



IowaCare

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What is IowaCare?

- Limited benefit health care
- Individuals NOT eligible for Medicaid
- Iowans between 19-64 years old
- Income below 200% FPL
- Single adults & childless couples
- Premiums and/or co-pays may apply
- **66,580 adults were enrolled as of December 31, 2012**



Statutory History

- Enacted in 2005
- Iowa Code Chapter 249J
- CMS 1115 demonstration waiver
- Statutory and Waiver extensions approved in 2010 to continue the program



Services

Services Covered

- Prenatal Care
- Yearly physicals
- Smoking cessation
- Limited inpatient and outpatient hospital care
- Some dental services, if available at medical home
- Primary care services at assigned medical home

Services NOT Covered

- Transportation
 - Iowa DOT launched limited “TransitCare” to provide low cost public transportation
- Mental Health Care
- Prescription Drugs
- Home Health Services
- Medical Equipment & Supplies
- Rehabilitative or other services at any non-IowaCare provider



Who treats IowaCare members?

- Six Federally Qualified Health Centers (FQHCs)
- Three Indian Health Centers
- Two Hospitals:
 - University of Iowa Hospitals and Clinics (UIHC)
 - Broadlawns Medical Center



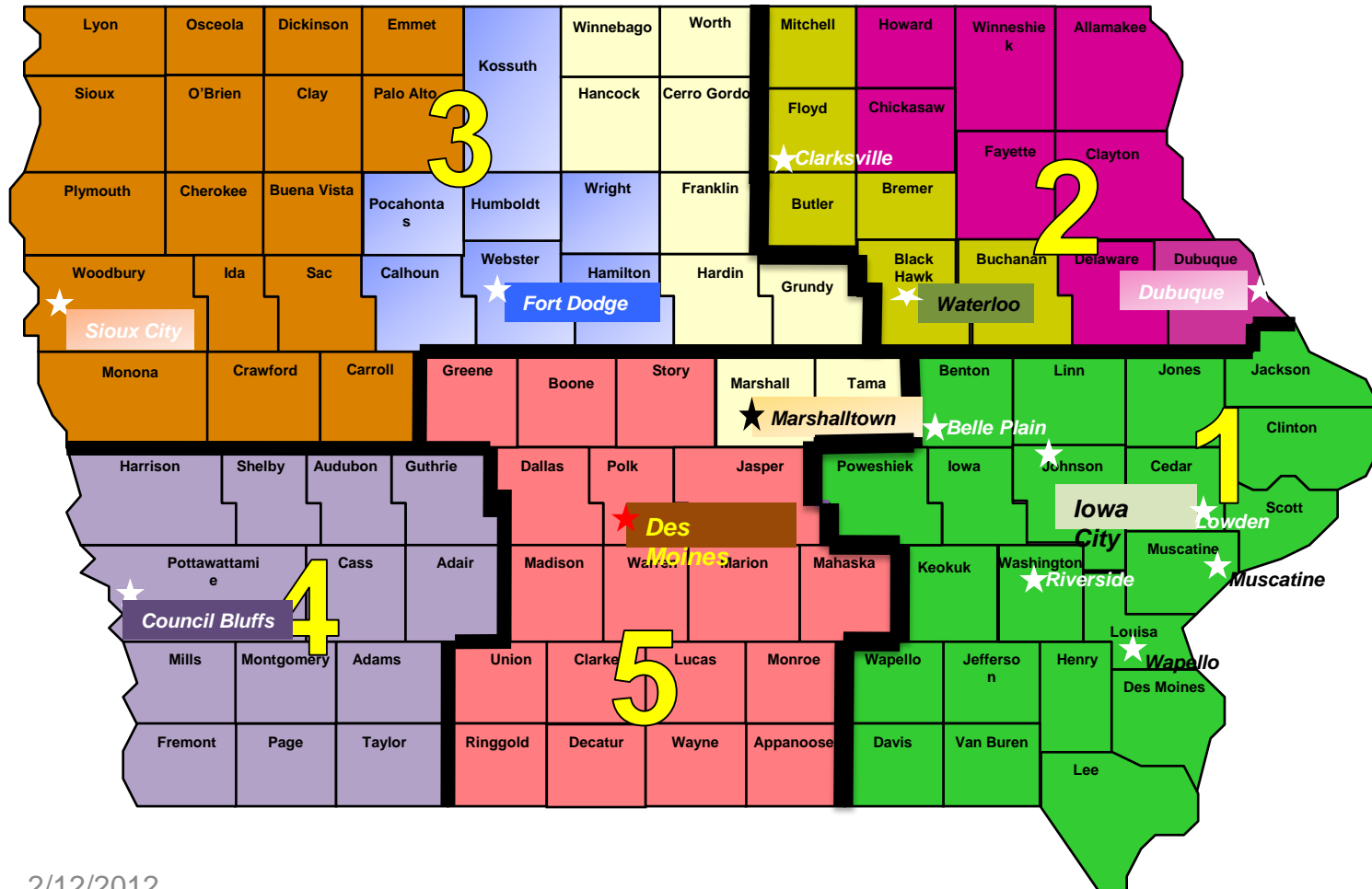
IowaCare Program Design

- Basic primary care available from assigned regional medical homes
- The medical homes coordinate care
- FQHCs, UIHC and Broadlawns are certified Medical Homes
- Specialty and hospital care provided at Broadlawns and UIHC (with referral from medical home)



Iowa Department of Human Services

IowaCare Provider Network: January 1, 2013



Medical Homes:

- Siouxland
- PHC
- Broadlawns
- CHCFD
- Peoples
- Crescent
- UIHC
- CBHC

Participating Indian Health Centers:

- Meskwaki Tribal Health Center – Tama, IA
- Winnebago IHS Hospital – Winnebago, NE
- Fred LeRoy Health and Wellness Center – Omaha, NE



Who are IowaCare members?

- Low-income adults not eligible for Medicaid
- 23% have never had health insurance; 59% have not had insurance for more than 2 years
- High incidence of unmanaged chronic disease
- 42% have one or more chronic conditions
- Self report poorer health than Medicaid population
- 36% self report depression
- Approx 40% of members who leave program become eligible for SSI

