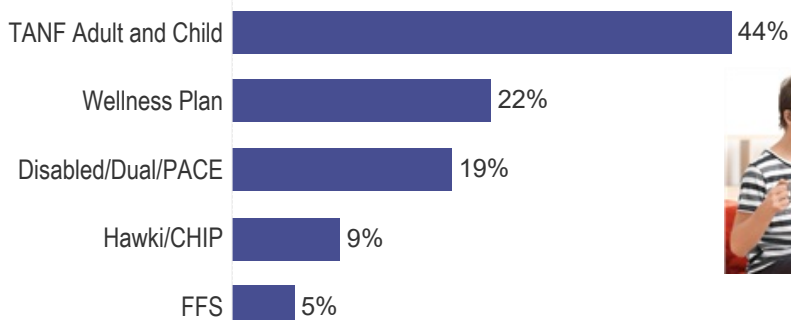


Overview



Iowa Medicaid provides medically necessary healthcare coverage for financially needy adults, children, parents with children, people with disabilities, elderly people and pregnant women to help them live healthy, stable, and self-sufficient lives.

January 2019* **698K** or **22%** of Iowans are enrolled in **IA Medicaid/CHIP**



*Distinct member counts included Hawki, FFS, HIPP and Current MCO Members based on eligibility date pulled after the 10th of the month.

How are **Medicare** and **Medicaid** different?

Medicare

Medicaid

ADMINISTERED Federal

State

FUNDED Federal

Joint Federal and State

BENEFICIARIES People age 65 and older, people under 65 with certain disabilities, and anyone with end-stage renal disease

Low-income adults, pregnant women, children, some disabled, and some elderly

COVERAGE Consistent nationally
Primary payor

Varies by state
Payor of last resort

**ELIGIBLES
IN IOWA**

Medicare
502,083

Dual
96,084

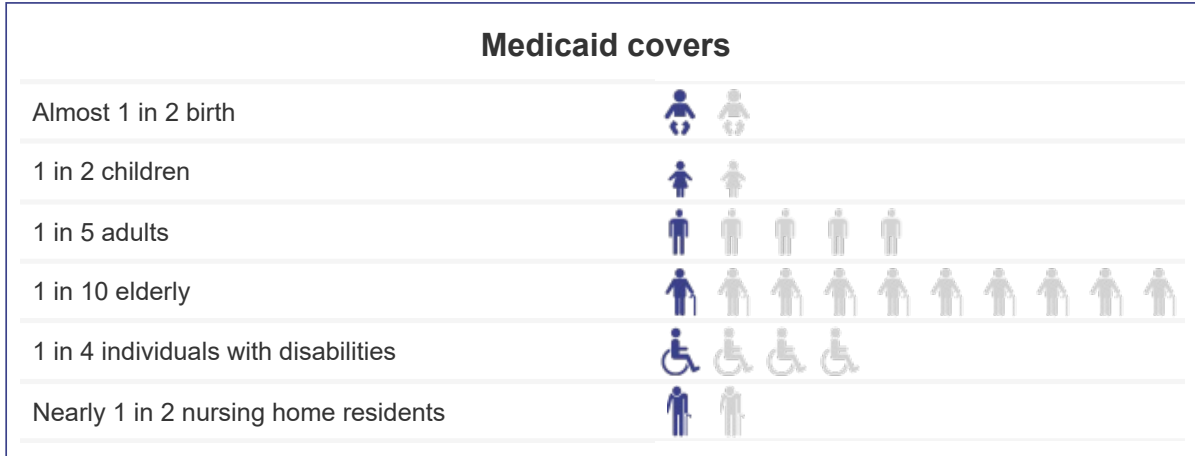
Medicaid
602,025

*Close to 96,000 of Iowa Medicaid eligible are also eligible for Medicare. Iowa Medicaid pays the Medicare premiums, co-pays, and deductibles for these “dual-eligibles.” Iowa Medicaid also covers Medicaid services not covered by Medicare for these “dual-eligibles,” such as stays in nursing home over/past 100 days. Medicare data is from the CMS 2017 Medicare Enrollment Section report.

