



Iowa Department of Human Services

Health Care Reform/SIM Initiative

Marni Bussell, SIM Program Director
October 2014



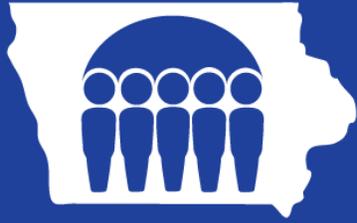
Topics

- Update on State Innovation Model (SIM)



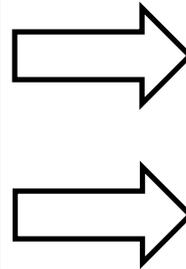
ACO Adoption in Iowa

- In 2012, Medicare and Wellmark changed how they purchase health care and started ACO contracts
- Today in Iowa:
 - 12% of Medicare in an ACO
 - 37% of Wellmark in an ACO
 - Eight major health systems have ACO contracts covering an estimated 18% of the total population



Medicaid Health Homes

- Option under 2703 of the Affordable Care Act
- Allows payment for Health Home teams to perform care coordination, peer support, health coaching
- Provides 90% federal match for 8 quarters



- Iowa has two approved programs:
 - 2012: Chronic disease (primary care model)
 - 2013: Integrated Health Homes for adults with Chronic Mental Illness and children with Serious Emotional Disturbance



Population in Health Home September 2014

HH(Primary Care/Chronics)

- 6,123 members
- 66% have 4 or more chronic conditions
- 22% (1350) under age 19

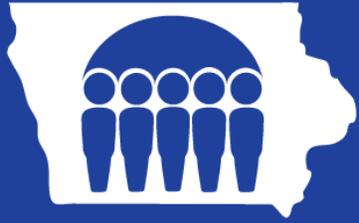
IHH (SMI population)

- 30,133 members
- 48% are in the outreach and engagement rate
- 23% are under age 19
- 490 are previous Children's Mental Health Waiver members



Providers in IHH Program

- Magellan manages the network of IHH providers
- Consists mostly with facilities that have previously established care with SMI Adults or SED kids
- CHSCs, PMICs, MHCs and CMHCs
- <http://www.magellanofiowa.com/for-providers-ia/integrated-health-home.aspx>



Iowa Department of Human Services

Iowa's SIM Initiative

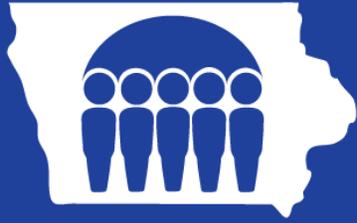


Model Testing Proposals

Awardees must apply policy and regulatory levers to address three focus areas:

1. Transform health care delivery systems
2. Improve population health
3. Decrease per capita total health care spending

Anticipated award announcement in Nov/Dec 2014



State Healthcare Innovation Plan (SHIP)

Key Concepts Learned from SIM Design:

- Align w/other payers in reimbursement, quality measurement, and reporting
- Increased transparency/data sharing
- Develop a care coordination approach and contract requirements for Medicaid ACOs
 - Clearly defined accountability at the community level
 - Provider relationships with other systems important (LTC, BH, Public Health, etc.)
- Member engagement/promote healthy behaviors ⁹



Transform Health Care Delivery

Expand ACO Model to Full Medicaid

Expand PCP
Assignment

Shared Savings
with Risk

Incrementally add
LTC/BH Services

Care Coordination
payments for
chronics (aligned
with HH)

Align with Other Payers

Use VIS

Develop VIS
Star Rating

Include Medicaid
HMO/CHIP
Plans

Support ACO Delivery System

Develop Community
Care Teams

Develop Admission
Discharge Transfer
(ADT) system
(HIT/IHIN)

Technical
Assistance approach
with IDPH



Improve Population Health

Improve Population Health/ Healthiest State Initiatives

Tobacco Use

Diabetes

Obesity/Childhood Obesity

Hospital Acquired Infections

Obstetrics Adverse Events

Engage Patients/Improve Health Literacy

Build from Healthy Behavior Program

Use HRA to measure Patient activation

Utilize Public Partnerships for education & outreach

Measure Member Experience

Choosing Wisely Campaign

Collect Social Determinants of Health

Impact Individual patient care

Implement Community SDH Transformation grants

Study potential risk adjustment on ACO payment model



Decrease Per Capita Health Care Costs

Evaluation and Monitoring

Conduct Rapid
Cycle
Evaluations

Track Total Cost
of Care

Public Reporting
of Results

Achieve Scale within an ACO model

Align and partner
with Public Payers
(CHIP/M-HMO)

