

## Iowa Department of Public Health

# ✓ The Check-Up

## An update on issues and ideas Related to health reform in Iowa

The Check-Up is a health care reform newsletter designed to keep interested Iowans up to date on the progress of health reform initiatives. The Check-Up features updates on activities of the Iowa Department of Public Health's (IDPH) Office of Health Care Transformation (OHCT) and partners. The OHCT is a key point-of-contact for health care reform initiatives within IDPH including State Innovation Model, Accountable Care Organizations, Health Insurance Marketplace, prevention and chronic disease management initiatives, care coordination, social determinants of health, and Patient-Centered Medical Homes/Health Homes. The OHCT monitors federal health care issues and disseminates the key information, opportunities, and impacts to the public and other partners- internal and external to IDPH.

April  
2016

### IDPH Websites

[Office of Health Care Transformation](#)

[Patient-Centered Health Advisory Council](#)

[State Innovation Model](#)

### DHS Websites

[State Innovation Model](#)

[IA Health Link](#)

[Medicaid Modernization](#)

[Iowa Health and Wellness Plan](#)

## Patient-Centered Health Advisory Council

The Patient-Centered Health Advisory Council met on Friday, February 19<sup>th</sup> from 9:30 – 4:00 at the Urbandale Public Library. The meeting was well attended with over 75 Council members and interested parties present. Agenda items included an update from DHS on Iowa Medicaid Modernization, presentations from each of the 3 Managed Care Organizations (MCOs), Visiting Nurse Services (VNS) of Iowa presentation on how to prepare provider office staff for Medicaid Modernization, *hawk-i* Board Chair, Iowa Dental Wellness Plan, and a legislative update. The agenda, minutes, and presentations can be found below:

- [Agenda](#)
- [Minutes 2-19-16](#)
- [Iowa DHS- Medicaid Modernization PPT](#)
- [UnitedHealthcare PPT](#)
- [AmeriHealth Caritas Iowa PPT](#)
- [Amerigroup Iowa PPT](#)
- [VNS \(Visiting Nurse Services\) of Iowa PPT](#)
- [VNS PCP Patient Handout](#)
- [VNS Sample MCO Card Guide - Members](#)
- [VNS Sample MCO Card Guide - Providers](#)
- [Impact of MCO on \*hawk-i\* Population PPT](#)
- [Dental Wellness Plan PPT](#)
- [Iowa's Managed Care Ombudsman Program PPT](#)

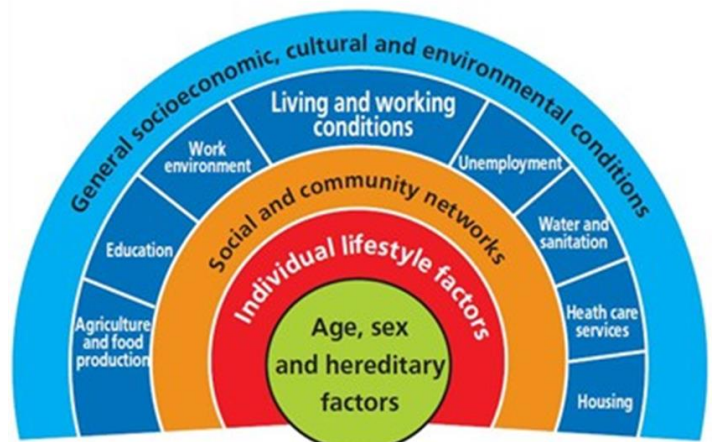
### 2016 Meeting Schedule

- Friday, May 20<sup>th</sup>, 2016- Iowa Hospital Association
- Friday, August 12<sup>th</sup>, 2016- Iowa Hospital Association
- Friday, November 4<sup>th</sup>, 2016- Iowa Hospital Association

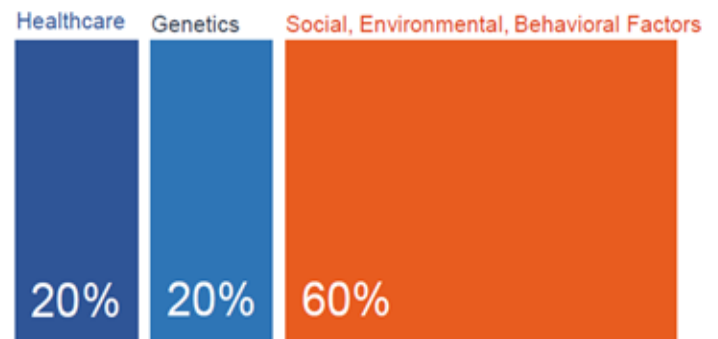
## Social Determinants of Health (SDH)

Social Determinants of Health (SDH) are conditions under which people live, learn, work and play that influence health and quality of life. (Robert Wood Johnson Foundation). SDH must be addressed in order to achieve large and sustained improvements in health outcomes.