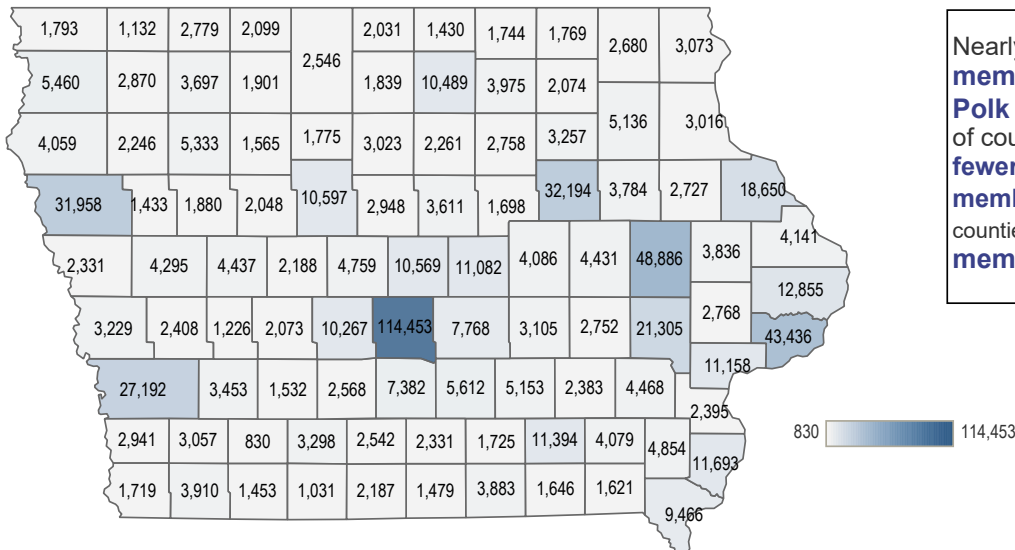
Who's Covered



Medicaid coverage is in place for 45% of births, 48% of children and nursing home residence and 24% lowan's with disabilities



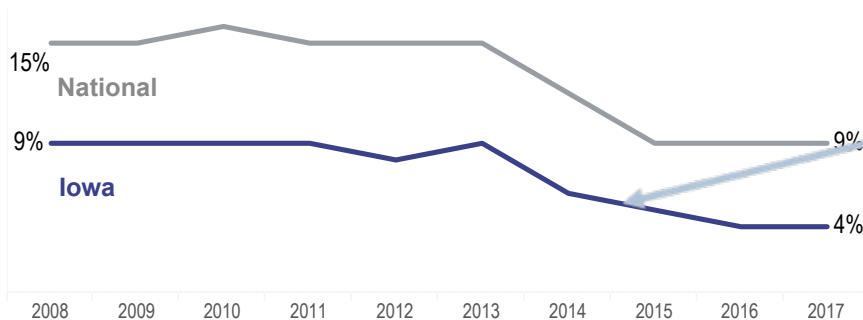
Number of Medicaid Members by County, for January 2019



Nearly 17% of members reside in Polk County, 75% of counties have fewer than 5K members and 24% of counties have 5-50k members

Iowa is a Medicaid Expansion State Under the Affordable Care Act

Percent uninsured, 2008-2017



The number of uninsured lowans has steadily decreased since Medicaid expansion was implemented in January 2014.