Align and partner
with Private
Payers

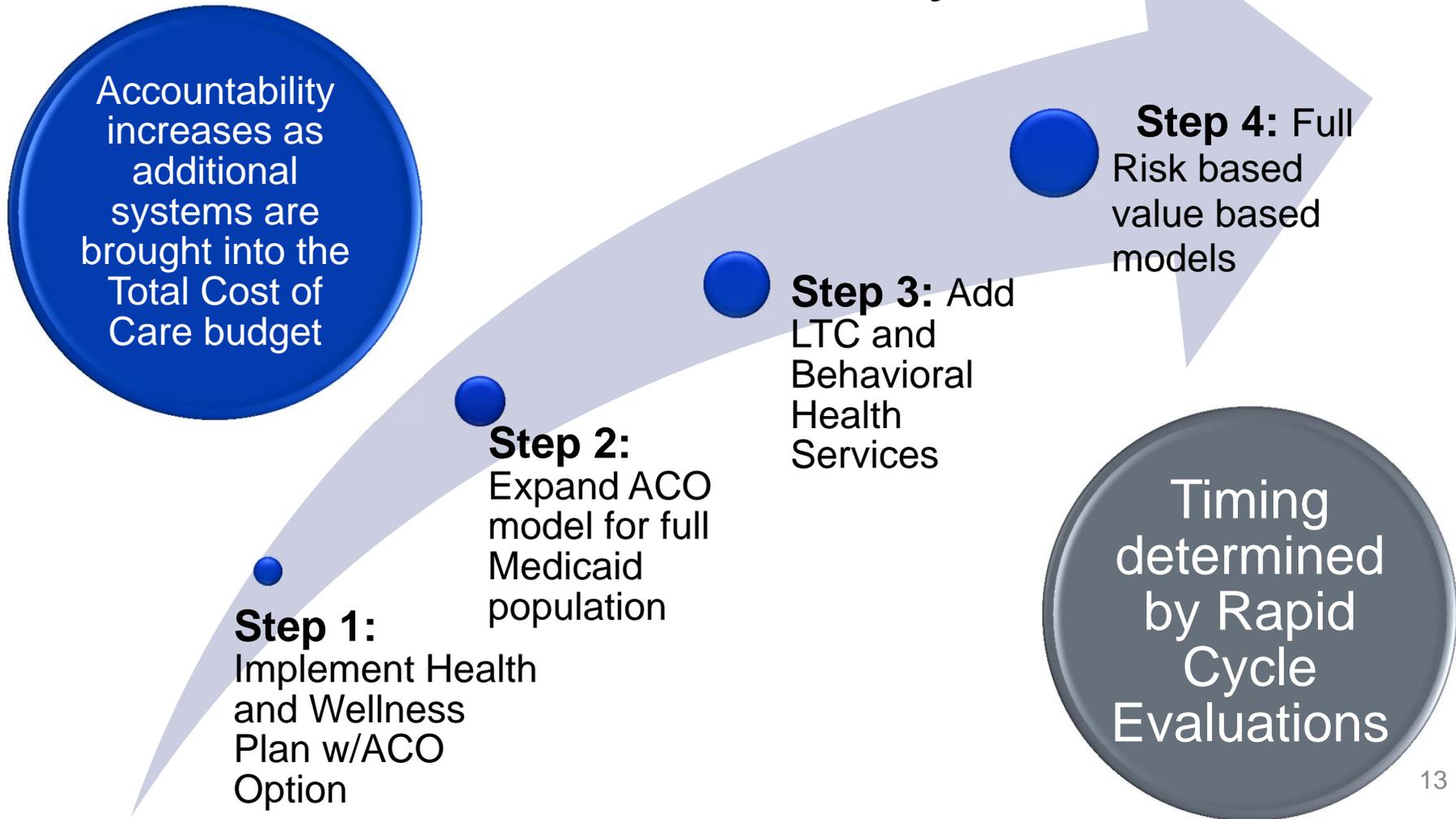
Track VIS Improvement

Monitor VIS and TCOC
relationship

Identify sub populations needs
improvements

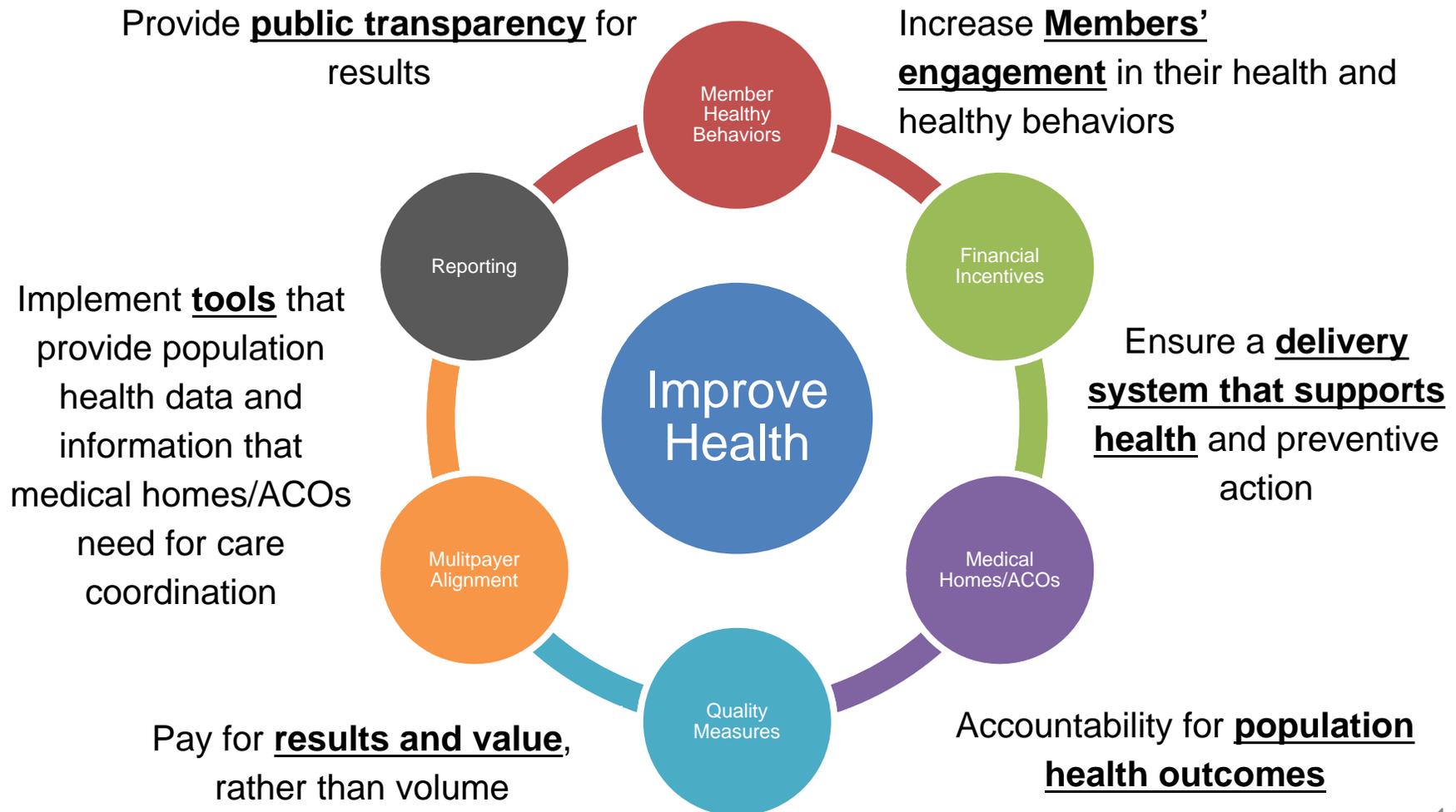


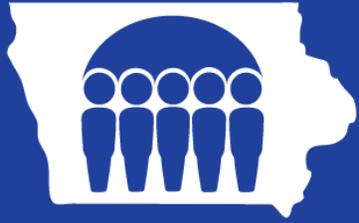
SIM Accountability Timeline





Iowa Health and Wellness Plan





Iowa Department of Human Services

Questions

Marni Bussell

SIM Program Director

Iowa Department of Human Services

mbussel@dhs.state.ia.us

515-256-4659



Iowa Department of Human Services

Iowa Health and Wellness Plan

Lindsay Buechel

IME Communication Manager



Background

The Iowa Health and Wellness Plan was enacted to provide **comprehensive health coverage** for low-income adults

