



**Iowa Marketplace Choice Quarterly Report  
1115 Demonstration Waiver  
January 1, 2015 – March 31, 2015**

**May 4, 2015**

## Table of Contents

<b>I. EXECUTIVE SUMMARY .....</b>	<b>3</b>
<b>II. SIGNIFICANT ACTIVITIES OF THE QUARTER .....</b>	<b>4</b>
1. Legislative Developments .....	4
2. Stakeholder Concerns .....	4
<b>III. ELIGIBILITY/ENROLLMENT .....</b>	<b>4</b>
1. Quarterly Enrollment .....	4
2. Special Population Groups .....	5
<b>IV. ACCESS/DELIVERY .....</b>	<b>5</b>
1. Network Adequacy .....	5
2. Service Delivery .....	5
<b>V. COMPLAINTS/GRIEVANCES/APPEALS .....</b>	<b>5</b>
1. Complaints/Grievances .....	5
2. Other Complaints/Exceptions to Policy and Appeals .....	6
<b>VI. BUDGET NEUTRALITY/FISCAL ISSUES .....</b>	<b>6</b>
<b>VII. OTHER ACTIVITIES .....</b>	<b>6</b>
1. Dental Wellness Plan .....	6
2. Healthy Behaviors Program and Premium Monitoring .....	6
3. Evaluation Design .....	6
4. Department of Corrections Enrollment Process .....	6
<b>VIII. ADDITIONAL INFORMATION .....</b>	<b>7</b>
<b>ATTACHMENTS .....</b>	<b>8</b>

## I. EXECUTIVE SUMMARY

The Iowa Health and Wellness Plan (IHAWP) became effective on January 1, 2014, as the state's approach to expand Medicaid under the Patient Protection and Affordable Care Act (ACA). The IHAWP is comprised of two distinct 1115 waiver programs. Individuals are eligible for a program based on status relative to the Federal Poverty Level (FPL):

1. The Iowa Wellness Plan (IWP) – Covers individuals ages 19 through 64 with income up to 100 percent of the FPL. In this plan, coverage is administered directly through the state Medicaid agency, the Iowa Medicaid Enterprise (IME).
2. The Iowa Marketplace Choice Plan (MPC) – Also covers ages 19 through 64, but with income from 101 percent of the FPL up to 133 percent of the FPL. This plan employs premium assistance to purchase qualified health plans (QHP) from the Healthcare Marketplace established under the ACA. Members may select to receive coverage through a QHP, Coventry Health Care of Iowa (Coventry), or through the Iowa Wellness plan.

The IHAWP contains an incentive program that is intended to improve the use of preventive services and other healthy behaviors. Beginning year two of the IHAWP program, monthly premiums for enrollees with incomes between 50 percent and 133 percent of the FPL were imposed. Premiums were waived if members completed all behaviors during year one. For each subsequent year, members will have the opportunity to complete healthy behaviors and continue to have their premiums waived for the next enrollment period. During the first quarter of 2015, the IME worked on finalizing a process to monitor premium related activities.

The IME continued to work with CMS for technical assistance and guidance on meeting requirements of the Special Terms and Conditions (STCs) for both plans. During first quarter 2015, the IME continued to face challenges with the administration of the IHAWP while accomplishing several key activities:

- Additional communication to IHAWP members about healthy behaviors and the premium contribution process;
- Provider outreach and targeted ACO communications;
- Finalization of the Healthy Behaviors Evaluation Design; and
- Statewide implementation of the Department of Corrections enrollment process for offenders in institutions.

Following this letter is a detailed report of key activities and statistics for the first quarter of 2015 consistent with the STCs. Do not hesitate to contact me at 515-256-4644 or [jlovela@dhs.state.ia.us](mailto:jlovela@dhs.state.ia.us), or Deanna Jones at 515-256-4652 or [djones1@dhs.state.ia.us](mailto:djones1@dhs.state.ia.us) should you have any questions about this report or any other aspects of the new programs.

Sincerely,

Julie Lovelady  
Interim Director  
Iowa Medicaid Enterprise

## II. SIGNIFICANT ACTIVITIES OF THE QUARTER

### 1. Legislative Developments

There were no legislative related activities during the first quarter 2015. The most recent IHAWP administrative rules can be accessed at:

<https://www.legis.iowa.gov/docs/ACO/chapter/04-15-2015.441.74.pdf>

### 2. Stakeholder Concerns

In January 2015, Coventry Health Care of Iowa (Coventry) informed the state that it was facing financial burdens with the MPC members for which it was providing services and was considering discontinuing services to this population. Coventry and the IME made an attempt to resolve this issue by working together to identify potentially medically exempt members. Previously, Coventry had made only 35 medically exempt referrals for MPC members. Through a medical records review process of MPC members, Coventry was able to identify over 300 members who met the medically exempt status. Based on these findings, Coventry decided to continue to provide services to the members they were serving; however, Coventry and the state agreed that Coventry would no longer receive new members. Part of the reason for this decision was due to the state's decision to move the state's Medicaid program to a managed care model.

