member organization or body shall be considered upon an affirmation vote of the council.
- (3) The council shall advise the professional and business entities represented and act as liaison between them and the department.
- (4) The council shall perform other functions as may be provided by state or federal law or regulation.
- (5) Pursuant to 2016 Iowa Act, ch. 1139, sec. 94, the council shall regularly review Medicaid managed care. The council shall submit an executive summary of pertinent information regarding deliberations during the prior year relating to Medicaid managed care to the department of human services no later than November 15, annually.
- (6) Pursuant to 2016 Iowa Acts, ch. 1139, sec. 94, the council shall submit to the chairpersons and ranking members of the human resources committees of the senate and house of representatives and to the chairpersons and ranking members of the joint appropriations subcommittee on health and human services, on a quarterly basis, minutes of the council meetings during which the council addressed Medicaid managed care.
- (7) Review the recommendations submitted by the executive committee regarding feedback received at the IA Health Link statewide public comment meetings outlined in 2016 Iowa Acts, ch. 1139, sec. 94.

c. Executive Committee

- (1) Executive committee meetings
 - i. The executive committee shall meet no more often than monthly.
 - ii. Meetings may be called by the chairperson or co-chairperson, upon written request of at least 50 percent of executive committee members, or by the director of the department of human services.
 - iii. Meetings shall be held in the Des Moines, Iowa, area, unless other notification is given. Meetings will also be made available via teleconference, when available.
 - iv. In the month when a council meeting is held, the executive committee shall meet after the council meeting, allowing committee members to discuss and make recommendations based on the topics discussed by council members.
- (2) Based on the deliberations of the full council, the executive committee shall make recommendations to the director regarding budget, policy, and administration of the medical assistance program. Such recommendations may include:
 - i. Recommendations on the reimbursement for medical services rendered by providers of services.
 - ii. Identification of unmet medical needs and maintenance needs which affect health.
 - iii. Recommendations for objectives of the program and for methods of program analysis and evaluation, including utilization review.

iv. Recommendations for ways in which needed medical supplies and services can be made available most effectively and economically to the program recipients.

v. Advise on such administrative and fiscal matters as the director of the department of human services may request.

(3) Pursuant to 2016 Iowa Acts, ch. 1139, sec. 94, the executive committee shall review the compilation of the input and recommendations of the public meetings convened statewide and shall submit recommendations based upon the compilation to the director of human services on quarterly basis through December 31, 2017.

79.7(4) Procedures.

a. Procedures shall apply to both the council and the executive committee.

b. A quorum shall consist of 50 percent of the current voting members.

c. Where a quorum is present, a position is carried by two-thirds of the council members present.

d. Minutes of council meetings and other written materials developed by the council shall be distributed by the department to each member of the full council.

e. In cases not covered by these rules, Robert's Rules of Order shall govern.

79.7(5) Expenses, staff support, and technical assistance. Expenses of the council and executive committee, such as those for clerical services, mailing, telephone, and meeting place, shall be the responsibility of the department of human services. The department shall arrange for a meeting place, related services, and accommodations. The department shall provide staff support and independent technical assistance to the council and the executive committee.

a. The department shall provide the council with reports, data and proposed and final amendments to rules, laws, and guidelines, for its information, review and comment.

b. The department shall present the annual budget for the medical assistance program for review and comment.

c. The department shall permit staff members to appear before the council to review and discuss specific information and problems.

d. The department shall maintain a current list of members on the council and executive committee.

e. The department shall be responsible for the organization of all council and executive committee meetings and notice of meetings.

f. As required in Iowa Code Section 21.3, minutes of the meetings of the council and executive committee will be kept by the department. The chair and co-chairperson will review minutes before distribution.

g. The department shall compile input and recommendations received at the public meetings established in 2016 Iowa Acts, ch. 1139, sec. 94 and submit the information to the executive committee for review.

[**ARC 8263B**, IAB XX/X/XX, effective XX/XX/XX]

C.F.R. §160.103 for the purpose of recipient case resolution. When providing assistance and advocacy services under this section, the office of long-term care ombudsman shall act as an independent agency, and the office of long-term care ombudsman and representatives of the office shall be free of any undue influence that restrains the ability of the office or the office's representatives from providing such services and assistance. The office of long-term care ombudsman shall adopt rules applicable to long-term care ombudsmen providing assistance and advocacy services under this section to authorize such ombudsmen to function in a manner consistent with long-term care ombudsmen under the federal Act.

MEDICAL ASSISTANCE ADVISORY COUNCIL

Sec. 99. Section 249A.4B, Code 2016, is amended to read as follows:

249A.4B Medical assistance advisory council.

1. A medical assistance advisory council is created to comply with 42 C.F.R. §431.12 based on section 1902(a)(4) of the federal Social Security Act and to advise the director about health and medical care services under the medical assistance program. The council shall meet no more than quarterly. The director of public health and a public member of the council selected by the public members of the council specified in subsection 2, paragraph "b", shall serve as chairperson co-chairpersons of the council.

2. The council shall include all of the following voting members:

a. The president, or the president's representative, of each of the following professional or business entities, or a member of each of the following professional or business entities, selected by the entity:

- (1) The Iowa medical society.
- (2) The Iowa osteopathic medical association.
- (3) The Iowa academy of family physicians.
- (4) The Iowa chapter of the American academy of pediatrics.
- (5) The Iowa physical therapy association.
- (6) The Iowa dental association.
- (7) The Iowa nurses association.
- (8) The Iowa pharmacy association.

- (9) The Iowa podiatric medical society.
- (10) The Iowa optometric association.
- (11) The Iowa association of community providers.
- (12) The Iowa psychological association.
- (13) The Iowa psychiatric society.
- (14) The Iowa chapter of the national association of social workers.
- (15) The coalition for family and children's services in Iowa.
- (16) The Iowa hospital association.
- (17) The Iowa association of rural health clinics.
- (18) The Iowa primary care association.
- (19) Free clinics of Iowa.
- (20) The opticians' association of Iowa, inc.
- (21) The Iowa association of hearing health professionals.
- (22) The Iowa speech and hearing association.
- (23) The Iowa health care association.
- (24) The Iowa association of area agencies on aging.
- (25) AARP.
- (26) The Iowa caregivers association.
- (27) The Iowa coalition of home and community-based services for seniors.
- (28) The Iowa adult day services association.
- (29) Leading age Iowa.
- (30) The Iowa association for home care.
- (31) The Iowa council of health care centers.
- (32) The Iowa physician assistant society.
- (33) The Iowa association of nurse practitioners.
- (34) The Iowa nurse practitioner society.
- (35) The Iowa occupational therapy association.
- (36) The ARC of Iowa, formerly known as the association for retarded citizens of Iowa.
- (37) The national alliance for the mentally ill of Iowa on mental illness.
- (38) The Iowa state association of counties.
- (39) The Iowa developmental disabilities council.
- (40) The Iowa chiropractic society.
- (41) The Iowa academy of nutrition and dietetics.
- (42) The Iowa behavioral health association.

(43) The midwest association for medical equipment services or an affiliated Iowa organization.

~~b. Public Ten public~~ representatives which may include members of consumer groups, including recipients of medical assistance or their families, consumer organizations, and others, ~~equal in number to the number of representatives of the professional and business entities specifically represented under paragraph "a",~~ appointed by the governor for staggered terms of two years each, none of whom shall be members of, or practitioners of, or have a pecuniary interest in any of the professional or business entities specifically represented under paragraph "a", and a majority of whom shall be current or former recipients of medical assistance or members of the families of current or former recipients.

c. A member of the hawk-i board created in section 514I.5, selected by the members of the hawk-i board.

3. The council shall include all of the following nonvoting members:

~~e. a.~~ a. The director of public health, or the director's designee.

~~d. b.~~ b. The director of the department on aging, or the director's designee.

c. The long-term care ombudsman, or the long-term care ombudsman's designee.

~~e. d.~~ d. The dean of Des Moines university — osteopathic medical center, or the dean's designee.

~~f. e.~~ e. The dean of the university of Iowa college of medicine, or the dean's designee.

~~g. f.~~ f. The following members of the general assembly, each for a term of two years as provided in [section 69.16B](#):

(1) Two members of the house of representatives, one appointed by the speaker of the house of representatives and one appointed by the minority leader of the house of representatives from their respective parties.

(2) Two members of the senate, one appointed by the president of the senate after consultation with the majority leader of the senate and one appointed by the minority leader of the senate.

~~3.~~ 4. a. An executive committee of the council is created

and shall consist of the following members of the council:

(1) Five of the professional or business entity members designated pursuant to [subsection 2](#), paragraph "a", and selected by the members specified under that paragraph, as voting members.

(2) Five of the public members appointed pursuant to subsection 2, paragraph "b", and selected by the members specified under that paragraph, as voting members. Of the five public members, at least one member shall be a recipient of medical assistance.

(3) The director of public health, or the director's designee, as a nonvoting member.

b. The executive committee shall meet on a monthly basis. The director of public health and the public member serving as co-chairperson of the council shall serve as ~~chairperson~~ co-chairpersons of the executive committee.

c. Based upon the deliberations of the council and the executive committee, the executive committee shall make recommendations to the director regarding the budget, policy, and administration of the medical assistance program.

~~4.~~ 5. For each council meeting, other than those held during the time the general assembly is in session, each legislative member of the council shall be reimbursed for actual travel and other necessary expenses and shall receive a per diem as specified in [section 7E.6](#) for each day in attendance, as shall the members of the council or the executive committee who are recipients or the family members of recipients of medical assistance, regardless of whether the general assembly is in session.

~~5.~~ 6. The department shall provide staff support and independent technical assistance to the council and the executive committee.

~~6.~~ 7. The director shall consider the recommendations offered by the council and the executive committee in the director's preparation of medical assistance budget recommendations to the council on human services pursuant to section 217.3 and in implementation of medical assistance program policies.

Sec. 100. APPOINTMENT OF PUBLIC REPRESENTATIVES TO

MEDICAL ASSISTANCE ADVISORY COUNCIL — 2016. The director of human services shall make recommendations to the governor for appointment of public representatives to the medical assistance advisory council pursuant to section 249A.4B, subsection 1, paragraph "b", in order to fill all public representative positions on the council no later than June 30, 2016.

Sec. 101. EFFECTIVE UPON ENACTMENT. The following provision of this division of this Act, being deemed of immediate importance, takes effect upon enactment:

1. The section of this division of this Act directing the appointment of public representatives to the medical assistance advisory council no later than June 30, 2016.

