

## IowaCare Implementation & Experience at the University of Iowa Hospitals and Clinics & Carver College of Medicine

Prepared for

**Medical Assistance Projections and Assessment Council**

Prepared By

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## Organization of Presentation

- \* Volume & Utilization Analysis
- \* Demographic Analysis
- \* Diagnosis Analysis
- \* Areas of Concern

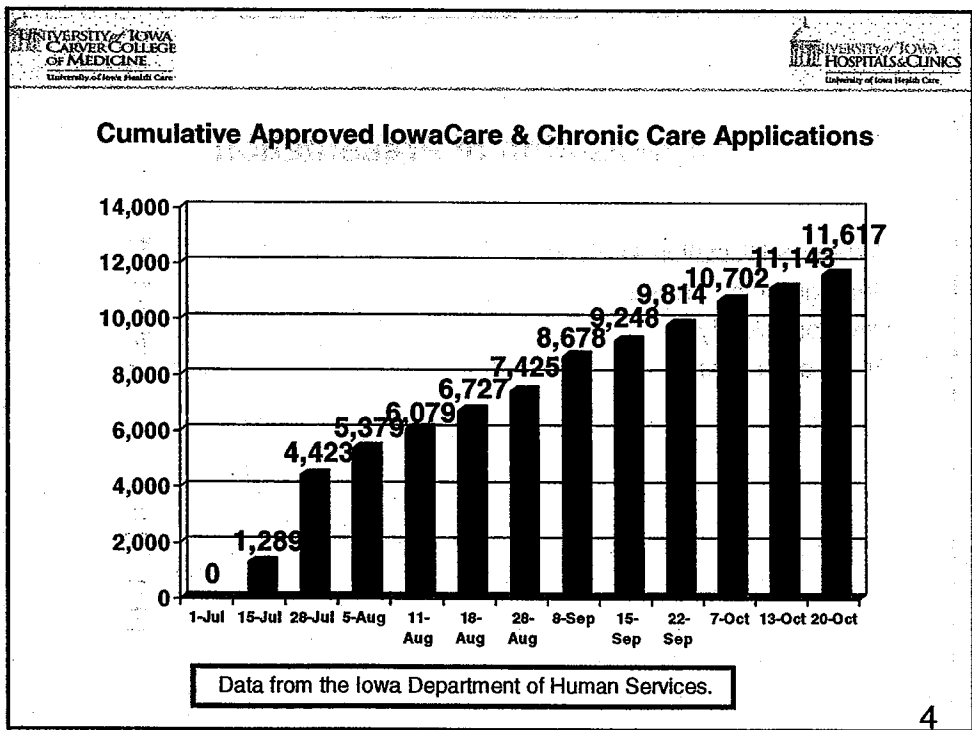
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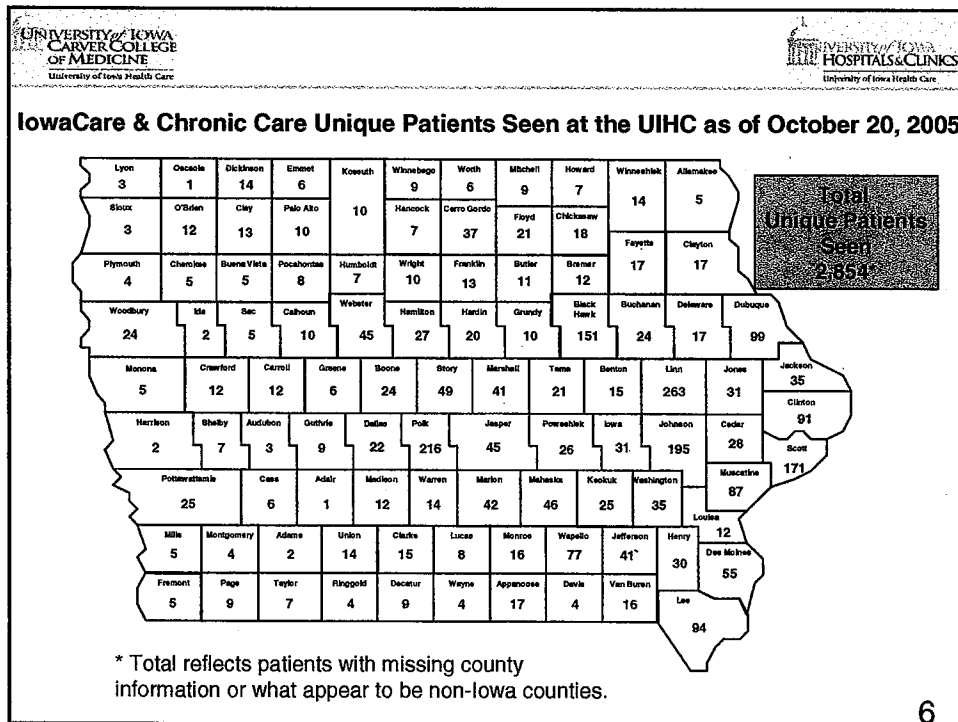
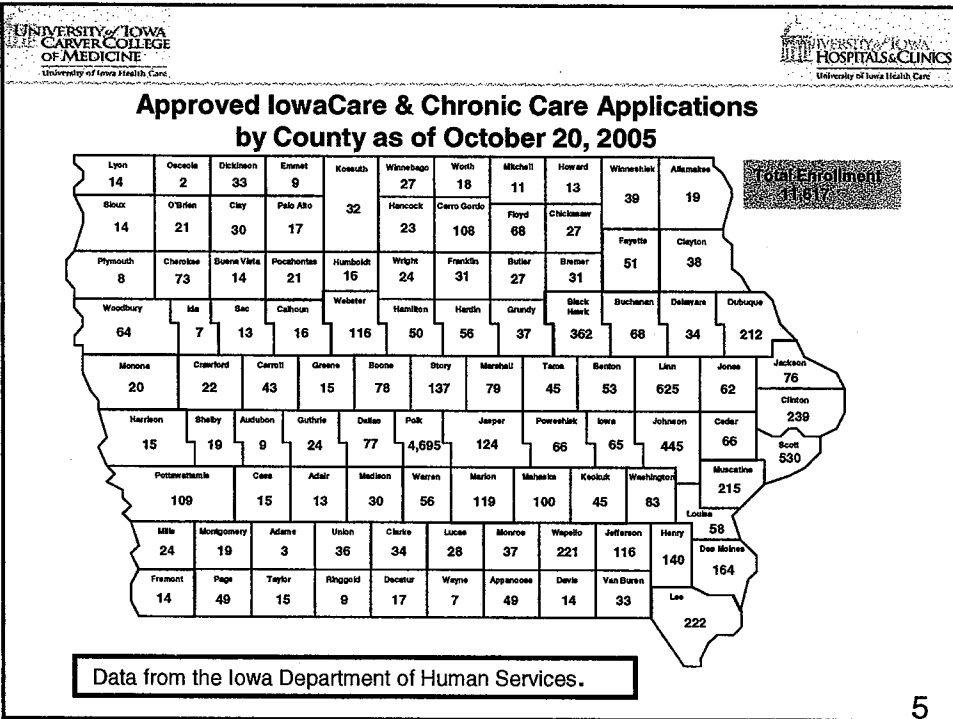
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# Volume & Utilization Analysis