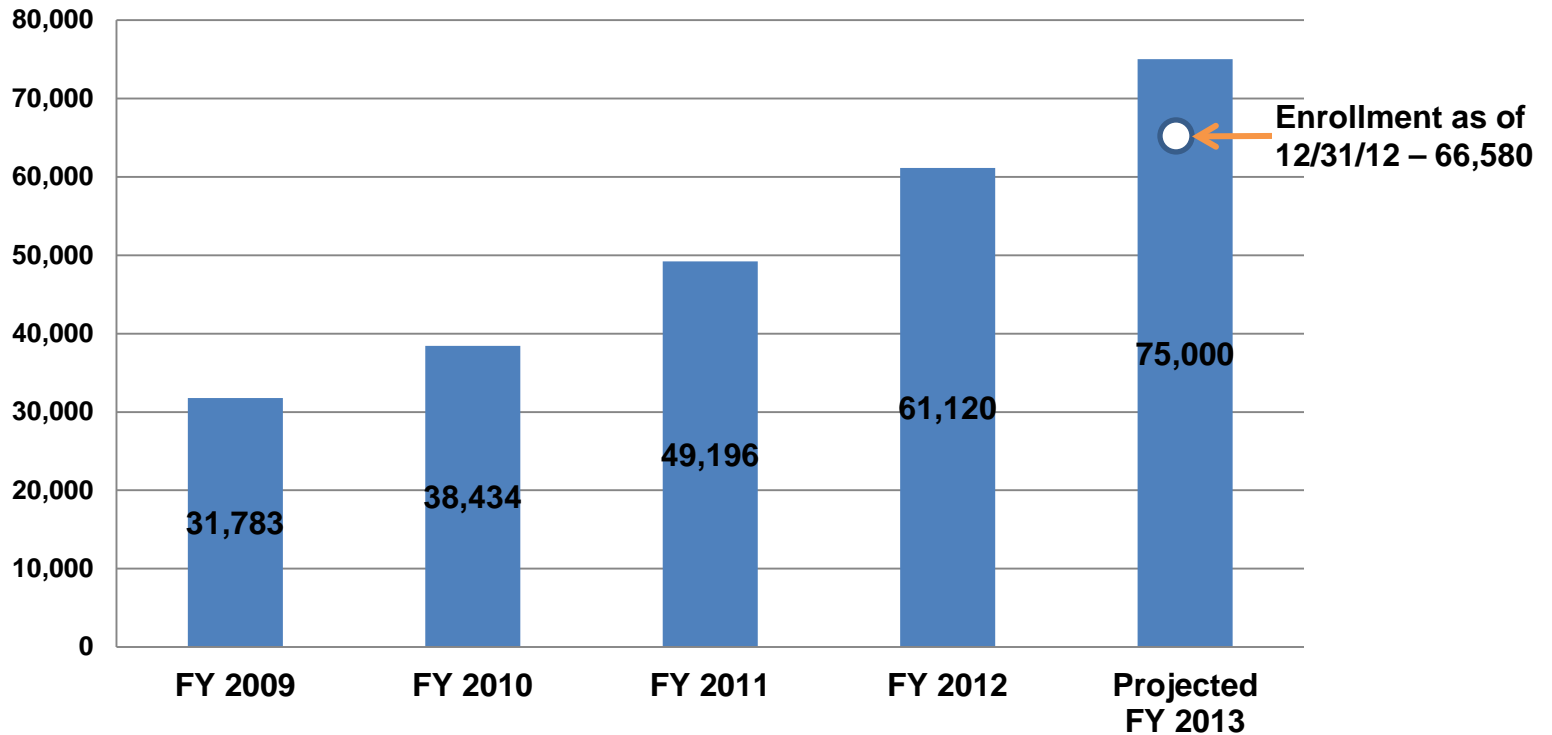


Recent Program Changes

- Funding Pools created in 2011 to address significant issues with non-covered services
- Proposed Enrollment Cap – subject to CMS approval
 - Enrollment growth has been significant and exceeding provider and fiscal capacity
 - Cap based on total enrollees before 6/1/13, effective 7/1/13
 - Consider open enrollment on a quarterly basis