CONTINUATION OF STATEWIDE PUBLIC MEETINGS

Sec. 102. 2015 Iowa Acts, chapter 137, section 63, is amended to read as follows:

SEC. 63. HEALTH POLICY OVERSIGHT — MEDICAID MANAGED CARE.

1. The department of human services shall partner with appropriate stakeholders to convene monthly statewide public meetings beginning in March 2016, and bi-monthly statewide public meetings beginning March 2017 and continuing through December 31, 2017, to receive input and recommendations from stakeholders and members of the public regarding Medicaid managed care, ~~beginning in March 2016.~~ The meetings shall be held in both rural and urban areas, in small communities and large population centers, and in a manner that is geographically balanced. The department shall encourage representatives of Medicaid managed care organizations to attend the public meetings. The input and recommendations of the public meetings shall be compiled by the department of human services and submitted to the executive committee of the medical assistance advisory council created in section 249A.4B.

2. a. The executive committee of the medical assistance advisory council shall review the compilation of the input and recommendations of the public meetings convened pursuant to subsection 1, and shall submit recommendations based upon the compilation to the director of human services on a quarterly basis through December 31, 2017.

b. The director of human services shall submit the compilation and the recommendations made under paragraph "a" to the legislative health policy oversight committee created in [section 2.45](#) through December 31, 2017.

Sec. 103. EFFECTIVE UPON ENACTMENT. The sections of this division of this Act amending 2015 Iowa Acts, chapter 137, section 63, being deemed of immediate importance, takes effect upon enactment.

HAWK-I PROGRAM

Sec. 104. Section 514I.5, subsection 8, paragraph d, Code 2016, is amended by adding the following new subparagraph:

NEW SUBPARAGRAPH. (17) Occupational therapy.

Sec. 105. Section 514I.5, Code 2016, is amended by adding the following new subsection:

NEW SUBSECTION. 10. The hawk-i board shall monitor the capacity of Medicaid managed care organizations to specifically and appropriately address the unique needs of children and children's health delivery.

DIVISION XXIII

FOOD PROGRAM

Sec. 106. IOWA EMERGENCY FOOD PURCHASE PROGRAM. There is appropriated from the general fund of the state to the department of agriculture and land stewardship for the fiscal year beginning July 1, 2016, and ending June 30, 2017, the following amount, or so much thereof as is necessary, to be used for the purpose designated:

1. For purposes of supporting an Iowa emergency food purchase program:

..... \$ 100,000

2. The purpose of the Iowa emergency food purchase program is to relieve situations of emergency experienced by families or individuals who reside in this state, including low-income families and individuals and unemployed families and individuals, by distributing food to those persons.

3. The Iowa emergency food purchase program shall be managed by an Iowa food bank association selected by the department. The department may enter into a contract with the Iowa food bank association. The Iowa food bank association managing the program shall distribute food under the program



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TO: Iowa Department of Human Services
CC: Centers for Medicare and Medicaid Services
FROM: Deanna Clingan-Fischer, State Long-Term Care Ombudsman
SUBJECT: Managed Care Ombudsman Program Monthly Report for July 2016
DATE: Wednesday, August 10, 2016

The Office of the State Long-Term Care Ombudsman is required by the Centers for Medicare and Medicaid Services (CMS) to report data from the Managed Care Ombudsman Program on a monthly basis. Attached is the July 2016 Report.

The Managed Care Ombudsman Program serves Medicaid managed care members receiving care in a health care facility as well as members enrolled in one of the seven home and community-based services (HCBS) waivers which include AIDS/HIV, Brain Injury, Children's Mental Health, Elderly, Health and Disability, Intellectual Disability, and Physical Disability Waiver Programs.

Contacts and Main Issues

During the month of July, the Managed Care Ombudsman Program received 81 member contacts through phone and email. This number does not reflect the total contacts received from all stakeholders including providers as this report only discusses member-specific issues.

Oftentimes, multiple issues were addressed in one call with a member. The top three issues addressed were Access to preferred/necessary durable medical equipment, Change in care setting, and Service reduced, denied or terminated.

Medicaid Program

Most calls were related to the Elderly Waiver, the Iowa Health and Wellness Plan, and the Intellectual Disability Waiver. However, many contacts received were reported as "unknown" since the Managed Care Ombudsman was unable to verify the caller's Medicaid program.

Resolution Time

On average, it took six days to resolve an issue. Oftentimes, issues required the Managed Care Ombudsman to obtain additional information from another agency or organization necessary to resolve the issue. Therefore, the resolution time includes the time it took for those agencies and organizations to respond to the Managed Care Ombudsman with the necessary information.

Additional information can be found in the attached July 2016 Report. For further information, please contact the Office of the State Long-Term Care Ombudsman Legislative Liaison Lynzey Kenworthy at lynzey.kenworthy@iowa.gov.



Managed Care Ombudsman Program Monthly Report

Per CMS Special Terms and Conditions, the monthly Managed Care Ombudsman Program data is provided below.

DATE: 07/2016

Number of Contacts¹		81
Contact Categories²		
Access to Services/Benefits	Access to preferred/necessary durable medical equipment	18
	Access to preferred/necessary medication	1
	Prior authorization	6
	Provider/pharmacy/hospital not in network	3
	Service reduced, denied or terminated	16
	Transition services/coverage inadequate or inaccessible	4
	Transportation not available, timely or adequate	-
	Other service/coverage gap issue	-
	Other	-
Billing	Member charged improper cost sharing	6
	Other	6
Care Planning	Access to information or information sharing	-
	Care planning participation	-
	Change in care setting	17
	Discharge	4
	Level of care assessment	-
	Other	-
Customer Service	Care coordinator/case manager was rude or gave poor customer service	3
	MCO was rude or gave poor customer service	7
	Member has not received MCO card or other materials	-
	Provider/pharmacy was rude or gave poor customer service	-
	Scheduling	-
	Other	-
Eligibility	Member has lost eligibility status or was denied	5
	Member needs assistance with acquiring Medicaid eligibility information	4
	Member needs assistance with checking on application status	-
	Other	-
Enrollment	Disenrollment from MCO – good cause eligible	2
	Disenrollment from MCO – not good cause eligible	-
	Disenrollment from Medicaid program	-
	Selecting/changing MCO	3
	Other	-
Guardianship	Guardian not receiving information	-
	Guardianship documents not on file	-
	Unable to contact guardian	-
	Other	-
Other		3
N/A		5
Contacts Related to Grievances/ Appeals/Fair Hearings³	Grievances	1
	Appeals	13
	Fair Hearings	2
Contacts per MCO⁴	Amerigroup Iowa	16
	AmeriHealth Caritas	27
	UnitedHealthcare Plan of the River Valley	17

Program ⁵	AIDS/HIV Waiver	-
	Brain Injury Waiver	-
	Children's Mental Health Waiver	9
	Dental	-
	Duals	-
	Elderly Waiver	27
	Fee for Service	-
	Habilitation	-
	Health & Disability Waiver	3
	HIPP	-
	Institutional Care	4
	Iowa Health & Wellness	11
	Intellectual Disability Waiver	10
	Medicare	-
	PACE	1
	Physical Disability Waiver	-
	QMB or SLMB	-
	Other	-
N/A	2	
Unknown	10	
Average Resolution Time ⁶		6
Average Number of Entities Required for Resolution ⁷		1
Referrals per Entity ⁸	Department of Human Services	4
	Department of Inspections and Appeals	-
	Disability Rights Iowa	-
	Iowa Legal Aid	-
	Lifelong Links	1
	MCO	-
	Medicaid Fraud Control Unit	-
	Provider	-
	Senior Health Insurance Information Program	-
	State Ombudsman Office	2
Other	1	
Service(s) Provided to Contact ⁹	Grievance assistance	-
	Appeals assistance	-
	Fair hearing assistance	-
	Advocacy	20
	Education and information	16
	Investigation	26
	Outreach	-
	Referral	8
	Other	-
N/A	-	
Service(s) Provided to Stakeholders ¹⁰	Community education	3
	Information and consultation	31
	Technical assistance	8
	Training	-

¹Number of Contacts: Total Number of contacts received via phone and email.

²Contact Categories: Reason contact was made to the program. "Other" is used for issues not listed. "N/A" is used for issues unknown.

³Contacts Related to Grievances/Appeals/Fair Hearings: Contacts concerning filing or filed grievances/appeals/fair hearings.

⁴Contacts per MCO: Contacts received regarding the respective MCO.

⁵Program: Type of program discussed during the contact. "Other" is used for programs beyond those captured in this report. "N/A" is used when the contact inquires about unrelated programs/issues. "Unknown" is used when the contact does not know the program they are enrolled with/inquiring about.

⁶Average Resolution Time: Average number of days required for resolution.

⁷Average Number of Entities Required for Resolution: Average number of entities required to resolve the issue.

⁸Referrals Made to Entities: Referrals made to external organizations that provide services beyond the scope of the program.

⁹Services Provided to Contact: Services provided to the contact who may be the member, family member or their authorized representative

¹⁰Services Provided to Stakeholder(s): Service provided to stakeholders including but not limited to community organizations, advocacy organizations, and MCOs.

Note: Total Number of Contacts may not equal total number of issues identified under Contact Categories due to the identification of multiple issues during one contact.



Managed Care Ombudsman Program Quarterly Report

1st Quarter - April/May/June 2016

EXECUTIVE SUMMARY

On April 1, 2016, Iowa launched the IA Health Link program, a new Medicaid managed care program that coordinates physical health, behavioral health, and long-term services and supports (LTSS) for most Medicaid members. The Office of the State Long-Term Care Ombudsman (OSLTCO) developed and currently administers the Managed Care Ombudsman Program to advocate for Medicaid managed care members who receive care in a health care facility, assisted living program or elder group home, or are enrolled in one of the seven home and community-based services (HCBS) waiver programs, which include:

- AIDS/HIV Waiver
- Brain Injury Waiver
- Children's Mental Health Waiver
- Elderly Waiver
- Health and Disability Waiver
- Intellectual Disability Waiver
- Physical Disability Waiver

The Managed Care Ombudsman Program provides various services including education and information regarding managed care plans, services, care and processes, advocacy and outreach on behalf of members, and appeals assistance and complaint resolution for members needing assistance with resolving issues with their managed care plan or navigating the managed care system.