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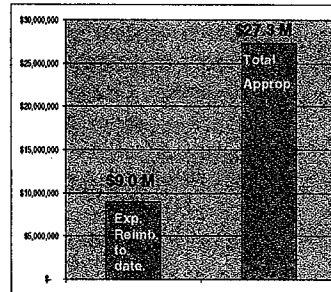






## UIHC Experience with IowaCare and Chronic Care Patients through October 20, 2005 (cont.)

- The value of hospital services provided at the UIHC for IowaCare and Chronic Care patients is \$25.0 M.
- The estimated Medicaid reimbursement associated with the UIHC services is \$9.0 M (implies approximately 33.0% of the \$27.3 M appropriation for the UIHC for the entire FY 06 time period has already been expended).



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## UIHC Experience with IowaCare and Chronic Care Patients through October 20, 2005 (cont.)

- Subsidization of the patient transportation program not counted toward the appropriation regularly occurs and was over \$60,000 for the month of August alone.
- The value of donated physician services by the Carver College of Medicine for IowaCare and Chronic Care patients not counted toward the appropriation is \$9.0 M.
- The value of donated hospital and physician services provided to state institution patients not counted toward the appropriation is \$6.5 M (\$4.8 M in hospital services and \$1.7 M in physician services).

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## Regents Are Required to Participate in a Workgroup to Review Provision of Care to State Institution Patients\*

- The director of human services is to convene a workgroup comprised of the director, the director of the department of corrections, the president of the state board of regents, and a representative of the university of Iowa hospitals and clinics to **review the provision of treatment and care to the inmates, students, patients, and former inmates.**
- The number and costs of caring for such patients are to be examined, as well as the **effect of any proposed alternatives** for provision of care and treatment for inmates, students, patients, or former inmates, including the proposed completion of the hospital unit at the Iowa state penitentiary at Fort Madison.
- The workgroup is to **submit a report** of its findings to the governor and the general assembly no later than **December 31, 2005.**