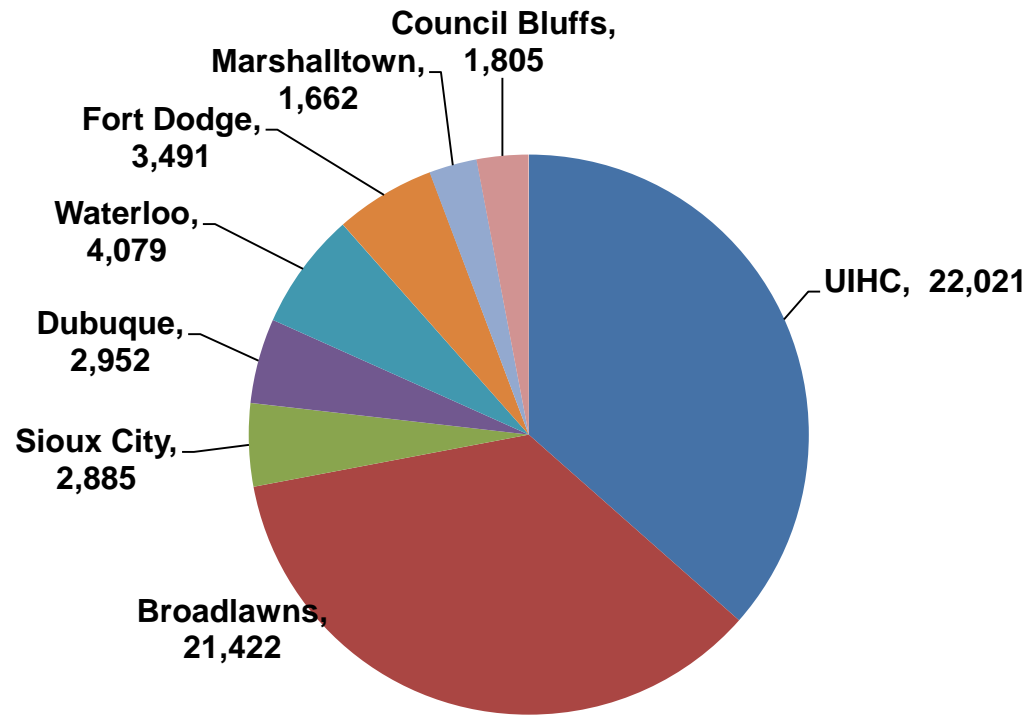
IowaCare Enrollment



* Shows enrollment as of the end of the Fiscal Year



Enrollment by Medical Home

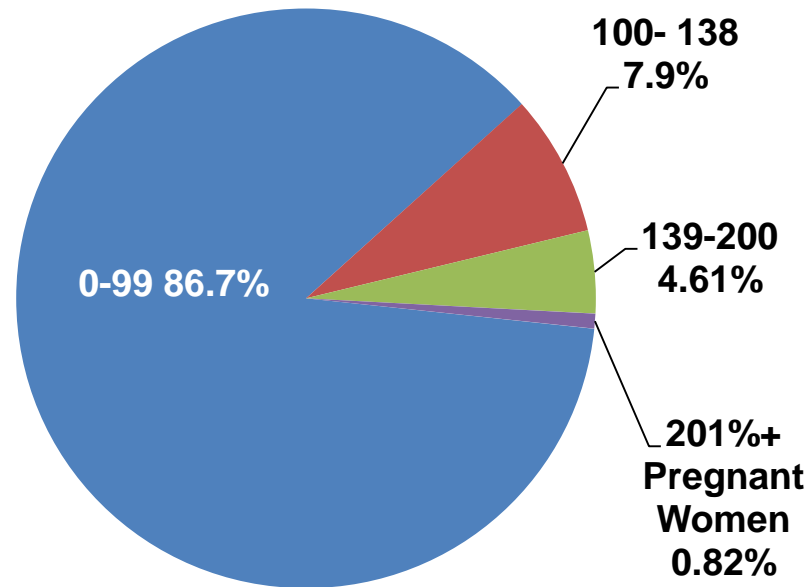




- 94.6% of IowaCare members have incomes below 138% of the Federal Poverty Level

Federal Poverty Levels for family of 1:
100% = \$11,490/year
138% = \$15,856/year
200% = \$22,980/year

Member Percent of Poverty (July 2012)





Medical Home Results

- In the first six months of medical home implementation
 - Access to primary care was demonstrated through 18,717 same-day office visits. (Same day visits avoid potential trips to hospital emergency rooms.)
- Increased primary and preventative care due to care coordination
 - 83% of IowaCare members with diabetes had appropriate test needed to manage their disease
 - 62% of members had their cholesterol checked.