This report provides an update on the following items for the first programmatic quarter (April, May and June 2016):

- 1st Quarter Overview
- Systemic Trends
- Community Partnerships and Outreach
- Managed Care Ombudsman Program Administrative Update

QUARTERLY OVERVIEW

The Managed Care Ombudsman Program is required to track issues on a monthly basis. For analysis purposes, this report provides a high-level overview of the data aggregated over the three months of April, May and June 2016.

Contacts

The Managed Care Ombudsman is available by telephone, email and mail; however, most contacts made to the program are received via telephone. The total number of contacts fluctuates among months for various reasons, such as the approach of a deadline for members to change their managed care organization (MCO) without cause or the issuance of materials by Iowa Medicaid Enterprise (IME) that are difficult for members to understand.

Top Issues

There are nine major issue categories that the program tracks on a monthly basis (please refer to the Monthly Report for the categories). Each major category has subcategories that further define the issue. The most prevalent issues addressed during this quarter included:

- Access to Services/Benefits
- Eligibility
- Care Planning

Average Resolution Time

The resolution time begins when the Managed Care Ombudsman receives the issue and ends when the issue is resolved. The average resolution time is calculated each month by adding the resolution time for each issue together and dividing by the total number of issues handled that month. Oftentimes, the Managed Care Ombudsman must work with other agencies or organizations (i.e., IME, the member's MCO, the Office of the State Long-Term Care Ombudsman) to resolve the issue.

Consumer concerns became increasingly complex as the quarter progressed, requiring the Ombudsman to devote more time to the many calls received.

Program

Within the first quarter, the majority of calls received came from members enrolled or inquiring about the Elderly Waiver program or the Intellectual Disability Waiver program. The program also received several contacts it reported as Unknown (due to the inability to verify a member's waiver enrollment) or N/A (if the caller was a member of a waiver program not included in the populations served by the Managed Care Ombudsman).

A new Medicaid member was not receiving her Elderly Waiver Services in a timely manner. Once her services were arranged, a specific provider was not available to help the member during a week where she needed assistance.

The Managed Care Ombudsman worked with the member to identify the specific tasks that she needed assistance with, approximately how much time it would take a worker to complete the tasks, and what days and times worked best with the member's schedule that week. The Managed Care Ombudsman then contacted the MCO and advocated for the member's requests. The MCO was able to provide a worker with the member's preferences.

Grievances/Appeals/Fair Hearings

The Managed Care Ombudsman Program attempts to resolve issues informally in effort to expedite issue resolution. For Quarter 1, the Managed Care Ombudsman Program received 1 contact regarding a grievance and 7 regarding an appeal. There have been no contacts regarding a fair hearing during this quarter.

The table below shows a side-by-side comparison of the data discussed:

Month	Number of Contacts	Top Three Issues	Average Resolution Time	Program	Contacts per MCO	Contacts Related to Grievances/Appeals/Fair Hearings
April	143	1. Care coordinator/ case manager 2. Access to services/benefits 3. Eligibility	5 days	1. Unknown 2. Health & Disability 3. Elderly	Amerigroup = 20 AmeriHealth = 18 United = 30	Grievances = 0 Appeals = 0 Fair Hearings = 0
May	89	1. Access to services/benefits 2. Customer service 3. Care planning	4 days	1. Elderly 2. Intellectual Disability 3. N/A, Unknown	Amerigroup = 16 AmeriHealth = 35 United = 25	Grievances = 0 Appeals = 5 Fair Hearings = 0
June	107	1. Access to services/benefits 2. Care planning 3. Eligibility	7 days	1. Elderly 2. Intellectual Disability 3. IA Health & Wellness	Amerigroup = 21 AmeriHealth = 39 United = 24	Grievances = 1 Appeals = 2 Fair Hearings = 0
Qtr 1 Total	339	1. Access to services/benefits 2. Care planning 3. Eligibility		1. Elderly 2. Intellectual Disability 3. Unknown	Amerigroup = 57 AmeriHealth = 92 United = 79	Grievances = 1 Appeals = 7 Fair Hearings = 0

TABLE 1: QUARTER 1 CONTACT DATA (APRIL, MAY, JUNE 2016)

SYSTEMIC TRENDS

In addition to tracking monthly member issues, the Managed Care Ombudsman Program documents and tracks systemic trends brought to the attention of the office. The following discusses the systemic trends identified:

PRIOR TO APRIL 1:

November 2015 – February 2016

- Members reported that their MCO selections were not being recorded at IME
- IME Member Services call center wait times up to 2 hours
- Members who are unable to speak and who had a guardian that was not accessible had a challenging time or were unable to actively select their MCO
- Members did not understand letters received from IME

March 2016

- Provider directories were inconsistent between IME and MCOs

FOLLOWING APRIL 1 GO-LIVE DATE:

April 2016

- Members were denied access to their providers at Mayo due to out of network
- Lag time of three to six months for members being able to access waiver services from date of approved eligibility by IME
- MCO case managers were not knowledgeable about nursing facility protocol or federal requirements or had no experience in long-term care facilities prior to serving their members in a long-term care facility
- Case managers demanded member records from long-term care facility administrators. Such records are typically expected to be purchased from the facility.

May 2016

- Providers received delayed reimbursement or no reimbursement at all
- Lag time of three to six months for members being able to access waiver services from date of approved eligibility by IME continued
- Providers advocated on behalf of their members by calling the Managed Care Ombudsman
- Members communicated that their new MCO case manager pressured them to sign up with new MCO case manager thus breaching the 6 month contractual obligation allowing for member choice

June 2016

- Lag time of three to six months for members being able to access waiver services from date of approved eligibility by IME continued
- Providers advocated on behalf of their members by continuing to call the Managed Care Ombudsman
- Providers continued to receive delayed reimbursement or no reimbursement at all

A Medicaid member with high needs was "dumped" at a local emergency room by his home and community-based provider, who refused to take him back. He was moved to an inpatient room, despite being an inappropriate placement, while the hospital determined next steps through the MCO and those involved in the member's care.

An appeal was filed while the member had been in the hospital for 25 days with no response from the MCO. The Managed Care Ombudsman was notified of the appeal and connected with the MCO. With the partnership between the MCO, the Managed Care Ombudsman and those involved in the member's care, he was able to move to appropriate placement within two weeks of the appeal submission.

COMMUNITY PARTNERSHIPS AND OUTREACH

Advocacy is more than complaint resolution or assistance with filing a grievance, appeal or fair hearing. It includes providing education, information, consultation, technical assistance or making a referral to the appropriate entity to ensure members have the information needed to make informed decisions regarding their care and partnering with community stakeholders to connect members to resources beyond the Managed Care Ombudsman’s programmatic scope.

The Managed Care Ombudsman Program has built a network with other advocacy and provider groups, associations, organizations and agencies to coordinate the provision of assistance to members. The Managed Care Ombudsman Program also participates in various forums and workgroups on a regular basis to inform discussion and to address collective concerns expressed when possible.

The Managed Care Ombudsman Program has presented at various workgroups and forums and distributed program materials. The table below identifies programmatic outreach efforts and total number of communication materials distributed (please note, April represents a combined total of materials distributed during the months of March and April 2016):

Month	Presentations	Brochures	Bookmarks
April	10	9,055	7,554
May	7	969	415
June	2	36	11
Qtr 1 Total	19	10,060	7,980

TABLE 2: QUARTER 1 OUTREACH DATA (APRIL, MAY, JUNE 2016)

Additionally, the Managed Care Ombudsman Program maintains a website with information regarding the program’s services, informational materials and links to other resources. Electronic versions of our communications materials and tools can be found on our website at <https://www.iowaaging.gov/long-term-care-ombudsman/managed-care-ombudsman>.

ADMINISTRATIVE UPDATE

The Office of the State Long-Term Care Ombudsman will serve on the Medical Assistance Advisory Council (MAAC) per 2016 legislation to provide the unique perspective gained through daily interactions with the members the office serves, as well as interactions among the State, MCOs and many other stakeholder organizations. The Managed Care Ombudsman will continue to advocate on behalf of Medicaid managed care members and remain a responsive resource to individuals needing assistance.

If interested in staying connected to the program to receive updates on managed and deadline reminders, please send an email to managedcareombudsman@iowa.gov indicating your interest to stay in touch. You will then be added to the distribution list.



Jessie Parker Building
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Des Moines, IA 50319
www.iowaaging.gov

866.236.1430

ManagedCareOmbudsman@iowa.gov



IA Health Link 2016 Public Comment Meeting

March 2016 – July 2016

The Medical Assistance Advisory Council (MAAC) has held public comment meetings to gather feedback and concerns of persons, communities, and organizations impacted by Iowa Medicaid's transition to the IA Health Link managed care program. Meetings were held once per month in 10 different locations throughout Iowa and representatives from Iowa Medicaid, the Department of Human Services, and the three Managed Care Organizations (MCOs) were present to assist with specific comments. Each meeting was held in the afternoon to allow for public transportation availability, and held at the end of the work day. The length of each meeting was two hours and consisted of a 10 minute update from the Department with an overview of the IA Health Link program, initiative goals, and relevant information updates. The remainder of meetings were open for comment by members, providers, stakeholders, and the public. The following information has been collected at meetings between the dates of March 1, 2016, and July 31, 2016, and is categorized by general issue.*

Case Management

Prior to implementation, members and providers had expressed concern regarding whether the member would be able to select their case managers and who they would contact within each Managed Care Organization (MCO) for assistance. Following implementation, it was affirmed that members were not being contacted by their case managers and that Long Term Care facilities were spending extended periods of time explaining patient information to MCO Case Managers. Providers were unsure of the necessity of Case Managers as care facilities already employed the use of social workers.

Prior Authorization

The MCOs require more Prior Authorizations (PAs) than were required before implementation. Providers inquired who to contact at each of the MCOs for PA assistance to expedite PA requests and stated that additional PAs were requiring additional time from staff.

MCO Enrollment and Provider Networks

Members were not receiving their enrollment packets in the weeks leading to implementation and were concerned about not receiving their MCO member ID cards prior to April 1, 2016. Providers that were outside of the member's MCO provider network created uncertainty in patient responsibility for billing, and whether the member would be able to continue seeing their out-of-network providers. Some providers had chosen not to contract with any of the three MCOs and communities were worried that it may negatively impact patient care as well as limit the number of available providers.

