



**Iowa Wellness Plan Quarterly Report  
1115 Demonstration Waiver  
January 1, 2015 – March 31, 2015**

**May 4, 2015**

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## **I. EXECUTIVE SUMMARY**

The Iowa Health and Wellness Plan (IHAWP) became effective on January 1, 2014, as the state's approach to expand Medicaid under the Patient Protection and Affordable Care Act (ACA). The IHAWP is comprised of two distinct 1115 waiver programs. Individuals are eligible for a program based on status relative to the Federal Poverty Level (FPL):

1. The Iowa Wellness Plan (IWP) – Covers individuals ages 19 through 64 with income up to 100 percent of the FPL. In this plan, coverage is administered directly through the state Medicaid agency, the Iowa Medicaid Enterprise (IME).
2. The Iowa Marketplace Choice Plan (MPC) – Also covers ages 19 through 64, but with income from 101 percent of the FPL up to 133 percent of the FPL. This plan employs premium assistance to purchase qualified health plans (QHP) from the Healthcare Marketplace established under the ACA. Members may select to receive coverage through a QHP, Coventry Health Care of Iowa (Coventry), or through the Iowa Wellness plan.

The IHAWP contains an incentive program that is intended to improve the use of preventive services and other healthy behaviors. Beginning year two of the IHAWP program, monthly premiums for enrollees with incomes between 50 percent and 133 percent of the FPL were imposed. Premiums were waived if members completed all behaviors during year one. For each subsequent year, members will have the opportunity to complete healthy behaviors and continue to have their premiums waived for the next enrollment period. During the first quarter of 2015, the IME worked on finalizing a process to monitor premium related activities.

The IME continued to work with CMS for technical assistance and guidance on meeting requirements of the Special Terms and Conditions (STCs) for both plans. During first quarter 2015, the IME continued to face challenges with the administration of the IHAWP while accomplishing several key activities:

- Additional communication to IHAWP members about healthy behaviors and the premium contribution process;
- Provider outreach and targeted ACO communications;
- Finalization of the Healthy Behaviors Evaluation Design; and
- Statewide implementation of the Department of Corrections enrollment process for offenders in institutions.

Following this letter is a detailed report of key activities and statistics for the first quarter of 2015 consistent with the STCs. Do not hesitate to contact me at 515-256-4644 or [jlovela@dhs.state.ia.us](mailto:jlovela@dhs.state.ia.us), or Deanna Jones at 515-256-4652 or [djones1@dhs.state.ia.us](mailto:djones1@dhs.state.ia.us) should you have any questions about this report or any other aspects of the new programs.

Sincerely,

Julie Lovelady  
Interim Director  
Iowa Medicaid Enterprise

## **II. SIGNIFICANT ACTIVITIES OF THE QUARTER**

### **1. Member Engagement**

Member outreach for the first quarter of 2015 was focused on the implementation of the IHAWP monthly premium contribution process. IHAWP members have received mailings about the program and healthy behavior requirements since second quarter of 2014. The IME will continue to keep members engaged in the Healthy Behavior Program by providing ongoing informational mailings.

A new web page was built to inform members about the contribution process at <https://dhs.iowa.gov/ime/about/iowa-health-and-wellness-plan/membercontributions>.

### **2. Provider Activities**

#### Recruitment:

The IME Provider Services Outreach Team communicated Iowa Wellness Plan information to Iowa providers and specifically targeted primary care providers to address patient needs. The number of participating primary care providers/patient managers increased from 1,532 to 1563 during the first quarter of 2015. Additionally, the state expanded its MCO (Meridian) coverage to 10 more counties.

#### Education:

Throughout the first quarter, community partners and provider associations requested informational meetings, panels, and presentations about the IHAWP. In response to these requests, the outreach team met with the following associations:

- Iowa Medical Group Management Association
- Healthcare Financial Management Association
- Iowa Optometric Assistants Association

#### Accountable Care Organization:

The IME holds monthly or bi-weekly meetings with IWP Accountable Care Organizations (ACOs) to discuss program operations and address issues. In addition, the IME provides monthly updates to affiliated ACOs.

During the first quarter, the IME worked on an ACO Communication Improvement Plan to support utilization of program measures that align with the state's Medical Home Bonus Program. The communication plan is designed to achieve the following goals:

- Improve communications to ACOs by identifying gaps in the current list of communications.
- Support transparency in the system.
- Support the activities of the SIM initiative of improved population health transformed healthcare delivery system and lower costs (triple aim).
- Align overall policy objectives, IME program measures and reporting/communication so that over emphasis of a measure does not overshadow goals of the triple aim.