**NOTE: No meetings scheduled yet.**

\*Per HF 841, Sec. 61

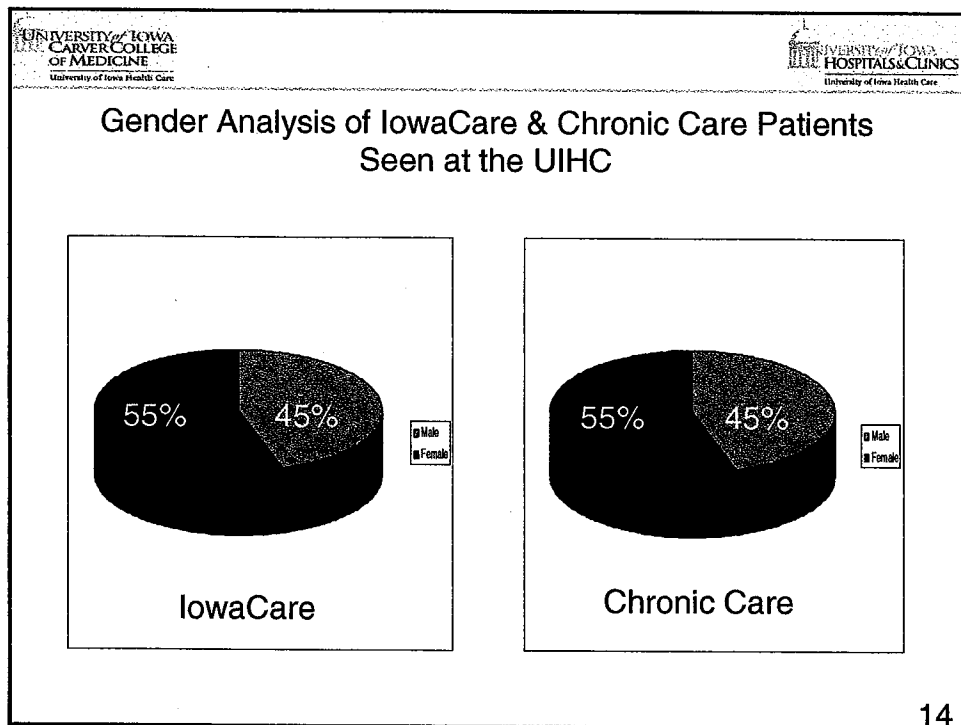
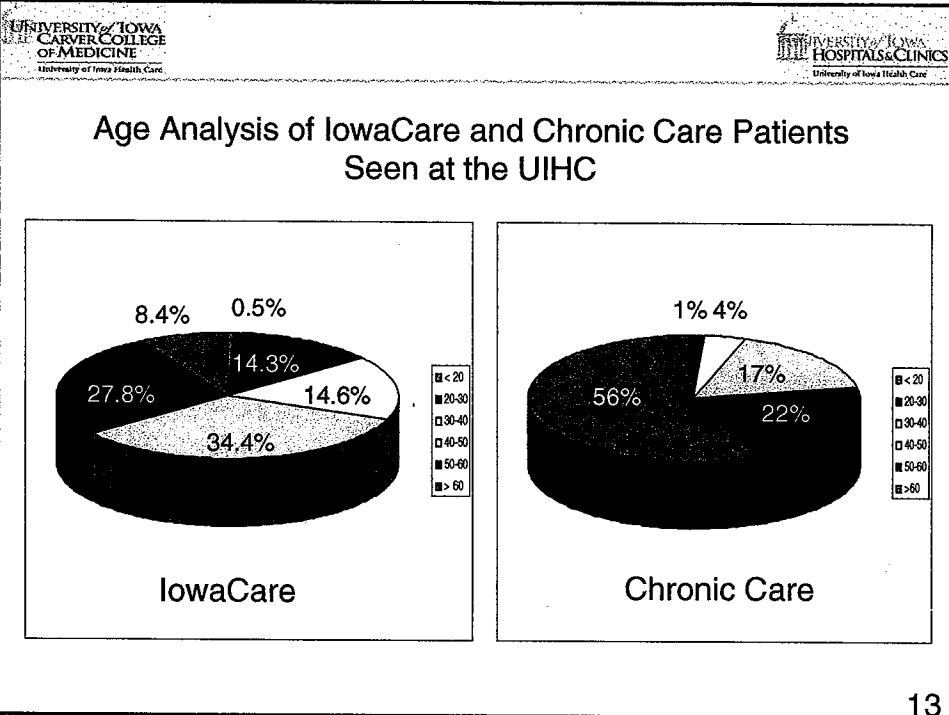
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