**Comments reflect observations of MAAC Executive Committee members present at meetings: Cindy Baddeloo, Kate Gainer, Shelly Chandler, Anthony Carroll, Kristie Oliver, Gerd Clabaugh, Jim Cushing, Paula Connolly, Dennis Tibben, and Sara Allen.*



Floor Rates

Floor rates established by the Department of Human Services were said to be less than what the providers had actually been receiving; the decreased floor rates impacted MCO reimbursement.

Waiver Services/ HIPP Members

Members in the Health Insurance Premium Payment Program (HIPP) were unsure of whether they would be enrolling in an MCO or if they would remain Fee-for-Service (FFS). In the event of a member's approval for waiver services, a Notice of Decision was not received until they were enrolled with an MCO. Providers were unsure of how to obtain a Notice of Decision, how to bill appropriately, and who to bill during the transition period.

Claims/Billing

Providers stated that they were unsure of how Medicare cross-over claims were being processed and when the process would be automated. It was stated that providers were unsure of how to bill for members out of their MCOs network, and they were not sure who to contact for assistance. Claims denials had to be resubmitted on multiple occasions which had been time consuming and claims had gone unpaid for several weeks.

Non-Emergency Medical Transportation (NEMT)

In comparison to NEMT services prior to implementation, there were less NEMT providers and not enough for members in the area. The fewer number of available NEMT providers created extended wait times prior to- and following- appointments, tardiness due to delay in arrival, and the cancellation of appointments.

MCO Communication(Terminology/ Translations/ MCO Phone Numbers

Providers contacted MCOs and had not received return calls or they had been transferred to multiple departments without resolution. MCO call center Customer Service Representatives (CSRs) had also given inaccurate information to both members and providers. Authorized individual information had not transferred to the MCOs and authorized persons were having to call the IME as well as the MCOs on multiple occasions. In communications to members, the terminology used by each MCO differed and had been confusing for members. There was further concern in the difficulty in obtaining translated materials for Spanish speaking families and members were unaware of important information.

Additional Comments

The remainder of collective comments focused primarily on the positive outcomes of the transition and improvements seen from both the member and provider perspectives such as greater access to care and continual improvements from each of the three MCOs.



APPENDIX A
IA Health Link Public Comment Meeting Schedule and Attendance
March 2016 – July 2016

Meeting Date	Meeting Time	Meeting Location	Location Details	Number of Attendees
March 22, 2016	3 p.m. – 5 p.m.	Mason City	Historic Park Inn, Ballroom 15 W. State Street Mason City, IA 50401	37
April 12, 2016	3 p.m. – 5 p.m.	Burlington	Pzazz Convention and Event Center, Hall B 3001 Winegard Dr. Burlington, IA 52601	35
May 10, 2016	3 p.m. – 5 p.m.	Dubuque	Grand River Center Meeting Room #2 500 Bell St. Dubuque, IA 52001	80
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	30
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	32
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	



APPENDIX B Frequently Asked Questions March 2016 – July 2016

The following frequently asked questions were posed by consumers, providers, and stakeholders at the five public comment meetings held between the dates of March 1, 2016, and July 31, 2016. All questions have been addressed by Iowa Medicaid Member Services, Iowa Medicaid Provider Services, the Department of Human Services, representatives from each of the three Managed Care Organizations (MCOs), as well as the IA Health Link Managed Care Bureau as appropriate.

Out-of-Network Providers

- Have any of the MCOs contracted with Mayo and will out-of-network appointments be covered? Are members required to pay the difference?
- In the event of an emergency, what if the hospital is not in the member's MCO provider network?

Case Management

- What is the case manager's case load and when will case managers be contacting members? Does the case manager determine a patient's Level of Care?
- What is the difference between a case manager and a community-based case manager?

Prior Authorizations

- Are Prior Authorizations (PAs) required every time a member needs Durable Medical Equipment (DME)?
- If providers submit PAs, will the provider receive a fax if they get approved?
- What are the turnaround times for Prior Authorization approvals/denials?
- If the provider has waited the standard number of days to receive a PA and has not yet received approval/denial, should they continue to give care to the member?

Third Party Liability and Medicare Crossover Claims

- How are Medicare/Medicaid crossover claims processed? Is this an automated process and if not, when will the process be automated?



Member Services

- Are members required to have both cards when they see their providers, or do they just need their MCO ID card? When do members receive their MCO ID cards?
- If services for a patient are not covered through the hospital, will the patient's Long Term Care facility be responsible for the charges?
- There was a document stating providers could not allow clients to use their phone, fax, or other office supplies to find out their MCO information. Where can members go to get the information if they need assistance?
- Who should be called for demographic changes?

Prescriptions and Durable Medical Equipment (DME)

- How do providers know the member's quantity and timeframe eligibility for DME products and supplies?

Member Eligibility

- How can providers determine member eligibility? Is the Iowa Medicaid Enterprise (IME) going to maintain their database of member eligibility?
- When should I contact the IME and when should I contact the MCOs?

MAAC

- What authority does the Medical Assistance Advisory Council (MAAC) have?
- How does the MAAC oversee this program?
- Where can I find information regarding the MAAC?

MCO Contracting

- If a provider has not received information on the process of their credentialing with an MCO, will their credentialing be retroactive, and will the provider receive the out-of-network rate during this time?

Billing and Claims

- Will there be reports regarding denials?



MAAC Executive Committee Voting Ballot

Only ballots for voting members of the council will be counted. Complete both sides of the ballot.

Name: _____

Professional Entity/Membership: _____

Professional and Business Entities

*Please **select FIVE (5)** from the list below. Mark **X** next to your selection. Please note that choices for these categories **continue on page 2** of the ballot.*

Professional or Business Entity	Representative	Vote
Hospitals		
Iowa Hospital Association	Sara Allen	
Pharmacies		
Iowa Pharmacy Association	Kate Gainer	
Physicians		
Iowa Academy of Family Physicians	Dave Carlyle	
Iowa Association of Rural Health Clinics	Ed Friedmann	
Iowa Chapter of the American Academy of Pediatrics	Tom Scholz	
Iowa Medical Society	Dennis Tibben	
Iowa Osteopathic Medical Association	Leah McWilliams	
Iowa Physician Assistant Society	Penny Osborn	
Iowa Primary Care Association	Aaron Todd	
Specialty Providers		
Free Clinics of Iowa	Wendy Gray	
Iowa Academy of Nutrition and Dietetics	Patricia Hildebrand	
Iowa Adult Day Services Association	Maria Jordan	
Iowa Association of Hearing Health Professionals	Bev Thomas	
Iowa Association of Nurse Practitioners	Janine Petitgout	
Iowa Behavioral Health Association	Janet Zwick	
Iowa Caregivers Association	Maribel Slinde	
Iowa Chapter of the National Association of Social Workers	Denise Rathman	
Iowa Chiropractic Society	Molly Lopez	
Iowa Council of Health Care Centers	George Appleby	
Iowa Dental Association	Larry Carl	
Iowa Nurses Association	Judith Collins	
Iowa Nurse Practitioner Society	Sherry Buske	
Iowa Optometric Association	Gary Ellis	
Iowa Occupational Therapy Association	Leanne O'Brien	
Iowa Physical Therapy Association	Matt Eide	
Iowa Podiatric Medical Society	Kevin Kruse	
Iowa Psychiatric Society	Karen Loihl	
Iowa Psychological Association	Dave Beeman	
Iowa Speech-Language-Hearing Association	Barbara Nebel	
Iowa State Association of Counties	Deb Eckerman Slack	
Midwest Association of Medical Equipment Suppliers	Terry Flatt	
(Professional and Business Entities Continue on page 2)		

Professional and Business Entities Continued

Professional or Business Entity	Representative	Vote
Long Term Care and Home and Community-Based Services Providers		
Iowa Alliance in Home Care	Dan Royer	
Iowa Association for Area Agencies on Aging	Jim Cushing	
Iowa Association of Community Providers	Shelly Chandler	
Iowa Health Care Association	Cindy Baddeloo	
Leading Age Iowa	Matt Blake	
Advocacy Groups		
AARP	Anthony Carroll	
ARC of Iowa	Doug Cunningham	
Coalition for Family and Children’s Services in Iowa	Kristie Oliver	
Iowa Developmental Disabilities Council	Richard Shannon	

Public Members

Please select FIVE (5) from the list below. Mark X next to your selection.

Public Members	Vote
Lori Allen	
Richard Crouch	
Marsha Fisher	
Julie Fugenschuh	
David Hudson	
Brandi Jensen (Brain Injury Alliance of Iowa)	
Tom Ryan	
David Selmon	
Jodi Tomlonovic (Family Planning Council)	

Co-Chairperson

Please select ONE (1) from the list below. Mark X next to your selection.

The co-chairperson must be a public member. The co-chairperson must also be one of the five Public Members selected to participate on the Executive Committee.

Public Members	Vote
Lori Allen	
Richard Crouch	
Marsha Fisher	
Julie Fugenschuh	
David Hudson	
Brandi Jensen (Brain Injury Alliance of Iowa)	
Tom Ryan	
David Selmon	
Jodi Tomlonovic (Family Planning Council)	

Disclaimer: Professional and business entities with vacancies are not listed for voting. Those entities include:

- *National Alliance on Mental Illness*
- *Iowa Coalition of Home and Community-Based Services for Seniors*
- *Opticians Association of Iowa*



Iowa Department of Human Services

Medical Assistance Advisory Council MAAC

Mikki Stier, Medicaid Director

Medical Assistance Advisory Council (MAAC) Member Biography

Last Name Allen	First Name Lori
Telephone 515-292-2597	Email bloggerlori@gmail.com

Please select your membership category:

- Professional Organization
 - Professional Entity
 - Business Entity
- Public Representative
 - Consumer Group
 - Recipient of Medicaid, or family member of Medicaid recipient
 - Consumer Organization
 - Other (please specify) _____
- hawk-i* Board
- Non-Voting
 - State Agency
 - Medical Institution
- General Assembly
 - House of Representatives
 - Senate
- LTSS Ombudsman

Name of entity, group, organization, member or other interested party whom you represent:

Please provide a brief biography regarding your background and interest in Iowa medical assistance (Approximately 300 words):

I am the parent of a dependent adult daughter with Down Syndrome; a professional advocate with ACCESS Assault Care Center; unplanned single parent, once unemployed, income insecure Iowa citizen. I have been advocating for people who do not have the understanding or ability - for a variety of reasons - to advocate for themselves.