Updated information about ACOs and the Medical Home Bonus Program can be found at <http://dhs.iowa.gov/ime/about/iowa-health-and-wellness-plan/ACO-VIS>.

Other ACO activity involved the withdrawal of Mercy Medical entities from the University of Iowa Health Alliance. Mercy is now contracting directly with the IME under Mercy ACO, LLC. Effective April 1, 2015, Mercy ACO became the fifth ACO to provide services to the IWP population.

### 3. Significant Events

#### Press Release/Coverage:

Information about the IHAWP shared through public media was primarily on the implementation of the monthly premium contributions. An article from the Associated Press about contributions was published in several newspapers across the state. The article, "Some Iowans will face premiums for Medicaid expansion," can be found in the [Des Moines Register](#).

### 4. Legislative Developments

There were no legislative related activities during the first quarter 2015. The most recent IHAWP administrative rules can be accessed at:

<https://www.legis.iowa.gov/docs/ACO/chapter/04-15-2015.441.74.pdf>

## III. ELIGIBILITY/ENROLLMENT

### 1. Quarterly Enrollment

Over the first quarter, the overall IHAWP population increased by 7 percent for an ending total of 128,786. The IWP component increased over the quarter by 7 percent with an ending total of 95,811.

Individuals who become eligible for the IWP initially receive services in the fee-for-service plan (FFS). They later have an opportunity to choose a primary care case manager or an HMO provider based on availability by county. At the end of March, 13,860 persons were enrolled with the HMO and 50,912 were enrolled with a PCCM. The remaining enrollees were in the process of selecting a provider or reside in a county without PCCM or HMO availability. At the end of the first quarter, 87 of Iowa's 99 counties have managed care access in the IWP.

IWP enrollment totals by county for March 2015 can be found at:

[http://dhs.iowa.gov/sites/default/files/IHAWPEnrollmentMaps\\_March2015.pdf](http://dhs.iowa.gov/sites/default/files/IHAWPEnrollmentMaps_March2015.pdf)

Monthly enrollment totals of the IHAWP population are shown below.

Plan/Coverage Group	January	February	March
Marketplace Choice	29,678	30,815	32,255
Wellness	89,499	92,172	95,811
Presumptive IHAWP*	938	890	720
Total	120,115	123,877	128,786

\*Presumptive IHAWP – Members are defaulted to the Wellness Plan until plan/provider assignments are established.

## 2. Special Population Groups

The state identifies specific population groups enrolled in the IHAWP to ensure their health care needs are met in accordance with the STCs. These groups are comprised of: (1) Nineteen and twenty year-olds, (2) American Indian/Alaskan Natives, and (3) the medically exempt (frail). Below are IWP enrollment totals for these groups at the end of first quarter 2015.

Population Group	January	February	March
19-20 Year-old	4,110	4,238	4,508
American Indian/Alaskan Native	1,091	1,100	1,183
Medically Exempt	9,761	9,847	11,985
Total	14,962	15,185	17,676

## IV. ACCESS/DELIVERY

### 1. Access to Care Standards

Provider access under the IWP follows similar standards that have proven to be effective for the state's Medicaid managed care population. This will ensure the infrastructure for the IWP is adequate for timely access to care for members. The state's access standards are described below.

- Ninety-five percent of IWP members will reside in counties that meet timely access standards.
- Ninety percent of IHAWP members either 1) live in a county that has at least one provider that has an NCQA Element 1B score of at least 50 percent or 2) live within 30 miles of a provider that has an NCQA Element 1B score of at least 50 percent.

### 2. Monitoring Access and NCQA Standards

Each quarter the state will conduct a provider survey to monitor access standards. The IME consulted with the University of Iowa Public Policy Center (PPC) to develop a survey methodology that captures responses from rural, urban, and near-urban providers. The PPC methodology categorizes Iowa's 99 counties into four groups and applies a weighted scale to each group based on the population size. This will ensure the survey accurately reflects the ratio of providers to which members have access. First quarter provider survey results revealed the state met both access and NCQA standards. See Attachment 1 for more information on access standards and survey results.

### 3. Provider Network

See Attachment 2 for maps that show provider access by county for the IHAWP population.

## **V. COMPLAINTS/GRIEVANCES/APPEALS**

### **1. Complaints/Grievances**

IHAWP members have access to IME's Member Services Call Center to express their questions or concerns about the program. During first quarter 2015, the IME received a low number of complaints with the majority consisting of basic questions about IWP benefits. Call Center staff were able to resolve all issues with members during the calls. A summary of these complaints is provided below.