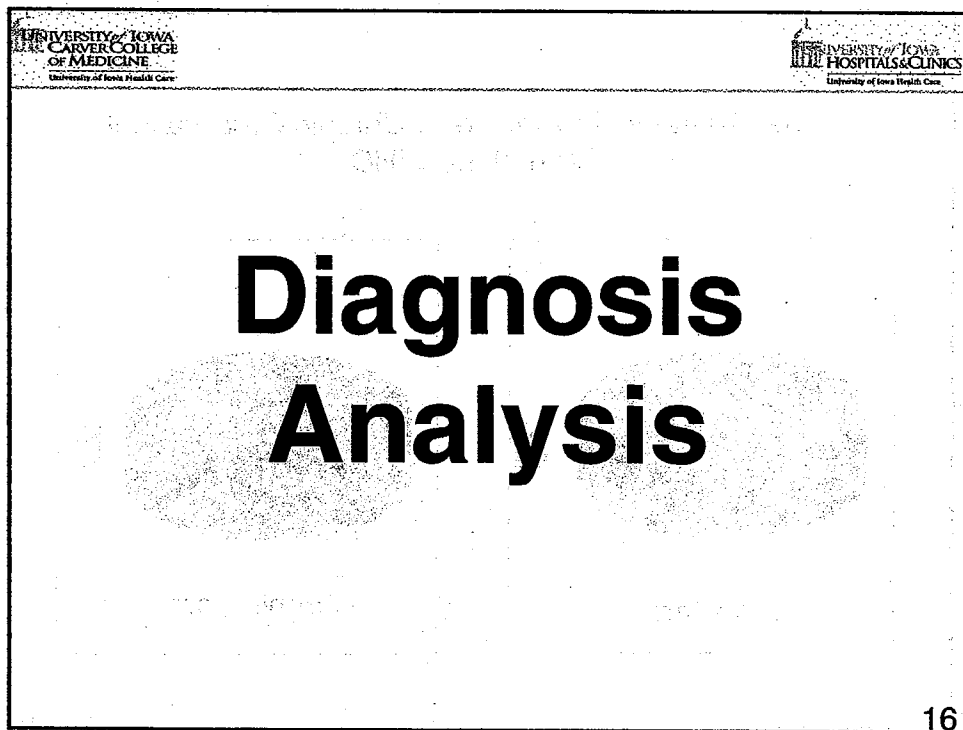
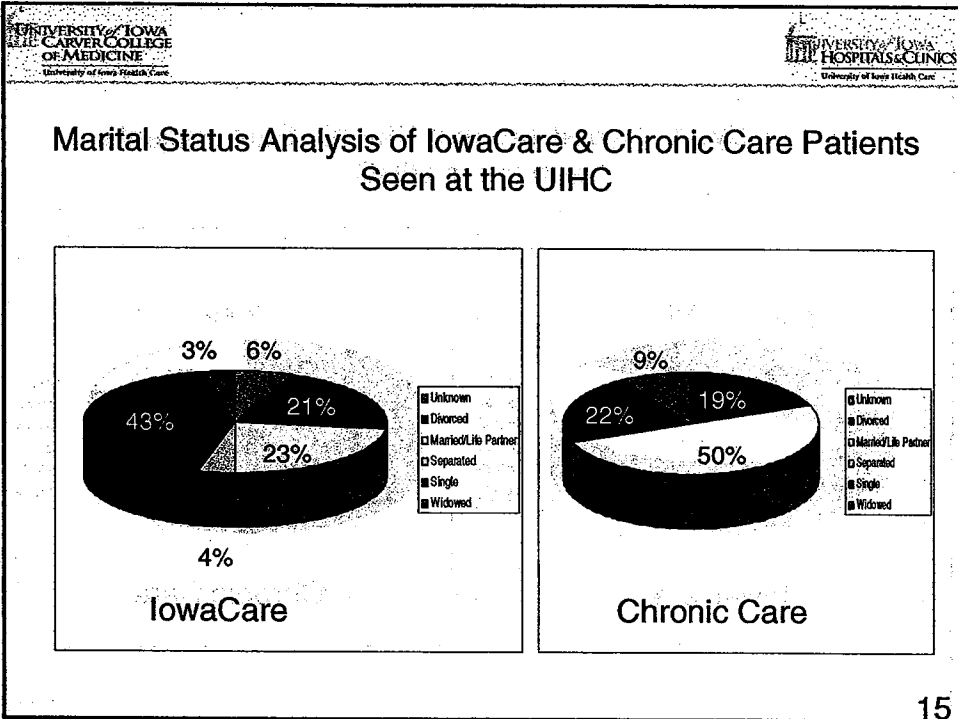
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# Demographic Analysis

