

**House File 188 - Introduced**

HOUSE FILE 188

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**A BILL FOR**

1 An Act relating to the evaluation of Medicaid-managed care  
2 long-term services and supports.

3 BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF IOWA:

1 Section 1. DATA REPORTING — MEDICAID MANAGED CARE  
2 LONG-TERM SERVICES AND SUPPORTS. The department of health  
3 and human services shall contractually require each Medicaid  
4 managed care organization (MCO) to report each quarter all of  
5 the following information from the previous quarter regarding  
6 the MCO's long-term services and supports (LTSS) population  
7 members:

8 1. The total amount expended on the LTSS population  
9 categorized by institutional and noninstitutional setting and  
10 by target population.

11 2. Any reductions or increases in the total amount expended  
12 on the LTSS population categorized by setting and target  
13 population and the reasons for the reduction or increase such  
14 as changes in the service setting, changes attributable to  
15 level of care determinations or redeterminations, decreased  
16 or increased utilization of inpatient or outpatient services,  
17 reduced or increased cost per unit or service, and other  
18 factors.

19 3. Trends identified in expenditures and the services  
20 provided to the LTSS population.

21 Sec. 2. MEDICAID MANAGED CARE LONG-TERM SERVICES AND  
22 SUPPORTS POPULATION — METRICS REVIEW AND RECOMMENDATIONS.

23 1. The department of health and human services shall  
24 convene stakeholders with expertise or interest in the LTSS  
25 population to review existing performance and outcome metrics  
26 for managed LTSS to determine if the current metrics provide  
27 constructive information to ensure the population is receiving  
28 access to necessary services and supports, that person-centered  
29 care and decision making are being promoted, and that the  
30 delivery system is not resulting in adverse selection or  
31 creating incentives to underserve or deny claims for members.  
32 The stakeholder group shall review national LTSS population  
33 evaluation tools and metrics and shall make recommendations  
34 to the governor and the general assembly by October 1, 2023,  
35 for data collection based on a core set of LTSS-specific

1 quality and performance metrics. The core set of metrics  
2 recommended shall address the full spectrum of complex needs  
3 for individuals accessing LTSS and allow effective evaluation  
4 beyond structural elements and service delivery processes by  
5 incorporating measures of individual outcomes and personal  
6 experiences. The core set of metrics recommended shall go  
7 beyond clinical measures and focus on quality of life and  
8 quality of care outcomes, and shall provide for direct input  
9 through surveys and face-to-face level encounter data solicited  
10 from LTSS consumers and their support networks.

11 2. For the purposes of this section, "managed LTSS" means  
12 long-term services and supports delivered through Medicaid  
13 managed care.

14 EXPLANATION

15 The inclusion of this explanation does not constitute agreement with  
16 the explanation's substance by the members of the general assembly.

17 This bill relates to Medicaid managed long-term services  
18 and supports (LTSS). The bill requires the department of  
19 health and human services (HHS) to contractually require each  
20 Medicaid managed care organization (MCO) to report each quarter  
21 specific information from the previous quarter regarding the  
22 LTSS population members covered by the MCO including data  
23 related to the total amount expended on the LTSS population  
24 categorized by institutional and noninstitutional setting and  
25 by target population; reductions or increases in the total  
26 amount expended by setting and target population and the  
27 reasons for the reduction or increase; and trends identified in  
28 expenditures and services provided.

29 The bill also requires HHS to convene stakeholders with  
30 expertise or interest in the LTSS population to review existing  
31 metrics for the managed LTSS population to determine if the  
32 current metrics provide constructive information to ensure  
33 the population is receiving access to necessary services and  
34 supports, that person-centered care and decision making are  
35 being promoted, and that the delivery system is not resulting

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1 in adverse selection or creating incentives to underserve or  
2 deny claims for members. The stakeholder group is required to  
3 review national LTSS population evaluation tools and metrics  
4 and make recommendations to the governor and the general  
5 assembly by October 1, 2023, for data collection based on a  
6 core set of LTSS-specific metrics.