IA Health Link Managed Care Program
Stakeholder Toolkit
January 2016
December 29, 2015

Dear Iowa Medicaid stakeholders,

The Iowa Department of Human Services (DHS) will be transitioning most Iowa Medicaid members to a new managed care program, officially named IA Health Link. The goals of IA Health Link are to improve the coordination and quality of care that Medicaid members receive, and to become a healthier state, while Iowa works towards a balanced, predictable state budget. The Centers for Medicare and Medicaid Services (CMS) has issued its decision on the implementation of the IA Health Link program. The program will now begin on March 1, 2016, pending final federal approval.

This program will be administered by three contracted managed care organizations (MCOs) that will provide members with comprehensive health care services, including physical health, behavioral health, and long-term services and support. All members will have six months to two years to remain with or change their current provider(s), depending on the Iowa Medicaid program in which they are currently enrolled. Members may keep their current medical health providers, mental health providers, and case manager until at least August 31, 2016, as long as their provider(s) choose to participate with the MCOs. The IA Health Link program has made sure that long term care or in home and community-based services and support providers will have the chance to be part of the MCOs through the end of February, 2018.

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

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

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

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

Thank you for your continued support.

Mikki Stier, MSHA, FACHE
Medicaid Director
Iowa Department of Human Services
IA Health Link Program Overview

**Initiative Name**
Medicaid Modernization Transition

**Implementation Dates**
Spring 2015 - March 2016

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

Under this initiative, we will enroll the vast majority of Iowa Medicaid members with a managed care organization (MCO). On August 17, 2015, DHS issued a notice of intent to award four MCOs with contracts to administer the program. On December 18, 2015, the contract with WellCare of Iowa was terminated following an appeals process. The remaining three MCOs will provide comprehensive health care services, including physical health, behavioral health, and long-term services and supports.

You can learn more about the MCOs to recently receive a bid award by reading the DHS announcement¹.

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

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

**Bidder Awards**
On Monday, August 17, 2015, DHS announced the intent to award four bidders. On December 18, 2015, the contract with WellCare of Iowa was terminated following an appeals process. The remaining three bidders include:
- Amerigroup Iowa, Inc.
- AmeriHealth Caritas Iowa, Inc.
- UnitedHealthcare of the River Valley, Inc.

Stakeholder FAQ
Find answers to frequently asked questions from stakeholders.

General Questions

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

Question: What is the federal approval process and timeline?
The state has been working with Centers for Medicare and Medicaid Services (CMS) to obtain the authority to implement this new Medicaid managed care model through a new 1915(b) waiver, and through amendments to other existing 1915(c) waivers and 1115 demonstration waivers. The Centers for Medicare and Medicaid Services (CMS) has reached a decision on the IA Health Link managed care program. The program will begin March 1, 2016, instead of January 1, 2016, pending final federal approval. DHS will continue to work with CMS to be able to reach the March 1, 2016, timeline.

Question: Is stakeholder input required?
Stakeholder input is required by CMS as part of the federal approval process and DHS will assure all requirements are met. The Department has all updated formal public notices and information on the Medicaid Modernization website².

² http://dhs.iowa.gov/ime/about/initiatives/MedicaidModernization
Oversight Readiness

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

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

Modernization Oversight Visual
Question: Who is the primary stakeholder group?

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

Transitional/Planning Activities

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

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

- Project Management Office
- IME Current Contracts
- Branding and Communications Plan
- Stakeholder and External Relations
- Collaboration with Federal Partners
- Alignment with Other Initiatives (SIM)
- MCO Onboarding
- Implementation of MCO
How Can I Help?

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

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

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

Iowa Medicaid will continue to conduct a series of meetings and webinars during the launch of IA Health Link to help educate stakeholders on the transition process. Look for those dates and details to be added to this toolkit in the coming weeks. Your organization can attend these training sessions to get the information you need. If you’re interested in receiving the latest information via email, you can subscribe to the initiative email alerts. Send an email with the subject line “subscribe” along with your name, organization and email address to IMECommunications@dhs.state.ia.us
Question: Where can I learn more about the MCOs?
To learn more about the MCOs, you may contact the awarded bidders. The awarded bidders are: Amerigroup Iowa, Inc., AmeriHealth Caritas Iowa, Inc. and UnitedHealthcare of the River Valley, Inc. For more information, please go to Informational Letter 1539 found here:

Question: Where can I find more information on the Medicaid Modernization initiative?
To find more information about the Iowa High Quality Health Care Initiative also known as Medicaid Modernization, please visit the following webpages
- Access the Medicaid Modernization website.
- Access the updated Frequently Asked Questions (FAQ).
- Access the Medicaid Modernization RFP Factsheet.
- Access the one page Medicaid Modernization Transition Factsheet.