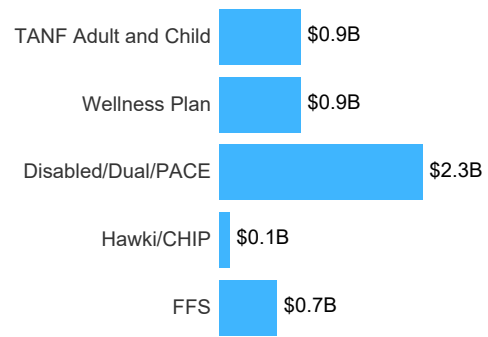
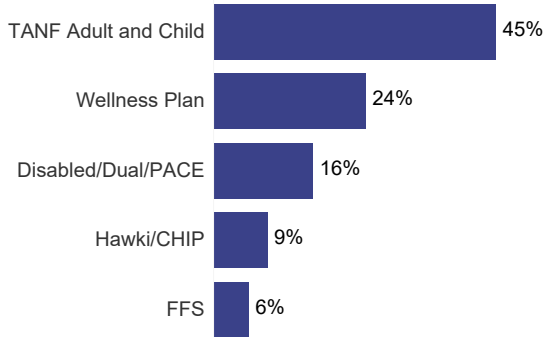
Cost Of Care



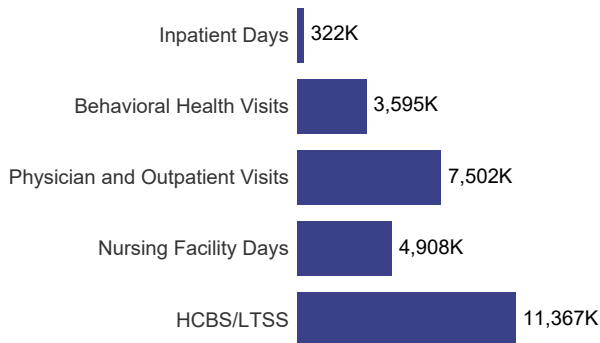
Medicaid expenditures vary by population group. Information for State Fiscal Year 2018 is displayed below. Membership represents distinct covered members within the fiscal year while expenditures represent all medical and dental capitation payments as well as Fee-For-Service (FFS) claims payments.

806K distinct SFY 2018 members

\$4.96B capitation and FFS claims expense



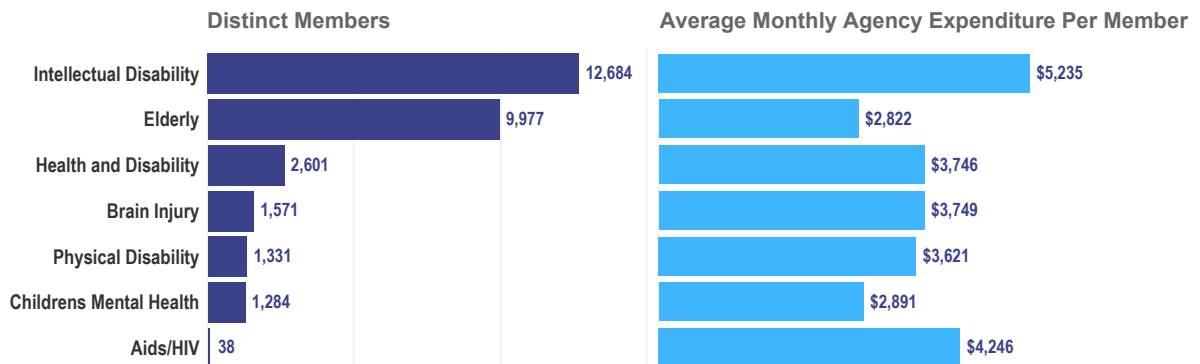
Select Services By Setting



| | TANF Adult and Child | Wellness Plan | Disabled/Dual/PACE | Hawki/CHIP | FFS | Grand Total |
|---------------------------------|----------------------|---------------|--------------------|------------|--------|-------------|
| Inpatient Days | \$186M | \$98M | \$110M | \$4M | \$78M | \$476M |
| Behavioral Health Visits | \$98M | \$65M | \$111M | \$13M | \$78M | \$365M |
| Physician and Outpatient Visits | \$296M | \$233M | \$220M | \$38M | \$128M | \$915M |
| Nursing Facility Days | \$1M | \$3M | \$862M | | \$85M | \$951M |
| HCBS/LTSS | \$2M | \$8M | \$722M | \$0M | \$76M | \$808M |
| | \$583M | \$407M | \$2,025M | \$55M | \$445M | |

Select service categories represents actual claims expenditure for both the FFS and MCO population

29K Distinct Members received Expanded services under specialized waivers in SFY 2018.



