

Iowa Medicaid Enterprise



A Communications Effort to Strengthen Partnerships

Chester J. Culver, Governor
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Special points of interest:

- \$1 Million Planning Grant
- Better Access to Flu Shots
- National Disability Employment Awareness
- Medicaid Projections
- MAAC Meeting Held in Des Moines

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Iowa Medicaid Director's Column

Welcome to the second edition of the IME "Endeavors Update" Newsletter. If you did not receive the first edition, please view the archived newsletter on our website. We are interested in building the database of recipients so we welcome your suggestions about additional subscribers. Please contact us at: IMENewsletter@dhs.state.ia.us if you have suggestions. We are pleased to report that we received positive response to the initial newsletter. We appreciate the support from the Iowa Department of Pub-

lic Health to promote the publication with their audience and look forward to future endeavors together. In this edition of the newsletter you will learn about some of the recent efforts to make Medicaid more cost effective by moving away from paper and towards electronic Informational Letters to providers. Another cost savings measure in the news is electronic fund transfers (EFTs) for provider payments. We have a story about how we are increasing access and convenience to our members by reimbursing

pharmacists for giving flu shots. And we introduce to you some IME staff in their new roles. Thank you for your interest in Iowa Medicaid activities.

Jennifer Vermeer

Iowa Medicaid Director

Iowa Awarded \$1 Million for Health Benefit Exchange Planning

On September 30th the US Department of Health and Human Services awarded \$49 million to help 48 states and the District of Columbia for the planning phase of establishing health benefit exchanges. Iowa's multi-agency grant application for \$1 million for planning was successful. The Iowa Department of Public Health is the lead agency for the project. The Affordable Care Act re-

quires the state exchanges to establish an Exchange by January 1, 2014 or choose to join the federal government will operate the exchange for the state. When fully operational the Iowa Health Benefit Exchange will be a place where consumers (individuals and businesses) can go for "one-stop-shopping" to compare and choose insurance. According to Jennifer Steenblock, newly ap-

pointed IME Project Director for Implementation of the Affordable Care Act, "the planning grant will support a collaborative process for government agencies to work together and gain input from stakeholders in order to develop an implementation plan that is comprehensive, sustainable and is results driven."

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Steenblock Named Medicaid's Project Manager for ACA

Iowa Medicaid Director Jennifer Vermeer has named Jennifer Steenblock as Iowa Medicaid's Project Director for implementation of the Affordable Care Act. Steenblock will be responsible for coordinating all DHS efforts related to planning and implementation of the Medicaid expansion, which occurs on January

1, 2014. Vermeer said that "Jennifer will be well known by many of our stakeholders because of her over twenty years of experience with Iowa Medicaid programs including the ID Waiver, HCBS Waivers and, for the past 9 years, as the program manager for Nursing Facilities and other programs such as

the Medicaid Infrastructure Grant and the IME Medical Services Contract."

You can reach Steenblock at:

jsteenb@dhs.state.ia.us

Better Access to Preventative Care: Medicaid Now Reimburses Pharmacists for Giving Flu Shots

"Pharmacies have become a front-line provider for flu shots in Iowa Communities."

*Sally Nadolsky
IME Policy Staff*



According to the Centers for Disease Control annual epidemics of influenza occur typically during the late fall through early spring in the US and can cause serious illness or death in young children, the elderly and persons with medical conditions. Beginning on November 1st Iowa Medicaid will reimburse pharmacists for administering the flu shot to Medicaid members. Past policy was that Medicaid reimbursed for the dispensing but not the actual administration of the flu shot

or flu mist. In early August the CDC released their 2010 Recommendations on Immunization Practices and made several changes from last flu season, including the recommendation that all persons aged 6 months or older get vaccinated with the flu shot each year. In State Fiscal year 2010, Iowa Medicaid reimbursed 28,891 claims for flu shots. It is anticipated that this year there will be no increased cost for the expanded access through Pharmacies because this year only

one shot, rather than last year's two shots are recommended. The Medicaid reimbursement rates are \$5.30 for the flu shot and \$13.43 for the flu mist.

To learn more about the new CDC immunization policies you can visit their Vaccines & Immunizations website at:

<http://www.cdc.gov/vaccines/>

“Hello, This is Your Health Insurance Calling”

Iowa Medicaid is a partner in health and wellness with members. Two new programs are up and running to encourage positive steps towards healthy and productive lifestyles. The IME Member Services Disease Management and Maternity Management programs seek to help participants improve their quality of life as well as

reduce costly complications that can occur with chronic diseases and high risk pregnancies. The programs are run by registered nurses with clinical experience who act as Health Coaches. They contact members by phone in order to ask questions and provide support. Since July 2010 when the program was

expanded and refocused, the health coaches have answered nearly 8,000 inbound calls and made over 14,000 outbound calls. Education, assessments and care coordination are the cornerstones of this program. The program is free and voluntary for participants.