(Do we want to link/direct people to more recent updated files here?^^)

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3 [https://dhs.iowa.gov/sites/default/files/1539_DHS_Announces_Winning_Bidders_for_Medicaid_Modernization_Initiative.pdf](https://dhs.iowa.gov/sites/default/files/1539_DHS_Announces_Winning_Bidders_for_Medicaid_Modernization_Initiative.pdf)
4 [http://dhs.iowa.gov/ime/about/initiatives/MedicaidModernization](http://dhs.iowa.gov/ime/about/initiatives/MedicaidModernization)
**Member Enrollment Timeline and Process**

### Important MCO Enrollment Dates

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<td><strong>February 17, 2016; Last day to make MCO choice for coverage under a particular MCO beginning March 1, 2016. If no choice is made by this date:</strong> You will be enrolled with the MCO included in the enrollment packet.</td>
<td><strong>March 1:</strong> Coverage begins You may change your MCO for any reason throughout the month of March.</td>
<td>You may change your MCO for any reason throughout the month of April.</td>
<td><strong>May 1, 2016 – May 18, 2016:</strong> You may change your MCO for any reason. <strong>May 19, 2016 – remainder of year:</strong> You must have “Good Cause” reason to change your MCO.</td>
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**Member Enrollment**

**Member Introductory Mailing**

**Summary:** The Iowa Department of Human Services sent an introductory mailing regarding the managed care transition to all impacted Medicaid members. The letter contained information about the new program, impact to members and the timeline for the transition. In addition to the letter, a FAQ was included in the mailing to provide additional details.

**Mailing Contents and Versions**

1. Long Term Care and HCBS Waiver Members
   a. Includes letter and FAQ
2. Current Managed Care Members (MediPASS and Iowa Health and Wellness Plan)
   a. Includes letter and FAQ
3. Traditional Medicaid Members (Medicaid members in other eligibility groups)
   a. Includes letter and FAQ
4. **hawk-i** Members
   a. Includes letter

**Distribution**

- Week of October 5: Long Term Care and Traditional Medicaid letters begin mailing (total of 198,401 households)
- Week of October 12: Current Managed Care and **hawk-i** (total of 192,912 households)
Member Enrollment Packet Mailing

Items Included in Enrollment Packet:
1. Member Mailing Address Page
2. Tentative Assignment Letter
3. Enrollment Form
4. Return Envelope for Enrollment Form
   a. Required for transition packets, as self-sealing enrollment form takes six weeks to produce, making it impossible to have available in transition packets
5. Managed Care Handbook
6. MCO #1 Brochure (Amerigroup)
7. MCO #2 Brochure (AmeriHealth Caritas)
8. MCO #3 Brochure (UnitedHealthcare)
9. MCO #4 Brochure (WellCare)

All items were sent in the outer mailing envelope.

Distribution
Enrollment packet distribution will begin in mid-October, pending signed contracts with each of the MCOs.
- Week of October 19: Long Term Care, Home and Community-Based Services, Traditional Medicaid
- Week of October 26: Remainder Traditional Medicaid, MediPASS
- Week of November 2: Remainder MediPASS, hawk-i
- Week of November 9: Iowa Health and Wellness Plan

Member Choice of MCO
Iowa Medicaid Member Services will be the Enrollment Broker and is responsible for providing information and conflict free choice counseling for members in the selection of a MCO. Key activities to share information and support member selection of MCO:
- In-person meetings throughout state with special focus on long term care members, schedules upcoming and posted online
- Email: IMEMemberServices@dhs.state.ia.us
- Call Center: 1-800-338-8366, 8am-5pm, M-F
- Members can select their MCO through voice system option 24/7 daily

The Enrollment Broker (Member Services) will offer health plan choice counseling to members. Choice counseling includes answering member questions about each health plan such as:
- Is my provider in the MCO network?
- Is my pharmacy in the MCO network?
• Does the MCO have specialists close to my community?
  • Does the plan have value-added services that would benefit me?
  • Are there special health programs that would help me?
  • Does the MCO have call centers or helplines available beyond regular business hours?

Changing MCOs for Good Cause
Members may disenroll from their MCO at any time throughout the year for reasons of “good cause.” “Good cause” reasons can include:
  • A member’s provider is not enrolled with the MCO and that provider disenrollment impacts the members’ health outcomes
  • A member needs related services to be performed at the same time and not all related services are available in the MCO network
  • If there is a change in eligibility (for example PACE)

To make a change:
  • Members call the Iowa Medicaid Enrollment Broker to request disenrollment for “good cause”
  • Members tell the Enrollment Broker which MCO they want to switch to
  • If a member has a question about whether they have a “good cause” they can call the Enrollment Broker for more information
Member Promotional Materials

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

The following promotional materials include:
- Member FAQs
- Dates of IA Health Link Kick Off Meetings
- Dates of Member Education and Enrollment Events
- Sample email content to members
- Sample social media posts
- Estimated campaign timeline
Member FAQs

What is the IA Health Link program?
IA Health Link is now the name for the Iowa Medicaid managed care program. IA Health Link brings together physical, behavioral, and long term care under one program.

What is a managed care organization?
An MCO is an organization that the Department of Human Services has contracted with to offer health coverage. The MCO health plans are similar to health plans or ‘health insurance’ enjoyed by most Iowans.