## III. ELIGIBILITY/ENROLLMENT

### 1. Quarterly Enrollment

Over the first quarter, the overall IHAWP population increased by 7 percent for an ending total of 128,786. The MPC component increased over the quarter by 8 percent with an ending total of 32,255. At the end of March, enrollment for Coventry totaled 9,739; the remaining MPC members were enrolled in the IWP.

Monthly enrollment totals of the IHAWP population are shown below.

Plan/Coverage Group	January	February	March
Marketplace Choice	29,678	30,815	32,255
Wellness	89,499	92,172	95,811
Presumptive IHAWP*	938	890	720
Total	120,115	123,877	128,786

\*Presumptive IHAWP – Members are defaulted to the Wellness Plan until plan/provider assignments are established.

MPC enrollment totals by county can be found at:

[http://dhs.iowa.gov/sites/default/files/IHAWPEnrollmentMaps\\_March2015.pdf](http://dhs.iowa.gov/sites/default/files/IHAWPEnrollmentMaps_March2015.pdf)

## 2. Special Population Groups

The state identifies specific population groups enrolled in the IHAWP to ensure their health care needs are met in accordance with the STCs. These groups are comprised of: (1) Nineteen and twenty year-olds, (2) American Indian/Alaskan Natives, and (3) the medically exempt (frail). Below are MPC enrollment totals for these groups at the end of first quarter 2015.

Population Group	January	February	March
19-20 Year-old	806	860	931
American Indian/Alaskan Native	262	257	276
Medically Exempt	1,665	1,974	2,264
Total	2,733	3,091	3,471

## IV. ACCESS/DELIVERY

### 1. Network Adequacy

Access/Delivery – See Attachment 1 to view maps of Coventry’s network coverage as of April 2015.

### 2. Service Delivery

Federally Qualified Health Centers and Rural Health Clinics – See Attachment 2 for wrap payments made to these providers between July and December of 2014.

## V. COMPLAINTS/GRIEVANCES/APPEALS

### 1. Complaints/Grievances

IHAWP members have access to IME’s Member Services Call Center to express their questions or concerns about the program. During first quarter, the IME received a low number of complaints with the majority consisting of basic questions about MPC benefits. Call Center representatives were able to resolve all issues with members during the calls. A summary of these complaints is provided below.

Complaint Type	January	February	March
Benefits and Services	5	11	13
Access	0	1	0
Substance Abuse/Mental Health Access	0	0	0
Quality of Care	0	0	0
Medical Provider Network	0	0	0

Premiums and Cost Sharing	0	6	0
Healthy Behaviors	2	13	0
Non-emergency Medical Transportation	0	0	0
EPSDT Services	1	0	0

## **2. Other Complaints/Exceptions to Policy and Appeals**

Coventry received one complaint from a member about monthly premium contributions. Complaints about premiums are handled by the IME; therefore a Member Services representative contacted the member to resolve the issue.

Additionally, MPC members receiving services in the Iowa Wellness Plan requested 10 exceptions to Medicaid policy. See Attachment 3 for more details.

## **VI. Budget Neutrality/Fiscal Issues**

During first quarter, the state did not encounter any significant financial issues related to the MPC. See Attachment 4 for the actual number of member months for the IHAWP as of March 31, 2015.

## **VII. Other Activities**

### **1. Dental Wellness Plan**

During first quarter, there were no major events to report for the Dental Wellness Plan (DWP). See Attachment 5 for a status report of the DWP as of March 23, 2015.

### **2. Healthy Behaviors Program and Premium Monitoring**

In accordance with the STCs, the state is required to monitor premiums after year one of the IHAWP program. This includes reporting data related to premium payment/non-payment for IHAWP members with incomes between 50 and 133 percent of the FPL. This information is contained in Attachment 6. See Attachment 7 for healthy behavior activities of IHAWP members as of March 31, 2015.

### **3. Evaluation Design**

During first quarter, the state submitted the first draft of the Healthy Behaviors Evaluation Design addendum. The state's evaluation team, the University of Iowa Public Policy Center, received guidance from CMS for finalization of the design requirements.

### **4. Department of Corrections Enrollment Process**

The DHS has partnered with the Department of Corrections (DOC) to pilot a streamlined enrollment process for offenders who transition from prison to the community. This new process ensures that an offender eligible for Medicaid benefits has access to coverage at the time of their release. The goal is to connect offenders to necessary health care, including mental health services to assist with reducing the recidivism rate. To date, the enrollment process has been successful for many offenders.

By the end of the first quarter of 2015, all state correctional institutions were participating in the pilot project, with corrections staff trained to assist with application completion and medically exempt forms.

**VIII. Additional Information**

Please contact Deanna Jones at 515-256-4652 or [djones1@dhs.state.ia.us](mailto:djones1@dhs.state.ia.us), if there are any other materials or suggestions CMS would like to see for IWP related activities during first quarter 2015 or future quarterly reports.

## **Attachments**

1. IHAWP Network Access Maps as of 12/1/14
2. MPC Wrap Payments
3. MPC Complaints, Appeals and Exceptions Report
4. Financial Reporting - IHAWP Member Months
5. Dental Wellness Plan Status Report
6. Premium Monitoring Report
7. Healthy Behaviors Activity Report