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Rank	DRG Description
1	410 – Chemotherapy w/o acute leukemia as secondary diagnosis
2	209 – Major joint & limb reattachment proc of lower extremity
3 tie	202 – Cirrhosis & alcoholic hepatitis
3 tie	28 – Traumatic stupor & coma, coma , 1 hr, age > 17 w cc
5	125 – Circulatory disorders except AMI, w card cath w/o complex diag
6 tie	359 – Uterine & adnexa proc for non-malignancy w/o cc
6 tie	449 – Poisoning & toxic effects of drugs, age > 17 w cc
6 tie	219 – Lower extrem & humer proc except hip, foot, femur, age > 17 w/o cc
9 tie	143 – Chest pain
9 tie	415 – OR procedure for infectious & parasitic diseases
9 tie	124 – Circulatory disorders except AMI, w card cath & complex dx
9 tie	174 – GI hemorrhage w cc

\*Cumulatively account for only 13.3% of admissions, indicating a wide variety of DRGs have been assigned.

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DRG	IowaCare Rank	State Papers Rank
410 – Chemotherapy w/o acute leukemia as a secondary diagnosis	1	10 tie
209 – Major joint & limb reattachment proc of lower extremity	2	3
125 – Circulatory disorders except AMI, w card cath w/o complex diag	5	1
359 – Uterine & adnexa proc for non-malignancy w/o cc	6	2
143 – Chest pain	9 tie	5
124 – Circulatory disorders except AMI, w card cath & complex dx	9 tie	6

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## The Most Common Principal Diagnoses for IowaCare Outpatients at the UIHC

Rank	Principal Diagnosis
1	V58.0 – Radiotherapy
2	250.00 – Diabetes mellitus w/o mention of complication
3	401.9 – Hypertension - unspecified
4	786.50 – Chest pain - unspecified
5	724.2 – Lumbago
6	789.00 – Abdominal pain
7	070.54 – Chronic hepatitis C w/o mention of hepatic coma
8	V58.49 – Other specified aftercare following surgery
9	366.16 – Nuclear sclerosis
10	V58.1 – Encounter for antineoplastic chemotherapy and immunotherapy

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# Areas of Concern

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## Patient-Related Areas of Concern

- Limited pharmaceutical benefits for enrollees and lack of coverage of durable medical equipment.
- Disenrollments due to failure to pay premiums and the associated issues for beneficiaries and network providers.
- The future of the Chronic Care program and the need for timely notification of changes to beneficiaries to permit them to make prudent decisions.

# QUESTIONS?