What is IMPA? A Tool for Providers

IMPA stands for the Iowa Medicaid Portal Access. This web-based tool is part of the IME effort to move away from paper and towards electronic processes. The functions of the IMPA system include “incident reporting” which gives providers and Case Managers the ability to report, track and monitor incidents in real time; “remittance advice” which gives providers the ability to view weekly remittance advice online

at their convenience; “presumptive eligibility” which gives certified providers the authority to temporarily establish Medicaid benefits for certain populations; and “subscription services” which will give providers the ability to sign up for certain types of correspondence, such as Informational Letters. Providers have been receiving notices throughout the year that the switch from paper to electronic com-

munications is coming and what steps they should take to be ready. Informational letters are always available on the IME website under the Provider tab marked Publications at the link below. December 1, 2010 marks the date after which all Informational Letters will be electronic.

“This is part of a larger effort to make Medicaid as responsive and cost effective as possible.”

*Julie Lovelady
Deputy Director*

<http://www.ime.state.ia.us/Providers/Bulletins.html>

Electronic Fund Transfers (EFTs) for Provider Payments

Another major component of the IME effort to move from paper to electronic formats is the move to Electronic Fund Transfers, or EFTs, for provider payments. Paper checks will become a thing of the past as Iowa Medicaid moves to electronic fund

transfers directly to bank accounts for payments to providers. Providers have been hearing about this transition throughout the year and the change occurred with the August 23, 2010 payment cycle. Providers who had not yet signed up for the EFT sys-

tem by August 9th were automatically issued a debit card for payment. A one-page EFT authorization (Form #470-4202) is posted on the IME Provider web page.





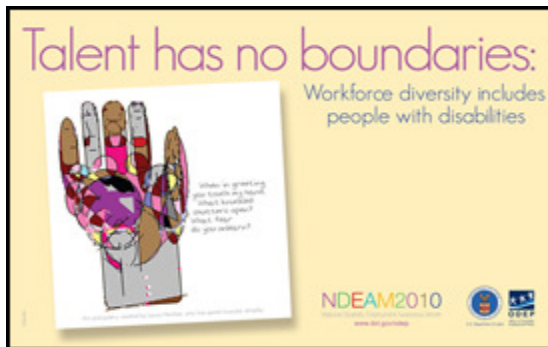
“Talent Has No Boundaries”

October is National Disability Employment Awareness Month and this year’s theme is “Talent Has No Boundaries: Workforce diversity includes people with disabilities”. The Medicaid for Employed People with Disabilities (MEPD) is a program which provides incentives for a person with disabilities to work and not lose their Medicaid health benefits. At this time there are over 13,500 Iowans participating in this program. There are eligibility requirements but

the MEPD program allows for certain assets, such as retirement accounts, assistive technology accounts and medical savings accounts, to be exempt from the resource limits. Premiums are required, starting at \$33 per month, for certain monthly income levels higher than \$1,354 per month on a sliding scale. Individuals apply for the coverage through DHS Income Maintenance Workers at their local DHS offices.

Success stories about MEPD members are plentiful.

You can learn more by viewing the MEPD newsletter called “Moving On Up with MEPD” and the MEPD application at the link below.



<http://www.ime.state.ia.us/HCBS/MEPDNewsletters.html>

MEPD Annual Member Survey Just Released

You can learn more by viewing the most recent MEPD Member Survey at:

<http://www.ime.state.ia.us/docs/printableSurvey2010.pdf>

The newest edition of the MEPD Annual Member Survey (September 2010) is now available and has key information.

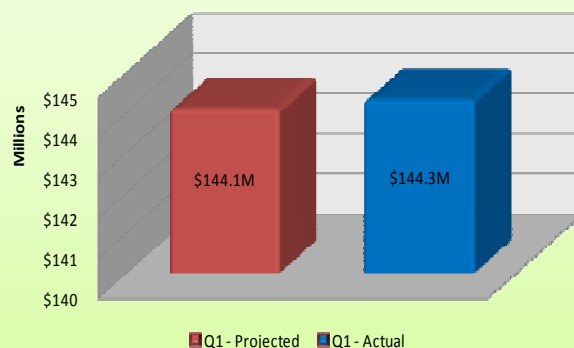
- Membership has increased by 6.6% from 12,734 in May 2009 to 13,571 in March 2010
- Average monthly income earned for MEPD members is \$158.70 per month
- Under one quarter of the members (23.9%) pay a premium
- Most common primary disabilities reported are mental health (bipolar disorder, depression and schizophrenia), health and physical problems
- Most were employed in childcare and janitorial jobs
- Majority work under ten hours per week, but more than one third want to increase their work hours