The Patient-Centered Health Advisory Council has had a passion for addressing SDH since their existence. They created a [SDH Issue Brief](#) in 2011 describing the importance and impact that SDH has on health. A number of emerging initiatives in Iowa and nationally now have a strong focus on SDH including State Innovation Model (SIM), Community Care Coalition (C3), and the federal Accountable Health Communities (AHC) initiative (all described in this newsletter).



## What Determines Health?



## Iowa's State Innovation Model (SIM)

On December 16<sup>th</sup>, 2014, the Center for Medicare and Medicaid (CMS) announced that Iowa received a SIM Round Two Test Award. Iowa was awarded \$43.1 million over a four year period. The goal of SIM is to test whether new payment and service delivery models will produce superior results when implemented in the context of a state-sponsored Health Care Innovation Plan. These Plans must improve health; improve the quality of care; lower costs for citizens through a sustainable model of multi-payer payment and delivery reform; and deliver the right care, at the right time, in the right setting. CMS Innovation (CMMI) has created the SIM initiative for states that are prepared for or committed to planning, designing, testing, and supporting evaluation of new payment and service delivery models in the context of larger health system transformation.

Iowa's SIM grant focuses on the following three areas:

1. Improve Population Health
2. Transform Health Care
3. Promote Sustainability

Iowa has four primary drivers that are the strategy behind the three aims and four goals of the Iowa SIM Program. The framework of the [SIM Goals and Drivers Diagram](#) illustrates this strategy. Access each of the drivers below to learn more.

1. [Population Health Improvement](#)
2. [Care Coordination](#)
3. [Community-Based Performance Improvement](#)
4. [Value-Based Purchasing](#)

For more information, visit <https://dhs.iowa.gov/ime/about/initiatives/newSIMhome>

## Iowa's Community Care Coalition (C3) Initiative

A key aspect of Iowa's SIM application to CMMI is the development and advancement of C3 initiatives across Iowa. A C3 initiative is locally-based coalition of stakeholders that promotes the coordination of health and social services across care settings and systems of care. C3 initiatives will be driven by community stakeholders consisting of, but not limited to: hospitals, primary care providers, specialty care providers, mental health and substance providers, public health, community action, and social service providers.

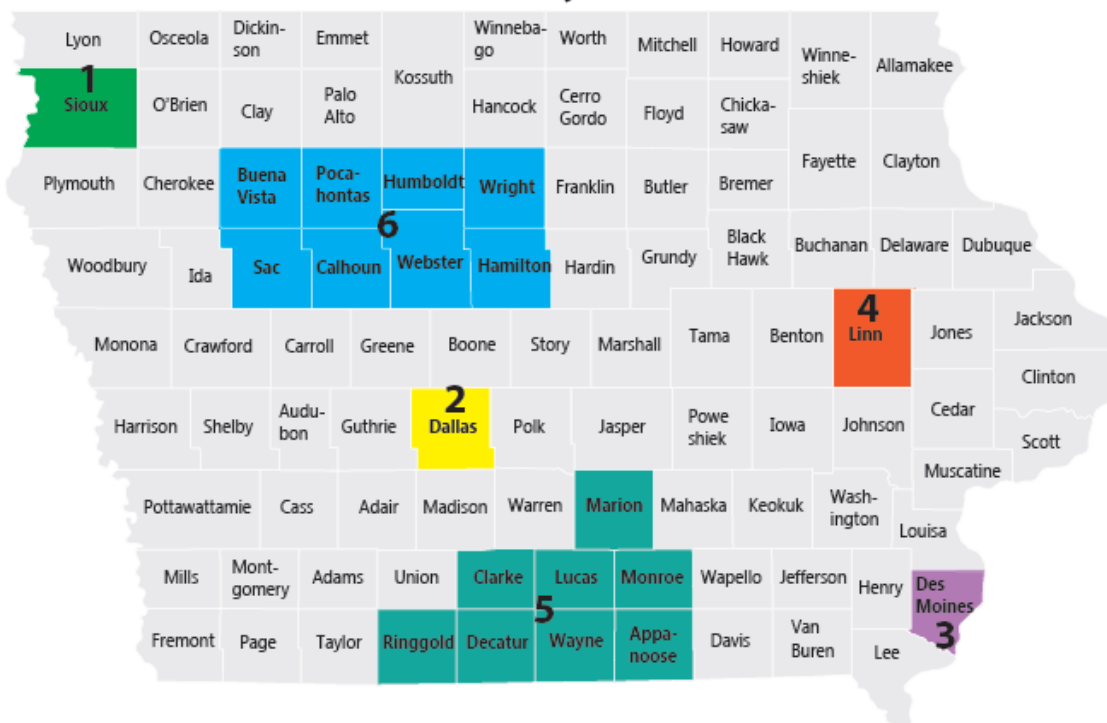
The C3s will have two primary functions:

