

# **Medicaid Update**

**HHS Budget Subcommittee** 

February 9, 2021

### **Overview**

- Managed Care Organization (MCO) updates
  - Contract changes
  - Iowa Total Care audit
- ► COVID-19 Updates
  - Increased enrollment
  - Service utilization
  - Vaccine





## **MCO Updates**



### **MCO Contract Changes**

- Added contract language about different relief payments available to providers during COVID-19.
- Appeal rights now remove the restriction of following a verbal notice with a written notice.
- Both MCOs are required to use the same Electronic Visit Verification vendor.
- Added a Pay for Performance measure around social determinants of health.



### **MCO Contract Changes**

- ► MCOs must reprocess 90% of all claim errors within 30 calendar days unless MCOs must implement a system configuration change.
  - In case of a configuration change, payment must be made within 60 calendar days.
- Adjusted the Medical Loss Ratio (MLR) for the MCOs from 88% to 89% for SFY21.
- A risk corridor was put into place for the January 1, 2021 through June 30, 2021 rating period.



### **lowa Total Care Withhold**

- In January 2020 we withheld \$44 million from Iowa Total Care (ITC) for multiple payment issues with providers.
- An outside vendor, Myers and Stauffer has been working with ITC to conduct an audit.
  - ITC is paying for a portion of the cost of the audit.
- There was two phases to the audit.
  - ▶ In Phase 1 Myers and Stauffer did a sampling of claims for 13 specific providers with multiple payment issues.
  - ▶ In Phase 2 they verified ITC's claims system configuration corrections through a sampling of all related claims.



### **lowa Total Care Withhold**

- Phase 1 was completed in December 2020.
- Phase 2 is scheduled to be completed by end of March.
  - Phase 2 is broken into two methodologies: "analytics" and "sampling".
  - Estimated completion date for analytics is mid-February.
  - Sampling methodologies completed end of March.
- Payments will be made to ITC based on the validation of the two methodologies provided from the audit.





## **COVID-19 Updates**



### **Increased Enrollment**

- ► The U.S. Department of Health and Human Services recently extended the federal public health emergency through April 20, 2021.
- In order to continue to accept the enhanced FMAP, we are required to maintain eligibility for all members throughout the public health emergency.



### **Service Utilization During Pandemic**

- ► There has been an upward trend of telehealth services beginning in January 2020 through September 2020.
- The biggest increases in telehealth utilization has been in:
  - Evaluation and management.
  - Vision and hearing.
  - Behavioral testing/assessment.
  - Alcohol and drug abuse treatment



### **Service Utilization During Pandemic**

- ▶ Claims for non-emergency medical transportation were down about 45 percent between January 2020 and September 2020 compared to the previous year.
- An analysis of other services that have seen a decrease during the public health emergency is currently underway.



#### **COVID-19 Vaccine**

- The Department has issued Informational Letters (ILs) with billing guidance for providers.
- The Department also has developed a specific email for providers to submit billing questions.
  - ► The questions and answers are being posted on the Department's website.
- The Department is actively engaged with providers and pharmacies and is assisting with any issues or questions related to billing for the vaccine.



#### **COVID-19 Vaccine**

- The MCOs will be doing outreach to members.
  - ▶ They know where their home-bound members live.
  - Outreach will be similar to Marshalltown tornado.
- The vaccine is free to Medicaid members. There's no copay or prior authorization.
  - Providers are receiving a vaccine administration fee.



### **Questions?**

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