Can I change my managed care organization after March 1, 2016?
Members may change their MCO for any reason until May 18, 2016. Beginning May 19, 2016, members may change their MCO throughout the year for reasons of “good cause.” Needing services from a provider within a different MCO network is an example of good cause.

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

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

Will my benefits or provider change?
The health plans must offer ALL current benefits available through the Medicaid program, and each plan offers incentives and benefits beyond what traditional Medicaid offers. Check out the MCO Benefit Comparison Chart of Value-Added Benefits. Your physical, behavioral, and long-term care benefits will be covered by a MCO beginning March 1, 2016. The MCO has a network of providers across the state of Iowa for you to choose from. Your provider(s) may change if they choose not to contract with a MCO.

Why is the program changing to IA Health Link?
Iowa's Medicaid members are moving to a model that focuses on quality and efficiency. The IA Health Link program will offer benefits and incentives available beyond what traditional Medicaid has offered. About 80 percent of the nation's Medicaid recipients receive coverage through managed care models. The IA Health Link aims to:

- Improve members access to care and care coordination,
- Give members the ability to encourage responsibility for their own health care needs,
- And to help Medicaid's budget to be more streamlined and predictable.

To help operate this program, the Department of Human Services has contracted with three managed care organizations (MCOs) for the delivery of health care.

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

How do I know if a service is covered with IA Health Link or not?
All of your benefits that you were eligible for before IA Health Link will stay the same after March 1, 2016, unless your eligibility changes. All services are based on medical necessity. Your doctor is the best person to determine the medical necessity of a procedure for you. Your provider will work with Provider Services to determine if the service is covered.

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

How and where can I learn more?
If you have questions or comments about this change or your current health coverage, please call the Iowa Medicaid Member Services Unit at 1-800-338-8366 or 515-256-4606. Representatives will be available Monday-Friday, 8:00 a.m. to 5:00 p.m.
IA Health Link Events Summary

Summary: The IA Health Link Kick-Off meetings will be held in eleven locations and will provide an overview of the IA Health Link program. Designed to appeal to a wide audience, the meetings will likely include participation from each of the three MCOs, will train community partners on the IA Health Link enrollment process and educate attendees on how to assist members through the transition and initial implementation of the program.

Target Audience: Community Partners, Advocates, Stakeholder Organizations, Enrollment Assisters, Certified Application Counselors, Family Members, General Public

A calendar of scheduled meetings is available online.  

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9 https://dhs.iowa.gov/calendar
Member Education and Enrollment Events

Summary: Iowa Medicaid will host a mix of in-person meetings and webinars branded as “tele-townhall meetings” in the top 16 populated cities in Iowa. These meetings will provide the public with an opportunity to receive information about the transition, ask questions directly to DHS staff, and receive in-person enrollment assistance.

The tele-townhalls will feature a short presentation for those with Internet access and also will be available via conference call. Iowa Medicaid will work with local venues such as public libraries to offer the in-person meetings and tele-townhalls free to the public, in order for a larger audience to view the presentation. These presentations will be designed to provide the public with the ability to participate in the process and address any questions the members have. Iowa Medicaid will track the questions that are asked, and use these meetings to prepare for further communications materials and planned responses.

Target Audience: Medicaid Members Transitioning to the IA Health Link Program, Family Members, Member Representatives

A calendar of scheduled meetings is available online

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10 https://dhs.iowa.gov/calendar
Sample Email Content to Members

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

Sample

Dear [member name],

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

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

You can continue to work with your current provider(s), and coverage for health care services by the MCO will begin on March 1, 2016. The MCO will have a network of providers across the state for you to choose from.

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

Sincerely,

[Signature]

[Typed name]
[Position]
Sample Social Media Posts

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

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

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

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

Example Twitter Posts
Are you a current #IowaMedicaid member? Learn more about the #IAHealthLink program and what it means to you: www.IAHealthLink.gov

Most #IowaMedicaid programs will join together in a managed care program called #IAHealthLink on 3/1/16: www.IAHealthLink.gov

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

Current #IowaMedicaid members: You can continue to work with your current provider, and coverage by the MCO will begin on March 1, 2016.

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

Steps to IA Health Link Timeline

**Summer – Fall 2015**
Tel-town hall meetings, webinars, in-person meetings about IA Health Link – your chance to learn more about IA Health Link

**Fall 2015**
Enrollment events – learn more about your health coverage and a chance to choose your MCO

**Fall 2015**
Enrollment packet mailing – your chance to choose your MCO

**Winter 2015/2016**
Enrollment confirmation mailing – lets you know that we received your MCO choice

**March 1, 2016**
Managed care with IA Health Link begins!
Contact Information

For additional information on the new managed care program called IA Health Link and the Iowa High Quality Healthcare Initiative also known as Medicaid Modernization please visit the Medicaid Modernization website\textsuperscript{11}, the IA Health Link website\textsuperscript{12}, or email MedicaidModernization@dhs.state.ia.us.

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

\textsuperscript{11} https://dhs.iowa.gov/ime/about/initiatives/MedicaidModernization

\textsuperscript{12} http://dhs.iowa.gov/iahealthlink