SUBMIT



Iowa Department of Human Services

Medical Assistance Advisory Council MAAC

Mikki Stier, Medicaid Director

Medical Assistance Advisory Council (MAAC) Member Biography

Last Name Allen	First Name Sara
Telephone 515-288-1955	Email allens@ihaonline.org

Please select your membership category:

- Professional Organization
 - Professional Entity
 - Business Entity
- Public Representative
 - Consumer Group
 - Recipient of Medicaid, or family member of Medicaid recipient
 - Consumer Organization
 - Other (please specify) _____
- hawk-i* Board
- Non-Voting
 - State Agency
 - Medical Institution
- General Assembly
 - House of Representatives
 - Senate
- LTSS Ombudsman

Name of entity, group, organization, member or other interested party whom you represent:

Iowa Hospital Association

Please provide a brief biography regarding your background and interest in Iowa medical assistance (Approximately 300 words):

(Continued on following page)

SUBMIT

Sara Allen Biography (Continued)

The Iowa Hospital Association is extremely interested in continuing to participate in the Medical Assistance Advisory Council. IHA has served as a member of the executive committee since its inception. IHA represents all 118 hospitals in the state of Iowa, all of whom are Medicaid providers. As well as representing hospitals, IHA's member hospitals employ thousands of physicians, nurses, therapists, pharmacists and many other Medicaid providers. IHA brings institutional knowledge, along with Medicaid policy and payment knowledge, to the voice of the council. IHA is supportive of innovative transformation within the Medicaid program that seeks to bring about expanded access to health care services for Iowa's Medicaid population while preserving adequate payment for those services provided by Iowa's community hospitals. Sara Allen is the Iowa Hospital Association's designee for the Council. Allen has been with IHA for three years and her responsibilities cover state legislative and regulatory affairs.



Iowa Department of Human Services

Medical Assistance Advisory Council MAAC

Mikki Stier, Medicaid Director

Medical Assistance Advisory Council (MAAC) Member Biography

Last Name Baddeloo	First Name Cindy
Telephone 515-978-2204	Email cindy@iowahealthcare.org

Please select your membership category:

- Professional Organization
 - Professional Entity
 - Business Entity
- Public Representative
 - Consumer Group
 - Recipient of Medicaid, or family member of Medicaid recipient
 - Consumer Organization
 - Other (please specify) _____
- hawk-i* Board
- Non-Voting
 - State Agency
 - Medical Institution
- General Assembly
 - House of Representatives
 - Senate
- LTSS Ombudsman

Name of entity, group, organization, member or other interested party whom you represent:

Ia Health Care Association & Ia Society for Post-Acute & Long Term Care Medicine

Please provide a brief biography regarding your background and interest in Iowa medical assistance (Approximately 300 words):

(See following page)

SUBMIT

Cindy Baddeloo Biography (Continued)

Cindy Baddeloo, PhD, MPA, RN, is Senior VP & Chief Operating Officer for the Iowa Health Care Association and its divisions the Iowa Center for Assisted Living and Iowa Center for Home Care. Dr. Baddeloo has been with IHCA since 2001. In addition to association management, her 25-year career has included direct nursing care, health insurance management, health care policy with Iowa DHS Medicaid Long Term Care bureau, and Quality Improvement Organization program management.

She received her advanced degrees from Drake University and has professional designations in Managed Health Care Insurance and Gerontological Nursing. She currently serves on numerous state and national boards and coalitions and is the liaison to the National Center for Assisted Living, National Association Home Care & Hospice, and the American Medical Director's Association. Dr. Baddeloo also serves as the Executive Director for the Iowa Society for Post-Acute & Long Term Care Medicine (formerly the Iowa Medical Director's Association).

IHCA serves the long term services and supports profession as a nonprofit trade association. IHCA's 731 member organizations (nonprofit, proprietary and government-owned) span the continuum of long term services and supports. Its members include nursing and skilled rehabilitation facilities, assisted living programs, home health agencies, residential care facilities and senior independent living communities. IHCA member organizations annually serve more than 57,000 Iowans and employ nearly 29,000 people who provide quality care in home, post-acute and long term care settings. In these settings, IHCA members serve nearly 75 percent of the Iowan's who rely on medical assistance and Medicare. IHCA is dedicated to promoting quality long term services and supports through professional development and shaping public and private policy through effective advocacy, with a vision that Iowa's frail and elderly citizens are entitled to a supportive and ethical environment in which professional and compassionate care is delivered.



Iowa Department of Human Services

Medical Assistance Advisory Council MAAC

Mikki Stier, Medicaid Director

Medical Assistance Advisory Council (MAAC) Member Biography

Last Name Beeman	First Name David
Telephone 515-279-3033	Email david.beeman.phd@gmail.com

Please select your membership category:

- Professional Organization
 - Professional Entity
 - Business Entity
- Public Representative
 - Consumer Group
 - Recipient of Medicaid, or family member of Medicaid recipient
 - Consumer Organization
 - Other (please specify) _____
- hawk-i* Board
- Non-Voting
 - State Agency
 - Medical Institution
- General Assembly
 - House of Representatives
 - Senate
- LTSS Ombudsman

Name of entity, group, organization, member or other interested party whom you represent:

Iowa Psychological Association

Please provide a brief biography regarding your background and interest in Iowa medical assistance (Approximately 300 words):

(See following page)

SUBMIT

David Beeman Biography (Continued)

My undergraduate education (in psychology at Notre Dame) stressed community and public service, and an importance to serving the poor and underprivileged. Those values remain prominent for me. With the addition of a Ph.D. in psychology from Iowa State University in 1992, I was able to implement those values in my daily work as well. I have always considered my work with individuals with mental health conditions who are insured by Medicaid to be an ethical requirement. When asked to serve on the MAAC Council, I decided that doing so would continue and extend that valuable social service. As such, I see my role on the MAAC Council to not only be a conduit of information to my professional organization, but more importantly to advocate for the Medicaid population and for the role of the MAAC Council in providing guidance and support to the Department of Human Services. Given the circumstances of change over the past and coming year, I see that advocate role as imperative as indicated in the Federal and State Codes.



Iowa Department of Human Services

Medical Assistance Advisory Council MAAC

Mikki Stier, Medicaid Director

Medical Assistance Advisory Council (MAAC) Member Biography

Last Name Carl	First Name Larry
Telephone 515-331-2298	Email info@iowadental.org

Please select your membership category:

- Professional Organization
 - Professional Entity
 - Business Entity
- Public Representative
 - Consumer Group
 - Recipient of Medicaid, or family member of Medicaid recipient
 - Consumer Organization
 - Other (please specify) _____
- hawk-i* Board
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 - Medical Institution
- General Assembly
 - House of Representatives
 - Senate
- LTSS Ombudsman

Name of entity, group, organization, member or other interested party whom you represent:

Iowa Dental Association

Please provide a brief biography regarding your background and interest in Iowa medical assistance (Approximately 300 words):

(Continued on following page)

SUBMIT

Larry Carl Biography (Continued)

As Executive Director of the Iowa Dental Association, I've been designated as its representative for over 14 years.

Prior to the Iowa Dental Association, I was designated, for 6 years, as the MAAC representative for the Iowa Chiropractic Society.

Representing the dental profession and its patients in various public forums is part of what I do and prior to dentistry, the same was true for chiropractic physicians and their patients.



Iowa Department of Human Services

Medical Assistance Advisory Council MAAC

Mikki Stier, Medicaid Director

Medical Assistance Advisory Council (MAAC) Member Biography

Last Name Carroll	First Name Anthony
Telephone 515-707-2722 (cell)	Email acarroll@aarp.org

Please select your membership category:

- Professional Organization
 - Professional Entity
 - Business Entity
- Public Representative
 - Consumer Group
 - Recipient of Medicaid, or family member of Medicaid recipient
 - Consumer Organization
 - Other (please specify) _____
- hawk-i* Board
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 - House of Representatives
 - Senate
- LTSS Ombudsman

Name of entity, group, organization, member or other interested party whom you represent:

AARP

Please provide a brief biography regarding your background and interest in Iowa medical assistance (Approximately 300 words):

(See following page)

SUBMIT

Anthony Carroll Biography (Continued)

I have worked for AARP Iowa for 11 years. My AARP work has included various LTSS and health coverage work at the Capitol, including helping push for our Iowa Health and Wellness Medicaid Expansion plan. I've also served on several Medicaid workgroups, including a nursing home payment reform taskforce. I've been an active full MAAC member for AARP for several years and have been proud to serve on the Executive Council since May 2015. I take that job seriously, having missed only one monthly meeting, where I sent our AARP State Director to serve as my substitute. I've also attended nearly all of the public meetings to hear directly from the public. I endeavor, first, to be a good listener to the public, including our 375,000 Iowa members, as well as listening to and learning from other MAAC members and leaders. I'm not afraid to speak up, even at the risk of seeming stupid because you can never have all the answers in this complicated and evolving system. When I do speak, I seek to be productive. Raising issues is part of the job of the full MAAC and Executive Council. Being part of the solution to those issues we raise is just as high a priority for me and for I hope whoever ultimately serves on the Executive Council. I am committed to spending time and AARP resources where necessary to help elevate the work of this Council, especially as the Council role has been elevated with responsibilities. I have found this challenging, behind-the-scenes work, which may seem thankless to others, to be among the most rewarding work I do at AARP. I would like to continue to serve on the Executive Council. I will be an active voice for Iowa consumers on the MAAC regardless of this vote.



Iowa Department of Human Services

Medical Assistance Advisory Council MAAC

Mikki Stier, Medicaid Director

Medical Assistance Advisory Council (MAAC) Member Biography

Last Name Chandler	First Name Shelly
Telephone 515-270-9495	Email schandler@iowaproviders.org

Please select your membership category:

- Professional Organization
 - Professional Entity
 - Business Entity
- Public Representative
 - Consumer Group
 - Recipient of Medicaid, or family member of Medicaid recipient
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Name of entity, group, organization, member or other interested party whom you represent:

Iowa Association of Community Providers (IACP)

Please provide a brief biography regarding your background and interest in Iowa medical assistance (Approximately 300 words):

I was a provider of mental health and disability services for 25 years before taking on the role of CEO for IACP (10 years ago). As a provider and now representing IACP, our funding is 90% Medicaid LTSS. We carefully monitor, advocate for and are accountable for federal and state Medicaid rules, regulations and rates. The MAAC is an integral part of this process, critical to the successful implementation of high quality services to lowans supported by behavioral health and disability service providers.