- Began January 1, 2014
- Iowans age 19 - 64
- Income up to and including 133% of the Federal Poverty Level (FPL)
- New, comprehensive program replaced the IowaCare program, which ended December 31, 2013



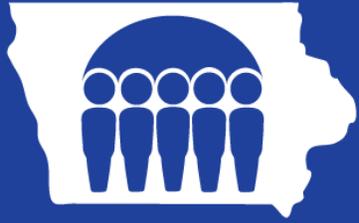
One Plan, Two Options

Iowa Wellness Plan

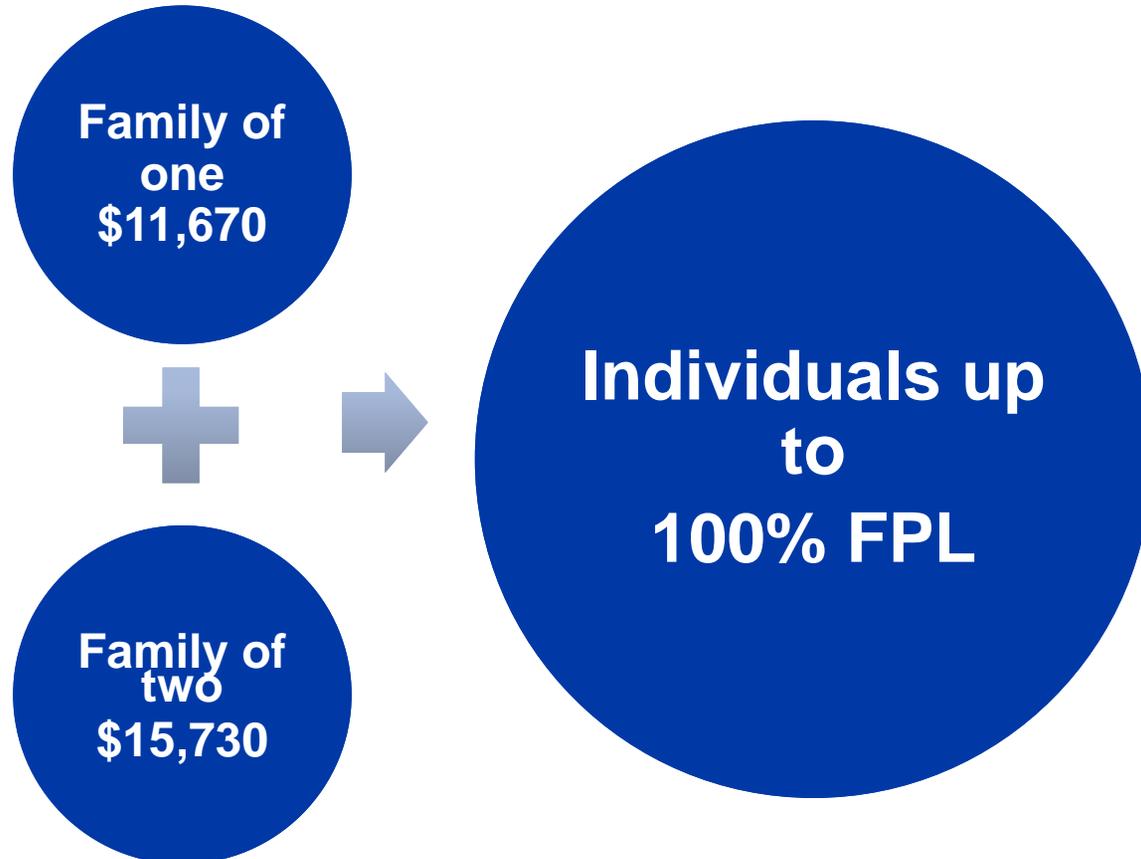
- For adults age 19 - 64
- Income up to and including 100% of the Federal Poverty Level

Marketplace Choice Plan

- For adults age 19 - 64
- Income 101% to no more than 133% of the Federal Poverty Level



Iowa Wellness Plan: 0-100% FPL





Iowa Wellness Plan: 0-100% FPL

Administered by Iowa
Medicaid

Provides
comprehensive
health services

Coverage is equal to
the benefits provided
to state employees

Benefit Categories Covered

Physician services, including primary care

Outpatient services

Emergency room services and transportation

Hospitalization

Mental health and substance use disorder

Rehabilitative and habilitative services and devices

Lab services, x-rays, imaging (MRI, CT, etc.)