Medicaid Enrollment Growth Slows in First Quarter

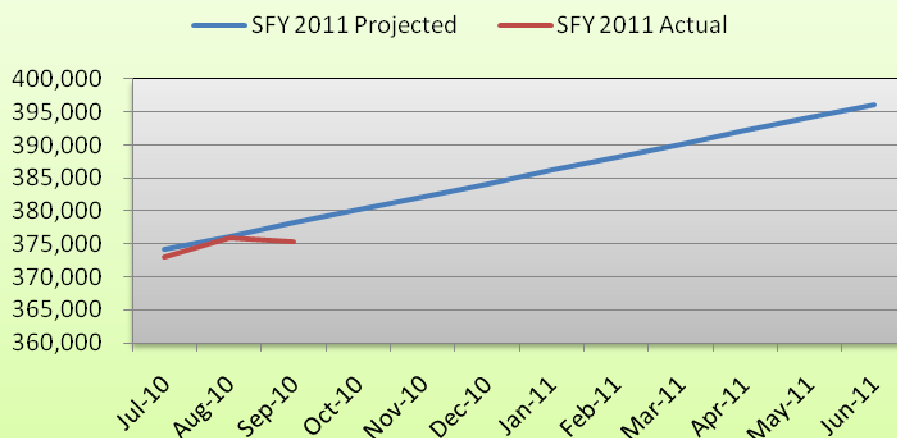
Medicaid expenditures for the first quarter of SFY 2011 are now final. State spending totaled \$144.3 million in the quarter, which was very close to estimates developed at the beginning of the fiscal year. Although fiscal year-to-date expenditures are tracking closely to projections, the year-end deficit estimate has been reduced from \$20 million to \$15 million as a result of slowing enrollment growth. The Department expected to add

5,588 individuals to the Medicaid rolls in the first quarter of SFY 2011, but actual enrollment increased by only 2,729. The lower enrollment resulted in a reduction to the state spending estimate. It is still unclear if this recent slowdown will continue throughout the fiscal year, but the Department will be monitoring closely in the coming months.

**State Medicaid Spending
1st Quarter - SFY 2011**



FY 2011 State Medicaid Enrollment



"We will be watching Medicaid enrollment figures closely to see if the slowdown is a trend or an anomaly."

*Iowa Medicaid Director
Jennifer Vermeer*

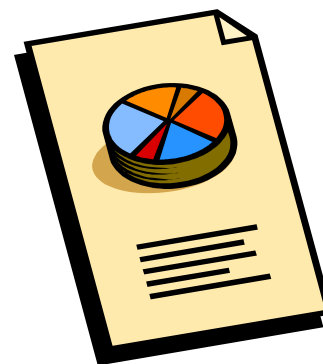
Did you know? State Agencies Post Updates on Health Policy Activities

There is a wealth of information about the health care policy activities at the state level. The Iowa Department of Public Health publishes a monthly update called *"The Check-Up"* an update on issues and ideas related to health reform in Iowa. You can view the current issues and archived issues at:

<http://www.idph.state.ia.us/newsletters.asp>

The Iowa Insurance Division has a webpage dedicated to "Health Care Reform". According to the page, the Iowa Insurance Division will be providing consumers with a wide variety of facts and explanations offered on different topics by government agencies and insurance regulatory bodies. View the page at:

<http://www.iid.state.ia.us/hcr/default.asp>



The IME plans to launch a web page on the "Affordable Care Act: Impact on Iowa Medicaid". Watch for future information.

"The Affordable Care Act changes Medicaid eligibility in fundamental ways."

*Iowa Medicaid Director
Jennifer Vermeer*

MAAC Meeting on October 19th

The Medical Assistance Advisory Council was created by Iowa law in 1995 in order to comply with federal regulations to advise the Medicaid Director about health and medical services. The nearly 90 member group meets quarterly at the IME office in Des Moines. A smaller executive committee, lead by Department of Public Health Director Newton, meets monthly. On October 19th the MAAC met to discuss recent Administrative Rules, hear an update on IowaCare expansion

implementation, get an update on the Non-emergency Medical Transportation Brokerage, and get an overview of the Affordable Care Act Impact on Iowa Medicaid. Kate Burgener, IowaCare Policy Specialist, reported that the expansion is moving forward and enrollment growth is expected in the program. Current wait times for appointments for IowaCare members at Sioux City and Waterloo is 2-3 weeks. There are advancements in sharing health information through technology

and staff is working to develop new reports and revamp the website in preparation for the next phase of expansion which is planned at Ottumwa and Fort Dodge. Director Vermeer noted that the first claim from a non-participating hospital for emergency services has been received. Director Vermeer made a presentation on the implications for the Affordable Care Act on Iowa Medicaid. The next quarterly meeting is tentatively scheduled for Wednesday, February 2, 2011.