SUBMIT



Iowa Department of Human Services

Medical Assistance Advisory Council MAAC

Mikki Stier, Medicaid Director

Medical Assistance Advisory Council (MAAC) Member Biography

Last Name Crouch	First Name Richard
Telephone Cell: 712-370-3903 Home:712-624-8933	Email brfarms@radiks.net

Please select your membership category:

- Professional Organization
 - Professional Entity
 - Business Entity
- Public Representative
 - Consumer Group
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Name of entity, group, organization, member or other interested party whom you represent:

Glenwood Parent Family Group (Current President)

Please provide a brief biography regarding your background and interest in Iowa medical assistance (Approximately 300 words):

(Continued on following page)

SUBMIT

Richard Crouch Biography (Continued)

Hi my is Richard Crouch. I am a life time resident of Mills County, Iowa. Farming is my main occupation for the past 50 years. My wife and I have raised four children; they all live locally. We have one grandchild.

My favorite pastime, when possible, is watching sporting events. I like them all, especially football. For the past 51 years I have worked the sideline as part of the chain crew at Glenwood High School. It is one way I felt I could give back to the community and help others.

One of the highlights of my support and out youth programs, was to put together a group of individuals to build a youth wrestling building for our community. It has been 15 years and the building and program are still going strong. We built it with the slogan, "If you build it they will come"

About 20 years ago my wife and I joined the Parent Family Group at the Glenwood Resource Center where our son Gary resides. In 2002 I elected to the Mills County Board of Supervisors. While serving on the board I was appointed to the Mental Health Board. From there, I became interested in what I could do for people less fortunate than others.

When the State said we had to regionalize I put together 9 counties in Southwest Iowa and presently serve as the chairman of the region. I have served for 6 years on the MHDS commission where we made new rules and regulations to better served our communities and residents.

I have worked with the Iowa State Association of Counties. I have presents to the Governor and to the Senate Hearing Committee on funding for Mental Health.

I feel as a parent of a mentally challenged child, the experiences I have had on the Mental Health Board and working with and serving on other commissions and committees both locally and state wide, that I will be an excellent membe3r of the MAAC board.



Iowa Department of Human Services

Medical Assistance Advisory Council MAAC

Mikki Stier, Medicaid Director

Medical Assistance Advisory Council (MAAC) Member Biography

Last Name Cushing	First Name Jim
Telephone 515-255-4004	Email jcushing@i4a.org

Please select your membership category:

- Professional Organization
 - Professional Entity
 - Business Entity
- Public Representative
 - Consumer Group
 - Recipient of Medicaid, or family member of Medicaid recipient
 - Consumer Organization
 - Other (please specify) _____
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 - Senate
- LTSS Ombudsman

Name of entity, group, organization, member or other interested party whom you represent:

Iowa Association of Area Agencies on Aging

Please provide a brief biography regarding your background and interest in Iowa medical assistance (Approximately 300 words):

(Continued on following page)

SUBMIT

Jim Cushing Biography (Continued)

The council has the ability to influence the development and sustainability of an integrated health and medical care system through oversight and recommendations; a system that should consider and benefit consumers, families, caregivers, providers, and taxpayers. Experience – caregiver since age 17, UnityPoint Home Health & Hospice plus hospital and clinic cross-continuum projects, Principal Financial Group, Wells Fargo, non-profit consultant; trained in process and system improvement. Demonstrated willingness to represent the interests and needs of all stakeholders; an advocate for those who cannot advocate for themselves.



Iowa Department of Human Services

Medical Assistance Advisory Council MAAC

Mikki Stier, Medicaid Director

Medical Assistance Advisory Council (MAAC) Member Biography

Last Name Eide	First Name Matt
Telephone 515-490-8559	Email mpeide@gmail.com

Please select your membership category:

- Professional Organization
 - Professional Entity
 - Business Entity
- Public Representative
 - Consumer Group
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 - Other (please specify) _____
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 - House of Representatives
 - Senate
- LTSS Ombudsman

Name of entity, group, organization, member or other interested party whom you represent:

Iowa Physical Therapy Association

Please provide a brief biography regarding your background and interest in Iowa medical assistance (Approximately 300 words):

I have represented the Iowa Physical Therapy Association (IPTA) since 2003. I represent the association before the Legislative and Executive branches.

IPTA members play a crucial role in Iowa's healthcare system and the association is pleased to be a statutory member of the MAAC. MAAC members can certainly contact me if they have questions related to physical therapy issues.

SUBMIT



Iowa Department of Human Services

Medical Assistance Advisory Council MAAC

Mikki Stier, Medicaid Director

Medical Assistance Advisory Council (MAAC) Member Biography

Last Name Fugenschuh	First Name Julie
Telephone 515-402-0668	Email julifugenschuh@projectiowa.org

Please select your membership category:

- Professional Organization
 - Professional Entity
 - Business Entity
- Public Representative
 - Consumer Group
 - Recipient of Medicaid, or family member of Medicaid recipient
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 - Other (please specify) _____
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Name of entity, group, organization, member or other interested party whom you represent:

Please provide a brief biography regarding your background and interest in Iowa medical assistance (Approximately 300 words):

(See following page)

SUBMIT

Julie Fugenschuh Biography (Continued)

I was born and raised in Des Moines. I have lived in the state and chosen to raise my children here. I am much invested in the community and making it the best place to live.

I have been involved with children and families from marginalized populations since beginning my adult career. I worked for Head Start with families living in poverty. I learned many things while working with Head Start families, mainly how resilient and resourceful they were.

I have also been a licensed foster/adoptive parent. I have adopted two children out of the foster care system. They have been a part of our family for the last 12 years.

I am currently the director of a non-profit here in town called Project IOWA. We work with the under and unemployed here in central Iowa to find livable wage careers.

Throughout my career and in my personal life as a mom I have been involved with the safety net programs that have been put in place to help the marginalized. I believe that all individuals need to be offered opportunities for access to affordable and adequate mental and physical healthcare needs.

I bring a unique perspective to this board as both a professional and consumer of the services.

Thank you for your consideration.



Iowa Department of Human Services

Medical Assistance Advisory Council MAAC

Mikki Stier, Medicaid Director

Medical Assistance Advisory Council (MAAC) Member Biography

Last Name Harbison	First Name Jennifer
Telephone 319-467-7094	Email jennifer-harbison@uiowa.edu

Please select your membership category:

- Professional Organization
 - Professional Entity
 - Business Entity
- Public Representative
 - Consumer Group
 - Recipient of Medicaid, or family member of Medicaid recipient
 - Consumer Organization
 - Other (please specify) _____
- hawk-i* Board
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 - Medical Institution
- General Assembly
 - House of Representatives
 - Senate
- LTSS Ombudsman

Name of entity, group, organization, member or other interested party whom you represent:

University of Iowa Health Care

Please provide a brief biography regarding your background and interest in Iowa medical assistance (Approximately 300 words):

My work is focused on state and federal issues for University of Iowa Hospitals & Clinics, University of Iowa Physicians, College of Medicine and our Health Science Colleges - Public Health, Nursing, Dentistry and Pharmacy.

SUBMIT



Iowa Department of Human Services

Medical Assistance Advisory Council MAAC

Mikki Stier, Medicaid Director

Medical Assistance Advisory Council (MAAC) Member Biography

Last Name Hildebrand	First Name Patricia
Telephone 515-865-4095	Email patriciajo46@gmail.com

Please select your membership category:

- Professional Organization
 - Professional Entity
 - Business Entity
- Public Representative
 - Consumer Group
 - Recipient of Medicaid, or family member of Medicaid recipient
 - Consumer Organization
 - Other (please specify) _____
- hawk-i* Board
- Non-Voting
 - State Agency
 - Medical Institution
- General Assembly
 - House of Representatives
 - Senate
- LTSS Ombudsman

Name of entity, group, organization, member or other interested party whom you represent:

Iowa Academy of Nutrition and Dietetics

Please provide a brief biography regarding your background and interest in Iowa medical assistance (Approximately 300 words):

I worked in Community Health Programs for approximately 30 years. I worked with the Iowa WIC Program for 28 years. I have been an advocate for health insurance for women and children the entire time. I was the nutrition advisor on the first hawk-i Clinical Advisory Committee.

SUBMIT



Iowa Department of Human Services

Medical Assistance Advisory Council MAAC

Mikki Stier, Medicaid Director

Medical Assistance Advisory Council (MAAC) Member Biography

Last Name Hudson	First Name David
Telephone 515-279-6641	Email dsmboy@hotmail.com

Please select your membership category:

- Professional Organization
 - Professional Entity
 - Business Entity
- Public Representative
 - Consumer Group
 - Recipient of Medicaid, or family member of Medicaid recipient
 - Consumer Organization
 - Other (please specify) _____
- hawk-i* Board
- Non-Voting
 - State Agency
 - Medical Institution
- General Assembly
 - House of Representatives
 - Senate
- LTSS Ombudsman

Name of entity, group, organization, member or other interested party whom you represent:

Matthew Hudson

Please provide a brief biography regarding your background and interest in Iowa medical assistance (Approximately 300 words):

(See following page)

SUBMIT

David Hudson Biography (Continued)

In 2004 my son, Matthew, suffered the effects of a ruptured arteriovenous malformation, including a bilateral stroke, leading to a craniotomy and a six-week stay at University Hospitals. He was transferred later to On With Life in Ankeny where he lived for 15 months before transitioning to our home. His brain injury has left him in a state of unresponsive wakefulness. He was placed on the ID waiver soon after his injury and for three years received nursing care 16 hours a day. Then we transitioned to the CCO and CDAC programs for Matt's care and supervision. For the past nine years my wife and I have taken care of our son through these two Medicaid programs.

I have a master's degree in public policy from Regent University. I worked in Iowa state government from 1986 to 1999 (Iowa Senate, Office of Drug Control Policy, Governor's Office, Department of Public Defense). I worked as an independent consultant from 2000 to 2010 focusing primarily on strategic planning and program development for government agencies and nonprofit entities. I have been an adjunct instructor at William Penn University since 1999.