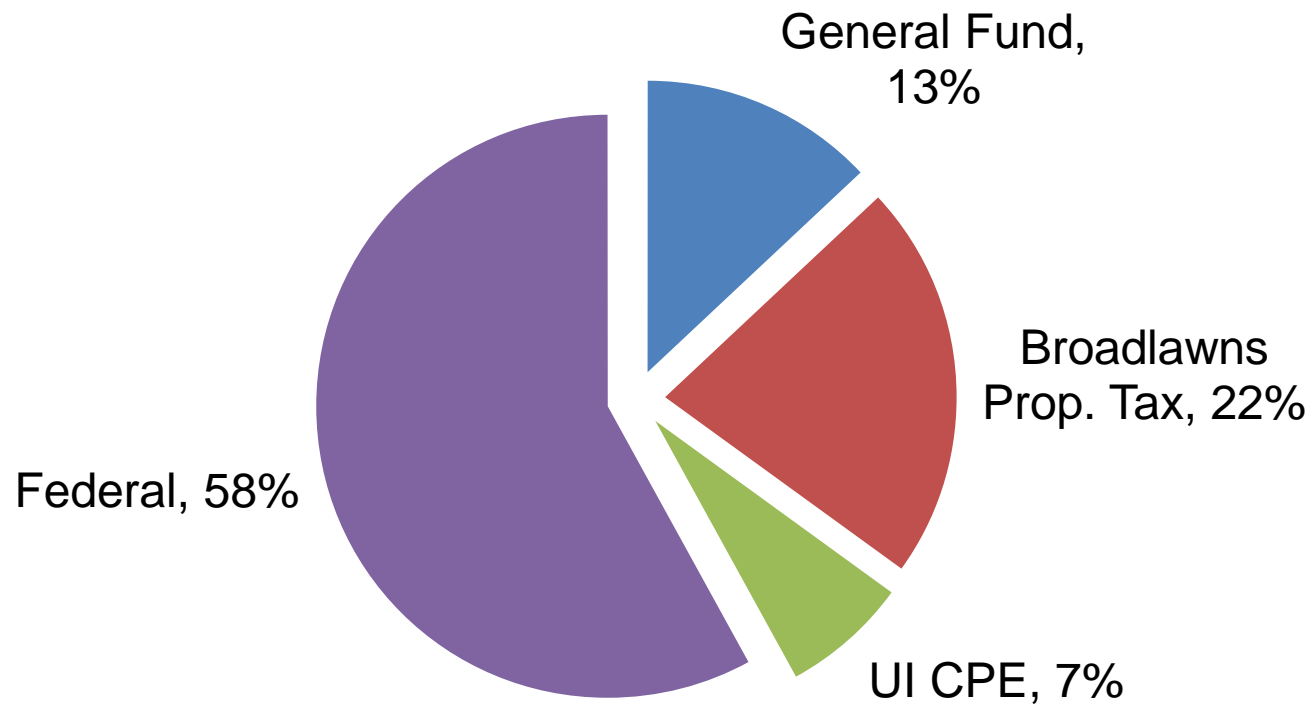


Program Costs

- \$162,099,515 total expenditures in FY 2012
- \$2,640 average cost per person in FY 2012
- IowaCare providers provide a significant amount of services using their own funds, including prescription drugs and other non-covered services



Funding Sources *





Governor's Budget

- Funding level continues the IowaCare program in FY14 & FY15

State Appropriations	FY 2013	FY 2014	FY 2015
General Fund	\$8,684,329	\$23,842,449	\$23,842,449
Proposed Supplemental	\$7,320,093	\$0	\$0
General Fund Total	\$16,004,422	\$23,842,449	\$23,842,449
Annual Increase		\$7,838,027	\$0



IowaCare Future

- Waiver expires December 31, 2013
- Iowa Code 249J expires October 31, 2013
 - Legislative fix needed
- What happens after December 31, 2013?



Options Being Discussed

**IowaCare or
IowaCare
with
Changes**

**Medicaid
Expansion**

**IowaCare
Expires /
No
Expansion**

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CMS announced they will consider applications to extend 1115 Waiver Programs. CMS has not provided specifics on what they will approve.



1115 Waiver Process/Timeline

- **May 30** Complete waiver submission
- **June 1** Public notice and comment period
- **July 1** Submit application to CMS (expect six months negotiation)
- **December 31** IowaCare Waiver expires
- **January 1, 2014** new waiver begins (if approved by CMS)



Questions?