Preventive and wellness services

Home & community-based services

Prescription drugs

Dental services



Iowa Wellness Plan: 0-100% FPL

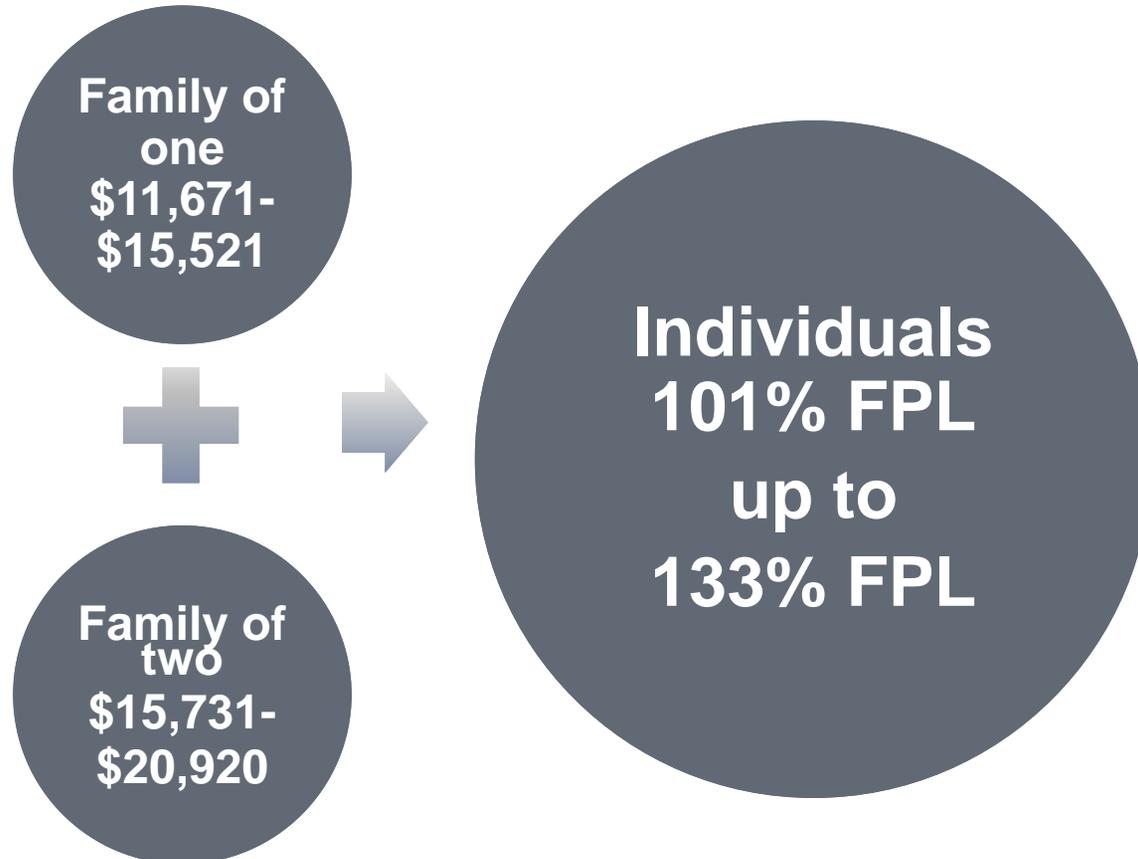
Access to the same providers currently available with Medicaid

Ability to choose primary care physician

Primary care physician coordinates care for member



Marketplace Choice Plan: 101-133% FPL





Marketplace Choice Plan: 101-133% FPL

Members select a certain ***commercial health plan*** available on the Health Insurance Marketplace

- CoOpportunity Health
- Coventry Health Care of Iowa

Uses the commercial plan's statewide provider network – **includes primary care, specialists, hospitals**



Marketplace Choice Plan: 101-133% FPL

Provides
comprehensive health
services

Coverage includes the
qualified health plan
required essential
health benefits

Benefit Categories Covered

Physician services, including primary care

Outpatient services

Emergency room services and transportation

Hospitalization

Mental health and substance use disorder

Rehabilitative and habilitative services and devices

Lab services, x-rays, imaging (MRI, CT, etc.)