Iowa Department of Human Services

Medical Assistance Advisory Council MAAC

Mikki Stier, Medicaid Director

Medical Assistance Advisory Council (MAAC) Member Biography

Last Name Kruse	First Name Kevin
Telephone 515-282-8192	Email ipms@ipms.org

Please select your membership category:

- Professional Organization
 - Professional Entity
 - Business Entity
- Public Representative
 - Consumer Group
 - Recipient of Medicaid, or family member of Medicaid recipient
 - Consumer Organization
 - Other (please specify) _____
- hawk-i* Board
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- General Assembly
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 - Senate
- LTSS Ombudsman

Name of entity, group, organization, member or other interested party whom you represent:

Iowa Podiatric Medical Society

Please provide a brief biography regarding your background and interest in Iowa medical assistance (Approximately 300 words):

I have served as the executive director of the Iowa Podiatric Medical Society for nearly 20 years. We represent podiatric physicians who are medical and surgical specialists, focusing upon the foot and ankle.

SUBMIT



Iowa Department of Human Services

Medical Assistance Advisory Council MAAC

Mikki Stier, Medicaid Director

Medical Assistance Advisory Council (MAAC) Member Biography

Last Name Loihl	First Name Karen
Telephone 515-633-0341	Email iowapsych@qwestoffice.net

Please select your membership category:

- Professional Organization
 - Professional Entity
 - Business Entity
- Public Representative
 - Consumer Group
 - Recipient of Medicaid, or family member of Medicaid recipient
 - Consumer Organization
 - Other (please specify) _____
- hawk-i* Board
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 - Medical Institution
- General Assembly
 - House of Representatives
 - Senate
- LTSS Ombudsman

Name of entity, group, organization, member or other interested party whom you represent:

Iowa Psychiatric Association

Please provide a brief biography regarding your background and interest in Iowa medical assistance (Approximately 300 words):

I have served as Executive Director of IPS for 16 years. IPS is an organization of approximately 180 psychiatrists across the state. Many of their patients require medical assistance.

SUBMIT



Iowa Department of Human Services

Medical Assistance Advisory Council MAAC

Mikki Stier, Medicaid Director

Medical Assistance Advisory Council (MAAC) Member Biography

Last Name McWilliams	First Name Leah
Telephone 515-283-0002	Email leah@ioma.org

Please select your membership category:

- Professional Organization
 - Professional Entity
 - Business Entity
- Public Representative
 - Consumer Group
 - Recipient of Medicaid, or family member of Medicaid recipient
 - Consumer Organization
 - Other (please specify) _____
- hawk-i* Board
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- General Assembly
 - House of Representatives
 - Senate
- LTSS Ombudsman

Name of entity, group, organization, member or other interested party whom you represent:

Iowa Osteopathic Medical Association

Please provide a brief biography regarding your background and interest in Iowa medical assistance (Approximately 300 words):

I am the executive director for the Association and the physician members of the Association have great interest in monitoring the activities of the Iowa Medicaid program in Iowa.

SUBMIT



Iowa Department of Human Services

Medical Assistance Advisory Council MAAC

Mikki Stier, Medicaid Director

Medical Assistance Advisory Council (MAAC) Member Biography

Last Name Nebel	First Name Barbara
Telephone 515-224-0979	Email barbnebel@mchsi.com

Please select your membership category:

- Professional Organization
 - Professional Entity
 - Business Entity
- Public Representative
 - Consumer Group
 - Recipient of Medicaid, or family member of Medicaid recipient
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Name of entity, group, organization, member or other interested party whom you represent:

Iowa Speech-Language-Hearing Association

Please provide a brief biography regarding your background and interest in Iowa medical assistance (Approximately 300 words):

(See following page)

SUBMIT

Barbara Nebel Biography (Continued)

Barbara L. Nebel, MA, CCC-SLP is the owner of Central Rehabilitation, Ltd in West Des Moines, Iowa. She graduated with her Bachelor of Arts in Communication Disorders from the University of Northern Iowa in May, 1983 and with her Master of Arts in Communication Disorders from the University of Northern Iowa in May, 1985. Mrs. Nebel received her Certificate of Clinical Competence from the American Speech-Language Hearing Association in 1986. She spent the first 2 years of her career practicing as a speech/language pathologist with Heartland Area Education Agency in Clear Lake, Iowa. Mrs. Nebel began her career at Central Rehabilitation in June, 1987 as a speech/language pathologist. She became Assistant Administrator with Central Rehabilitation in 1991 and Administrator of Children's Therapy Services, a now wholly owned subsidiary of Central Rehabilitation in 2001. Upon the retirement of the original owner, Mrs. Nebel became the owner of Central Rehabilitation in January, 2013.

Mrs. Nebel has been a member of the Iowa Speech Language Hearing Association and has served as Vice President of Medical, Clinical and Private Settings and as the Legislative Liaison. She has been a guest lecturer at Des Moines University providing lectures in Neurological Disorders, Dysphagia and Childhood Speech/Language Disorders.

As a practicing Speech/Language Pathologist Mrs. Nebel has provided direct habilitation and rehabilitation services with both pediatric and adult populations in hospitals, long term care facilities, daycare facilities and the clinical setting. Mrs. Nebel has special interests in the areas of Childhood Apraxia of Speech as well as articulation and receptive/expressive language disorders in the preschool population.



Iowa Department of Human Services

Medical Assistance Advisory Council MAAC

Mikki Stier, Medicaid Director

Medical Assistance Advisory Council (MAAC) Member Biography

Last Name Oliver	First Name Kristie
Telephone 515-244-0074 ext. 1	Email Kristie@iachild.org

Please select your membership category:

- Professional Organization
 - Professional Entity
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Name of entity, group, organization, member or other interested party whom you represent:

Coalition for Family & Children's Services in Iowa

Please provide a brief biography regarding your background and interest in Iowa medical assistance (Approximately 300 words):

(Continued on following page)

SUBMIT

Kristie Oliver Biography (Continued)

Kristie Oliver has been the Executive Director of the Coalition for Family & Children's Services in Iowa since March 2009. She has worked in the health care field (senior living to child and family services) for much of her professional life. An attorney, Ms. Oliver has a Bachelor of Arts degree from the University of Iowa and a Juris Doctorate from Drake University.

Kristie's first professional position was as an Assistant State's Attorney in Rock Island County. With an opportunity to move back to Des Moines, Kristie accepted a position at Life Care Services (LCS), the largest management company of nonprofit long-term care and senior living communities. At LCS, she enriched her skills at reading and interpreting federal and state laws and regulations. This steered to an opportunity as Vice President, Government Relations/Member Services at the Iowa Association of Homes & Services for the Aging (now Leading Age). At that position, she served as legislative liaison and staff attorney and enhanced her skills in Medicare and Medicaid laws and regulations.

At her current position as Executive Director of the Coalition for Family & Children's Services in Iowa, she developed the organization into a respected statewide association of child and family services agencies that provide the vast majority of child welfare, juvenile justice, and children's mental health services in Iowa. The Coalition for Family & Children's Services Mission is to influence and shape policy and practice for the betterment of Iowa children and families and the organizations that serve them. We envision this by a true public/private partnership providing Iowa's at-risk children and their families an array of fully funded, quality, outcome-based services.

She has family members with behavioral health disorders and that has provided her with an understanding of the needs of persons with mental illness and a passion for ensuring that services are available to them.



Iowa Department of Human Services

Medical Assistance Advisory Council MAAC

Mikki Stier, Medicaid Director

Medical Assistance Advisory Council (MAAC) Member Biography

Last Name Osborn	First Name Penny
Telephone	Email posborn5450@yahoo.com

Please select your membership category:

- Professional Organization
 - Professional Entity
 - Business Entity
- Public Representative
 - Consumer Group
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Name of entity, group, organization, member or other interested party whom you represent:

Please provide a brief biography regarding your background and interest in Iowa medical assistance (Approximately 300 words):

I have served the underserved in Iowa since my youth in a variety of ways. I was a National Health Service Scholar and did my service in Iowa in Titonka and Wesley. I have volunteered at free clinics for years. I have also done some out of the United States and interstate Missions. I am also on the Iowa PA Board as an appointee of the governor.

SUBMIT



Iowa Department of Human Services

Medical Assistance Advisory Council MAAC

Mikki Stier, Medicaid Director

Medical Assistance Advisory Council (MAAC) Member Biography

Last Name Petitgout	First Name Janine
Telephone 319-384-5928	Email janine-petitgout@uiowa.edu

Please select your membership category:

- Professional Organization
 - Professional Entity
 - Business Entity
- Public Representative
 - Consumer Group
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 - Medical Institution
- General Assembly
 - House of Representatives
 - Senate
- LTSS Ombudsman

Name of entity, group, organization, member or other interested party whom you represent:

Iowa Association of Nurse Practitioners

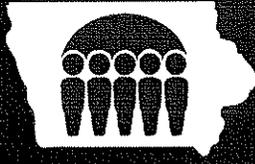
Please provide a brief biography regarding your background and interest in Iowa medical assistance (Approximately 300 words):

(Continued on following page)

SUBMIT

Janine Petitgout Biography (Continued)

Janine Petitgout is the Director of the Continuity of Care Program at the University of Iowa Children's Hospital. Janine developed this program for identification and implementation of a new approach to care coordination in 2001. Ensuring pediatric patients with special health care needs are being assessed and properly connected to help achieve the greatest success when transitioning from hospital to home has been her focus over the past several years. This family centered service within the University of Iowa Children's hospital offers support and advocacy for families by providing extensive care coordination through collaboration with multiple providers and community resources. Janine has been actively involved at both the local and state level and likes to focus her attention on always trying to improve the care coordination system for children and this includes collaborating with the Iowa Medical Assistance programs. Under Janine's leadership, more than 5,000 patients have benefited from this specialized care coordination program.