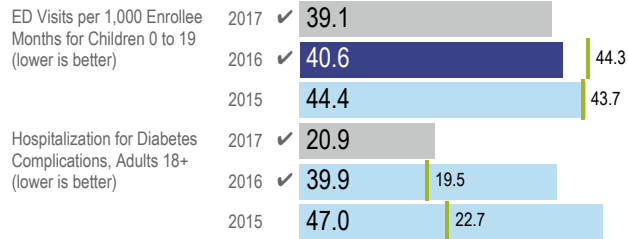
Quality and Outcomes

Iowa has made progress in reducing ED and Diabetes

Hospitalization rates

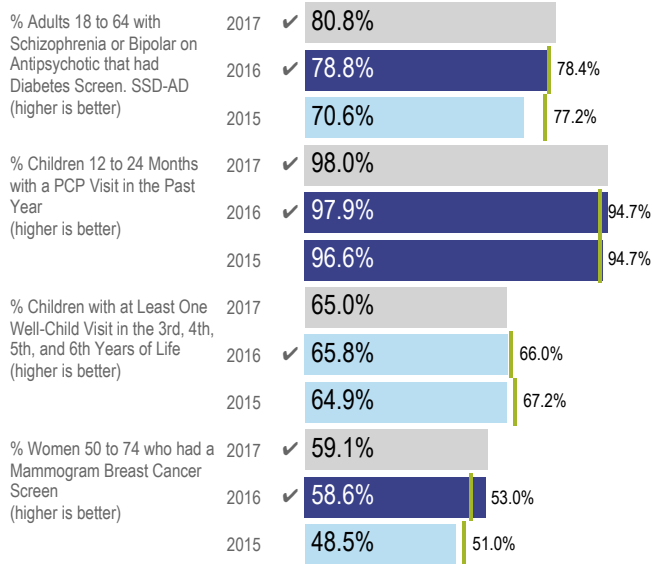
compared to **National Mean** when available
(lower is better)

Better than National mean
Worse than National mean
✓ = improvement from prior year

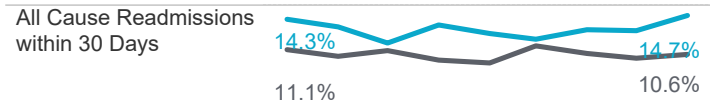
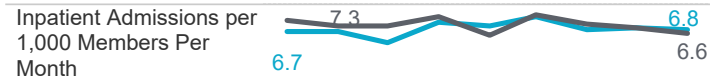


Most member receive key preventative services

Iowa compared to **National mean** when available (higher is better)



Adult non-emergent ED use rates are decreasing for both Amerigroup and UnitedHealthcare



In the Long-Term Support Services (LTSS) population from December of 2017 to March of 2019 the ratio of members receiving Community Based Services increased while members receiving Facility based services decreased



IA Health Link: Member Options

As of July of 2019, members have an option of Amerigroup and Iowa Total Care

24 Million Claims Processed

The IA Health Link plans process over 24,000,000 medical claims each year, averaging under 10 days from receipt to payment for all non-pharmacy claims, and 12 days for pharmacy claims. Only 1 in 10,000 claims results in appeals.

Iowa Managed Care Program: Administered Effectively

| | Amerigroup | UnitedHealth |
|---|------------|--------------|
| Fiscal Year-End Member Count | 190,205 | 427,402 |
| Members reporting their services make life better | 98% | 95% |
| Average days for pharmacy prior authorizations | <1 | 1 |
| Average days to complete non-pharmacy authorization | 3.7 | 0.7 |
| Average days to process pharmacy claims | 11 | 12 |
| Average days to pay medical claim | 6.8 | 8.6 |