Legislative Health Care Coverage Commission Meets November 10

The Legislative Health Care Coverage Commission wraps up its 2010 Interim work with a meeting on Wednesday, November 10th from 10:00 a.m.-3:00 p.m. in Room 103, the Supreme Court Chamber of the Iowa State Capitol. The full Commission will hear recommendations from their various work groups which have been meeting throughout the fall. There are four workgroups,

including Work Group I on IowaCare Expansion, Medicaid Expansion Readiness and High Risk Pool, Work Group II on Value-based Health Care, Work Group III on Insurance Information Exchange and Work Group IV on Wellness. The Commission is chaired by Dr. David Carlyle and its mission is to "develop an Iowa health care reform strategic plan". The Commission played a key role in

the development of the plan to increase access to IowaCare by expanding access to the local federally qualified health centers across the state. You can view details of the Commissions work at the Iowa General Assembly Website:

<http://www.legis.state.ia.us/index.html>



Le Howland Named Medicaid's HCBS Project Manager

Le Howland has been named Project Manager for the Home and Community Based Services Elderly and Children's Mental Health waivers in addition to Targeted Case Management. Le has a Master's degree

in Health Care Administration from Des Moines University and ten years of experience with Iowa Medicaid. Her IME experience includes five years as a Managed Healthcare Representative and five

years as an IME Education and Outreach Coordinator for the Provider Services Unit. You can reach Le at:

lhowlan@dhs.state.ia.us

PASRR Compliance Moving Forward

The Centers for Medicare and Medicaid Services (CMS) has directed State Medicaid agencies to demonstrate their compliance with the requirements and regulations relating to nursing facility Pre-admission Screening and Resident Review (PASRR) under the U.S. Supreme Court's *Olmstead* decision. PASRR is intended to protect vulnerable individuals diagnosed with mental illness or mental retardation who may need nursing facility placement. In mid-September Iowa Medi-

caid submitted a timeline to CMS with action items to achieve full compliance by July 1, 2011. Iowa Medicaid's plan, in partnership with DHS's Division of Mental Health and Disability Services (MHDS), envisions a statewide process to ensure that individuals with mental retardation or mental illness are appropriately screened, thoroughly evaluated and placed in nursing facilities only when a determination has been made that it is an appropriate placement and that the

resident is receiving all necessary services to meet their needs. Iowa Medicaid has proposed a budget offering for SFY 2012 for \$190,650 in state funds to match federal funds to administer the program. The federal match rate is 75%. Funding will support the IME and MHDS administration of the program and a contract for an entity to conduct the evaluations, support a provider network and develop a monitoring system. Watch for future updates as the plan is developed.

Annual Pharmaceutical and Therapeutics Meeting Set for November 18th

The Iowa Medicaid Pharmaceutical and Therapeutics, otherwise known as P & T, Committee meets at the State Capitol on November 18th. The meeting is being held in Room 116 and will last from 8:30 a.m.-4:30 p.m. According to the agenda, the Committee will hear updates on the Preferred Drug List (PDL), Medicaid Drug Rebates issues, Prior Authorization Criteria and Legislation.

You can view the P & T Committee agenda at:

<http://www.iowamedicaidpdl.com/uploads/tv/XZ/tvXZ8LSpjNQdls2MMCUa4g/November-2010-Agenda.pdf>



Did you know?

Iowa recently enacted two new provider assessment fees. These fees are charged against a provider's total revenues and generate funds that are used to increase Medicaid payment rates to the facilities and revenue to the State.

· *Nursing Facility Quality Assurance Assessment Fee*

Implemented on April 1, 2010 brings in \$35.7 million in revenue for the Medicaid program. (Projected figures for SFY 2012.)

· *Hospital Health Care Access Assessment Fee*

Implemented on July 1, 2010 brings in \$39.2 million in revenue for the Medicaid program. (Projected figures for SFY 2012.)



Iowa Medicaid programs serve Iowa's most vulnerable population, including children, the disabled and the elderly.

We're on the web!

<http://www.ime.state.ia.us/>

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Please email:
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The Iowa Medicaid Enterprise (IME) is an endeavor, started in 2005, to unite State staff with "best of breed" contractors into a performance-based model for administration of the Medicaid program.

The Medicaid program is funded by State and Federal governments with a total budget of approximately \$4.2 billion. The \$4.2 billion funds payments for medical claims to over 38,000 health care providers statewide.

Iowa Medicaid is the second largest health care payer in Iowa. The program is expected to serve over 656,000 Iowans, or 21% of the population in State Fiscal Year 2012.

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