1. Addressing social determinants of health through care coordination
2. Implementing population-based, community-applied interventions related to the [Iowa SIM Statewide Strategies](#).

On February 29<sup>th</sup>, 2016 it was announced that six C3 communities were awarded SIM funding. The communities will engage in broad-based health care system and payment reforms that will lead to better health outcomes and lower costs. The six C3 awardees and their communities are:

- Community Health Partners of Sioux County – Sioux County
- Dallas County Public Health Nursing Services – Dallas County
- Great River Medical Center, West Burlington – Des Moines County
- Linn County Board of Health – Linn County
- Marion County Public Health Department - Marion, Monroe, Lucas, Clarke, Ringgold, Decatur, Wayne and Appanoose Counties
- Webster County Health Department – Webster, Hamilton, Humboldt, Wright, Pocahontas, Calhoun, Sac and Buena Vista Counties

### State Innovation Model Community Care Coalition Initiative Grantees



1. Community Partners of Sioux County

2. Dallas County Public Health Nursing Services

3. Great River Health Center

4. Linn County Board of Health

5. Marion County Public Health Department

6. Webster County Health Department

## Iowa's Community Care Coordination (CCC) Project Evaluation

**Background-** Prior to Iowa being awarded the SIM grant, the Iowa Collaborative Safety Net Provider Network (Safety Net Network) was allocated funds from the Iowa Legislature to be used for the development and implementation of statewide, regionally-based networks with the goal of providing an integrated approach to health care delivery through community care coordination (CCC). The Safety Net Network was instrumental in the development of the CCC project in Iowa, which has evolved into the C3 initiative under SIM. The CCC project took place in FY14 and FY15 and selected regions received funding to develop or implement a CCC delivery approach that empowers patients by building local partnerships and connecting patients with community resources to address social barriers faced in accessing care, such as transportation, housing, literacy, access to food, lack of a primary care provider and the inability to access medications. Six Iowa regions were selected as recipients of CCC State funding in FY15 and two Iowa regions were selected in FY14.

### Implementation Grants

- Mercy Medical Center-North Iowa- Cerro Gordo county
- Methodist Jennie Edmundson Hospital- Cass, Mills, and Pottawattamie counties
- Seasons Center - Clay and Sioux counties
- Webster County Health Dept.- Buena Vista, Calhoun Webster, Hamilton Humboldt, Pocahontas, Sac, & Wright counties

### Developmental Grants

- Allen Memorial Hospital- Black Hawk county
- Dallas County Nursing Services- Dallas county

Through the CCC initiative, 5,475 patients were served (four of the six CCC projects were tracking and submitting patient data). The total average cost per patient for this work was \$181/patient. The implementation projects averaged 4.66 encounters per enrollee. The most common types of assistance provided were health insurance counseling, care coordination, health, and transportation services. Patients, community partners, and physicians all reported that they were satisfied with the work of their CCC initiative.

**Community Care Team Toolkit-** The Iowa Primary Care Association created a toolkit to assist communities with understanding and applying ideas and concepts important in the development of Community Care Teams. The Community Care Team Toolkit can be accessed [here](#).

For more information contact the Iowa Primary Care Association at 515-243-3566 or [bgeib@iowapca.org](mailto:bgeib@iowapca.org).