Preventive and wellness services

Home & community based services

Prescription drugs

Dental services

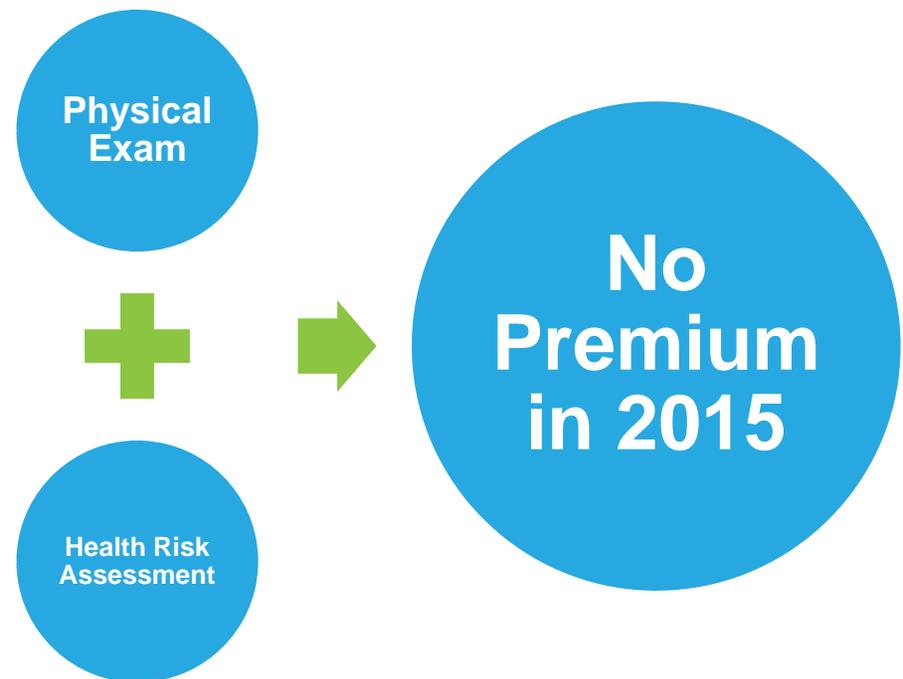


Healthy Behaviors Program



Healthy Behaviors Program

- Helps waive any possible contribution (premium) for the next year of enrollment



Healthy Behaviors Program

- Members have 12 months to complete Healthy Behaviors
 - Enrolled in January 2014, have until January 2015
 - Enrolled in April 2014, have until April 2015
- Contribution amount if activities not completed:
 - Wellness Plan (50-100% FPL): \$5 per month
 - Marketplace Choice Plan (101-133% FPL): \$10 per month

How To: Wellness Exam

1. Identify the member's primary care provider
2. If unknown, member can:
 - A. Call Iowa Medicaid Member Services at 1-800-338-8366 (8-5, M-F)
 - B. Member Services can share provider and phone #
3. Provider can:
 - A. Call ELVS or access portal online

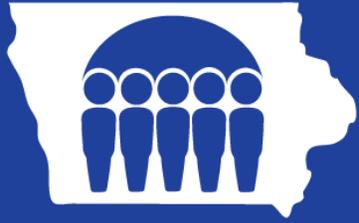
Health Risk Assessment

Wellness Plan Members

1. Using tool called Assess My Health
 - [AssessMyHealth.com](https://www.assessmyhealth.com)
2. Can be completed online or by phone
 - By phone through IME Member Services

Marketplace Choice Plan Members

- Use health plan assessment or AssessMyHealth



Information

General Medicaid Information:

<http://dhs.iowa.gov/>

Information on the Iowa Health and Wellness Plan:

<http://dhs.iowa.gov/ime/about/iowa-health-and-wellness-plan>

New website for Iowa Health and Wellness Plan
and Healthy Behaviors members:

www.iahealthlink.gov