Iowa Department of Human Services

Medical Assistance Advisory Council MAAC

Mikki Stier, Medicaid Director

Medical Assistance Advisory Council (MAAC) Member Biography

Last Name Ryan	First Name Tom
Telephone 641-425-8853	Email tryan50401@mchsi.com

Please select your membership category:

- Professional Organization
 - Professional Entity
 - Business Entity
- Public Representative
 - Consumer Group
 - Recipient of Medicaid, or family member of Medicaid recipient
 - Consumer Organization
 - Other (please specify) _____
- hawk-i* Board
- Non-Voting
 - State Agency
 - Medical Institution
- General Assembly
 - House of Representatives
 - Senate
- LTSS Ombudsman

Name of entity, group, organization, member or other interested party whom you represent:

Iowa Association of Community Providers (IACP)

Please provide a brief biography regarding your background and interest in Iowa medical assistance (Approximately 300 words):

(Continued on following page)

SUBMIT

Tom Ryan Biography (Continued)

I taught middle school science and math for 30 years. I now spend most of my time volunteering at SHIP, Hospice, Oakwood Care Center, The Renew Center of Mason City part of Wellsource, and Good Shepherd Care Center. I am advocating on behalf of our mentally disabled son and also on behalf of all the other lowans who are unable to speak for themselves on the Medicaid Mess. The Renew center that provides services, for people who struggle with mental illness. A great number of the people at this setting, have no one to advocate for them, and opening mail on a daily basis, let alone understanding what it says, is too much for them. In my work with SHIP, I am seeing distressed individuals that have "no clue" as to what is happening to them b/c of the change-over to MCOs. However, most of these clients have now been switched to the 2 MCOs that have contracts in our area. But, I am also hearing from providers that are having to borrow money to meet payroll because of the poor time frame. Duncan Heights a care facility for mentally challenged had to close their doors. Where do these people go? I see a great need for change in how we view mentally disabled people and give them the support they deserve!



Iowa Department of Human Services

Medical Assistance Advisory Council MAAC

Mikki Stier, Medicaid Director

Medical Assistance Advisory Council (MAAC) Member Biography

Last Name Scholz	First Name Tom
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Please select your membership category:

- Professional Organization
 - Professional Entity
 - Business Entity
- Public Representative
 - Consumer Group
 - Recipient of Medicaid, or family member of Medicaid recipient
 - Consumer Organization
 - Other (please specify) _____
- hawk-i* Board
- Non-Voting
 - State Agency
 - Medical Institution
- General Assembly
 - House of Representatives
 - Senate
- LTSS Ombudsman

Name of entity, group, organization, member or other interested party whom you represent:

University of Iowa Department of Pediatrics, Division of Child and Community Health and Child Health Specialty Clinics



Please provide a brief biography regarding your background and interest in Iowa medical assistance (Approximately 300 words):

(Continued on following page)

SUBMIT

Tom Scholz Biography (Continued)

Thomas D. Scholz, M.D., received his B.S. degree from Swarthmore College, Swarthmore, Pennsylvania, in 1981, and his medical degree from Washington Univ. School of Medicine, St. Louis, Missouri, in 1985. He trained in pediatrics and pediatric cardiology at The University of Iowa from 1985-1991, and served as a research associate in Cardiac Energetics at National Institutes of Health, Bethesda, Maryland, between 1991-1993. Dr. Scholz has been at The University of Iowa since 1993. He has served in numerous leadership roles including Interim Chair of the Department of Pediatrics 2010-2012. He currently serves as Director, Division of Child and Community Health, and Professor, Department of Pediatrics where he oversees grants and contracts totaling close to \$10 million per year to support care coordination and services for children and youth with special health care needs.



Iowa Department of Human Services

Medical Assistance Advisory Council MAAC

Mikki Stier, Medicaid Director

Medical Assistance Advisory Council (MAAC) Member Biography

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Please select your membership category:

- Professional Organization
 - Professional Entity
 - Business Entity
- Public Representative
 - Consumer Group
 - Recipient of Medicaid, or family member of Medicaid recipient
 - Consumer Organization
 - Other (please specify) _____
- hawk-i* Board
- Non-Voting
 - State Agency
 - Medical Institution
- General Assembly
 - House of Representatives
 - Senate
- LTSS Ombudsman

Name of entity, group, organization, member or other interested party whom you represent:

Parent Partner Coordinator

Please provide a brief biography regarding your background and interest in Iowa medical assistance (Approximately 300 words):

SUBMIT



Iowa Department of Human Services

Medical Assistance Advisory Council MAAC

Mikki Stier, Medicaid Director

Medical Assistance Advisory Council (MAAC) Member Biography

Last Name Shannon	First Name Richard
Telephone 515-288-0443	Email rshanno1@dhs.state.ia.us

Please select your membership category:

- Professional Organization
 - Professional Entity
 - Business Entity
- Public Representative
 - Consumer Group
 - Recipient of Medicaid, or family member of Medicaid recipient
 - Consumer Organization
 - Other (please specify) Disability Advocacy Organization
- hawk-i* Board
- Non-Voting
 - State Agency
 - Medical Institution
- General Assembly
 - House of Representatives
 - Senate
- LTSS Ombudsman

Name of entity, group, organization, member or other interested party whom you represent:

Iowa Developmental Disability Council

Please provide a brief biography regarding your background and interest in Iowa medical assistance (Approximately 300 words):

(Continued on following page)

SUBMIT

Richard Shannon Biography (Continued)

Rik Shannon joined the Iowa Developmental Disabilities Council in June 1997 as a public policy and program planner, with over 20 years of experience in human services and disability. He works with the Council in the areas of planning, policy development and mobilizing constituency response to issues that affect the ability of Iowans with disabilities and their families to live independently in the communities of their choice. Shannon also manages the Council's Iowans with Disabilities in Action (ID Action) project, a non-partisan initiative designed to increase the active participation of Iowans with disabilities in political and civic opportunities that promote positive change.



Iowa Department of Human Services

Medical Assistance Advisory Council MAAC

Mikki Stier, Medicaid Director

Medical Assistance Advisory Council (MAAC) Member Biography

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Telephone 515-988-5642	Email skslinde@q.com

Please select your membership category:

- Professional Organization
 - Professional Entity
 - Business Entity
- Public Representative
 - Consumer Group
 - Recipient of Medicaid, or family member of Medicaid recipient
 - Consumer Organization
 - Other (please specify) _____
- hawk-i* Board
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 - House of Representatives
 - Senate
- LTSS Ombudsman

Name of entity, group, organization, member or other interested party whom you represent:

Iowa CareGivers

Please provide a brief biography regarding your background and interest in Iowa medical assistance (Approximately 300 words):

I am the current Chair of Iowa CareGivers BOD. Through the organizational role of advocacy, education, training and research we support members of the direct care health workforce. At the same time, inadequate long-term staffing leads to problems for consumers as they try to access quality health care. I have worked in the field of long-term care for over 30 years and continue to be concerned with health care access for all Iowans but particularly those who are assigned to MCO's.

SUBMIT



Iowa Department of Human Services

Medical Assistance Advisory Council MAAC

Mikki Stier, Medicaid Director

Medical Assistance Advisory Council (MAAC) Member Biography

Last Name Tibben	First Name Dennis
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Please select your membership category:

- Professional Organization
 - Professional Entity
 - Business Entity
- Public Representative
 - Consumer Group
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 - Consumer Organization
 - Other (please specify) _____
- hawk-i* Board
- Non-Voting
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 - Medical Institution
- General Assembly
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Name of entity, group, organization, member or other interested party whom you represent:

Parent Partner Coordinator

Please provide a brief biography regarding your background and interest in Iowa medical assistance (Approximately 300 words):

(Continued on following page)

SUBMIT

Dennis Tibben Biography (Continued)

Dennis Tibben is the Director of Government Affairs for the Iowa Medical Society. The largest, statewide organization representing physicians of every specialty throughout our state, IMS works to assure the highest quality health care in Iowa through our role as physician and patient advocate. Dennis has been with IMS for the past five years, serving as the Medicaid program liaison, and on both the MAAC and the MAAC Executive Committee. During this time, Dennis has been closely involved in the development and implementation of significant Medicaid reforms including the State Innovation Model (SIM), the Iowa Health and Wellness Plan, and most recently the IA Health Link program. In 2013, Dennis played a central role in working with the Attorney General's Office, the Department of Human Services, and other key stakeholders to modernize Iowa's Medicaid fraud, waste, and abuse statute to ensure appropriate use of taxpayer funds while avoiding undue administrative burdens and inappropriate penalties for Iowa providers. Dennis has been involved in state government and politics for more than ten years. Prior to joining IMS, he served in various capacities including as a legislative assistant in the Iowa Senate and as Correspondence and Judicial Appointments Coordinator in the Iowa Governor's Office. He received his bachelor's degree in Political Science, with an emphasis in American Government, from Iowa State University and his Master of Public Administration, with an emphasis in Public Policy, from Drake University.



Iowa Department of Human Services

Medical Assistance Advisory Council MAAC

Mikki Stier, Medicaid Director

Medical Assistance Advisory Council (MAAC) Member Biography

Last Name Tomlonovic	First Name Cecilia (Jodi)
Telephone 515-288-9028	Email jtomlonovic@fpcouncil.com

Please select your membership category:

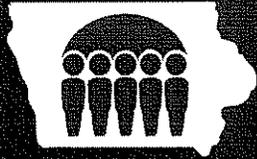
- Professional Organization
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Name of entity, group, organization, member or other interested party whom you represent:

Please provide a brief biography regarding your background and interest in Iowa medical assistance (Approximately 300 words):

My background is in assuring access to reproductive health care, especially family planning services, and women's health. Family planning services are important to IA Medicaid members. The services help with maternal health, reduce low birth weight babies and infant mortality. I'm also interested in assuring access to overall health care for Iowa's population.

SUBMIT



Iowa Department of Human Services

Medical Assistance Advisory Council MAAC

Mikki Stier, Medicaid Director

Medical Assistance Advisory Council (MAAC) Member Biography

Last Name Zwick	First Name Janet
Telephone 515-309-3315	Email janetzwick@aol.com

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 - Senate
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Name of entity, group, organization, member or other interested party whom you represent:

Iowa Behavioral Health Association (IBHA)

Please provide a brief biography regarding your background and interest in Iowa medical assistance (Approximately 300 words):

(Continued on following page)

SUBMIT

Janet Zwick Biography (Continued)

I am currently the Acting Director of the Iowa Behavioral Health Association (IBHA). I have been involved in the Behavioral Health field for more than 30 years. I retired from the Iowa Department of Public Health (IDPH) as Deputy Director and Director of the Division of Behavioral Health in 2007. As the Director of the Division of Behavioral Health I worked closely with the Department of Human Services and Medicaid during the implementation of the Magellan Behavioral Health contract and was responsible for the IDPH portion of that contract. Since my retirement I have continued my interest in behavioral health through private consulting in Iowa and on a national level. IBHA is a non-profit organization made up of member agencies that provide behavioral health prevention and treatment services throughout the state of Iowa. IBHA's mission is: Better Behavioral Health through Education, Prevention, Treatment and Advocacy. Training Resources, a division of IBHA, provides valuable and comprehensive event planning and conference management services to a wide range of clients.