## Accountable Health Communities (AHC) Model- A New Federal Initiative

The Department of Human Services has announced a new funding opportunity of up to \$157 million called the Accountable Health Communities (AHC) model. This is the first-ever CMS Innovation Center pilot project to test improving patients' health by addressing their social needs. AHC addresses a critical gap between clinical care and community services in the current health care delivery system by testing whether identifying and addressing the health-related social needs of beneficiaries' impacts total health care costs, improves health, and quality of care.

Over a five-year period, CMS will implement and test a three-track model based on promising service delivery approaches. Each track features interventions of varying intensity that link beneficiaries with community services:

- **Track 1 Awareness** – Increase beneficiary *awareness* of available community services through information dissemination and referral
- **Track 2 Assistance** – Provide community service navigation services to *assist* high-risk beneficiaries with accessing services
- **Track 3 Alignment** – Encourage partner *alignment* to ensure that community services are available and responsive to the needs of the beneficiaries

Applications are due on May 18<sup>th</sup>, 2016. For more information visit <https://innovation.cms.gov/initiatives/AHCM>

## Iowa Medicaid Modernization Initiative

The Iowa Department of Human Services has contracted with following three Managed Care Organizations (MCOs) for Governor Branstad's Medicaid Modernization initiative to provide and pay for health care services to the vast majority of Medicaid members:

- [Amerigroup Iowa, Inc.](#) 1-800-600-4441
- [AmeriHealth Caritas](#) 1-855-332-2440
- [United Healthcare Plan of the River Valley, Inc.](#) 1-800-464-9484

On February 23<sup>rd</sup>, CMS announced that it approves the launch of IA Health Link (Iowa's Medicaid Modernization initiative) for April 1, 2016. Find the Governor's news release [here](#), the Letter from Iowa Medicaid Director Mikki Stier [here](#), and the Letter from CMS [here](#).

The IME Communications distribution list receives the most recent information regarding Medicaid Modernization. If you'd like to subscribe to these email notifications, please email "subscribe" along with your name, organization and contact information to [IMECommunications@dhs.state.ia.us](mailto:IMECommunications@dhs.state.ia.us).

Visit Iowa's Medicaid Modernization website: <https://dhs.iowa.gov/ime/about/initiatives/MedicaidModernization>

### **IPHA Medicaid Modernization Webinars**

The Iowa Public Health Association (IPHA), with support from Mid-Iowa Health Foundation and the United Way of Central Iowa, has produced a series of webinars to address what Medicaid modernization means for Iowa's public health system and how public health and safety net providers can leverage it to improve population health.

#### **Part I: Medicaid Modernization: What Does It Mean for Public Health?**

- View recorded [webinar](#) and [presentation slides](#)

#### **Part II: Medicaid Modernization: Key Considerations for Public Health Contracting**

- View recorded [webinar](#) and [presentation Slides](#)

#### **Part III: Connecting MCOs to Iowa's Public Health Providers for Medicaid Modernization**

- View recorded [webinar](#) and presentation slides: [IPHC Moderator Slides](#) and [Medicaid Modernization: Partner with Public Health? Yes!](#)

These resources and more are available on the IPHA [website](#).

## Health Insurance Marketplace

The 2016 Health Insurance Marketplace Open Enrollment was November 1, 2015 – January 31, 2016. People may qualify for Special Enrollment Periods allowing them to enroll outside of Open Enrollment if they have certain life events, like getting married, having a baby, or losing other coverage. To determine if someone qualifies for a Special Enrollment Period, visit this screening tool: [www.healthcare.gov/screener/marketplace.html](http://www.healthcare.gov/screener/marketplace.html)

*There is no enrollment period for any Medicaid program.* Individuals can continue to apply for Medicaid and *hawk-i* through Iowa DHS by visiting <https://dhsservices.iowa.gov> or calling the DHS Contact Center at 1-855-889-7985. [Learn more about Iowa Medicaid Enrollment Here](#)

### **2015 Iowa Marketplace Enrollment Data: (November 15, 2014 – February 15, 2015)**

- 45,162 Iowans selected a Marketplace plan
  - 53% were new consumers
  - 47% were consumers reenrolling in Marketplace coverage
- 31% were under age 35
- 86% received financial assistance

Source: [https://aspe.hhs.gov/sites/default/files/pdf/83656/ib\\_2015mar\\_enrollment.pdf](https://aspe.hhs.gov/sites/default/files/pdf/83656/ib_2015mar_enrollment.pdf)