<b>Complaint Type</b>	<b>January</b>	<b>February</b>	<b>March</b>
Benefits and Services	13	27	27
Access	0	3	4
Substance Abuse/Mental Health Access	0	0	1
Quality of Care	0	0	0
Medical Provider Network	4	3	3
Premiums and Cost Sharing	1	7	4
Healthy Behaviors	1	11	3
Non-emergency Medical Transportation	0	0	0
EPSDT Services	0	0	0

### **2. Appeals/Exceptions**

During first quarter IWP members requested 14 exceptions to Medicaid policy and five requests for appeal hearings. See Attachment 3 for more details.

## **VI. Budget Neutrality/Fiscal Issues**

During first quarter, the state did not encounter any significant financial issues related to the IWP. See Attachment 4 for the actual number of member months for the IHAWP as of March 31, 2015.

## **VII. Other Activities**

### **1. Dental Wellness Plan**

During first quarter, there were no major events to report for the Dental Wellness Plan (DWP). See Attachment 5 for a status report of the DWP as of March 31, 2015.

## **2. Healthy Behaviors Program and Premium Monitoring**

In accordance with the STCs, the state is required to monitor premiums after year one of the IHAWP program. This includes reporting data related to premium payment/non-payment for IHAWP members with incomes between 50 and 133 percent of the FPL. This information is contained in Attachment 6. See Attachment 7 for healthy behavior activities of IHAWP members as of March 20, 2015.

## **3. Evaluation Design**

During first quarter, the state submitted the first draft of the Healthy Behaviors Evaluation Design addendum. The state's evaluation team, the University of Iowa Public Policy Center, received guidance from CMS for finalization of the design requirements.

## **4. Department of Corrections Enrollment Process**

The DHS has partnered with the Department of Corrections (DOC) to pilot a streamlined enrollment process for offenders who transition from prison to the community. This new process ensures that an offender eligible for Medicaid benefits has access to coverage at the time of their release. The goal is to connect offenders to necessary health care, including mental health services to assist with reducing the recidivism rate. To date, the enrollment process has been successful for many offenders.

By the end of the first quarter of 2015, all state correctional institutions were participating in the pilot project, with corrections staff trained to assist with application completion and medically exempt forms.

## **VIII. Additional Information**

Please contact Deanna Jones at 515-256-4652 or [djones1@dhs.state.ia.us](mailto:djones1@dhs.state.ia.us), if there are any other materials or suggestions CMS would like to see for IWP related activities during first quarter 2015 or future quarterly reports.



## **Attachments**

1. IWP Provider Access Survey Results
2. IHAWP Network Access Maps
3. IHAWP Appeals and Exceptions Report
4. Financial Reporting - IHAWP Member Months
5. Dental Wellness Plan Status Report
6. Premium Monitoring Report
7. Healthy Behaviors Activity Report

# Iowa Wellness Plan Patient Access Survey – 1<sup>st</sup> Quarter 2015

## **Reporting on Access to Care and NCQA Standards**

Iowa strives to ensure ninety-five percent of members reside in counties that meet timely access to care standards is supported by accumulated results of quarterly surveys of participating patient managers. For first quarter 2015, the IME sampled 199 providers across 99 counties to determine compliance with the following access to care standards:

- 1) Ninety-five percent of Iowa Wellness plan members reside in counties that meet timely access to care standards and
- 2) Ninety percent of members live in a county that either:
  - a) Live in a county that has at least 1 provider that has an NCQA Element 1B score of at least 50 percent or
  - b) Live within 30 miles of a provider that has an NCQA Element 1B score of at least 50 percent.

### **1. Timely Access to Care Standards**

Measures Tracked:

- Patients with urgent symptoms shall be seen within one day of contacting their primary care provider.
- Patients with persistent symptoms shall be seen within 48 hours of reporting of the onset of the symptoms.
- Patient routine visits shall be scheduled within four to six weeks of the date of the patient request the appointment.
- The provider shall provide or arrange for 24-hour, 7-day provider availability to enrolled recipients.

Survey Results - 60 out of 60 providers surveyed met the all of the above access measures.

### **2. NCQA 1B Standards**

Measures Tracked:

- Providing access to routine and urgent care appointments outside of regular business hours.
- Providing continuity of medical record information for care and advice when office is Nt open.
- Providing timely clinical advice by telephone when the office is Nt open. (critical factor)
- Providing timely clinical advice using a secure, interactive electronic system when the office is Nt open.
- Documenting after hours clinical advice in patient records.

Survey Results - 46 out of 60 providers surveyed met at least 3 of the 5 above NCQA measures.

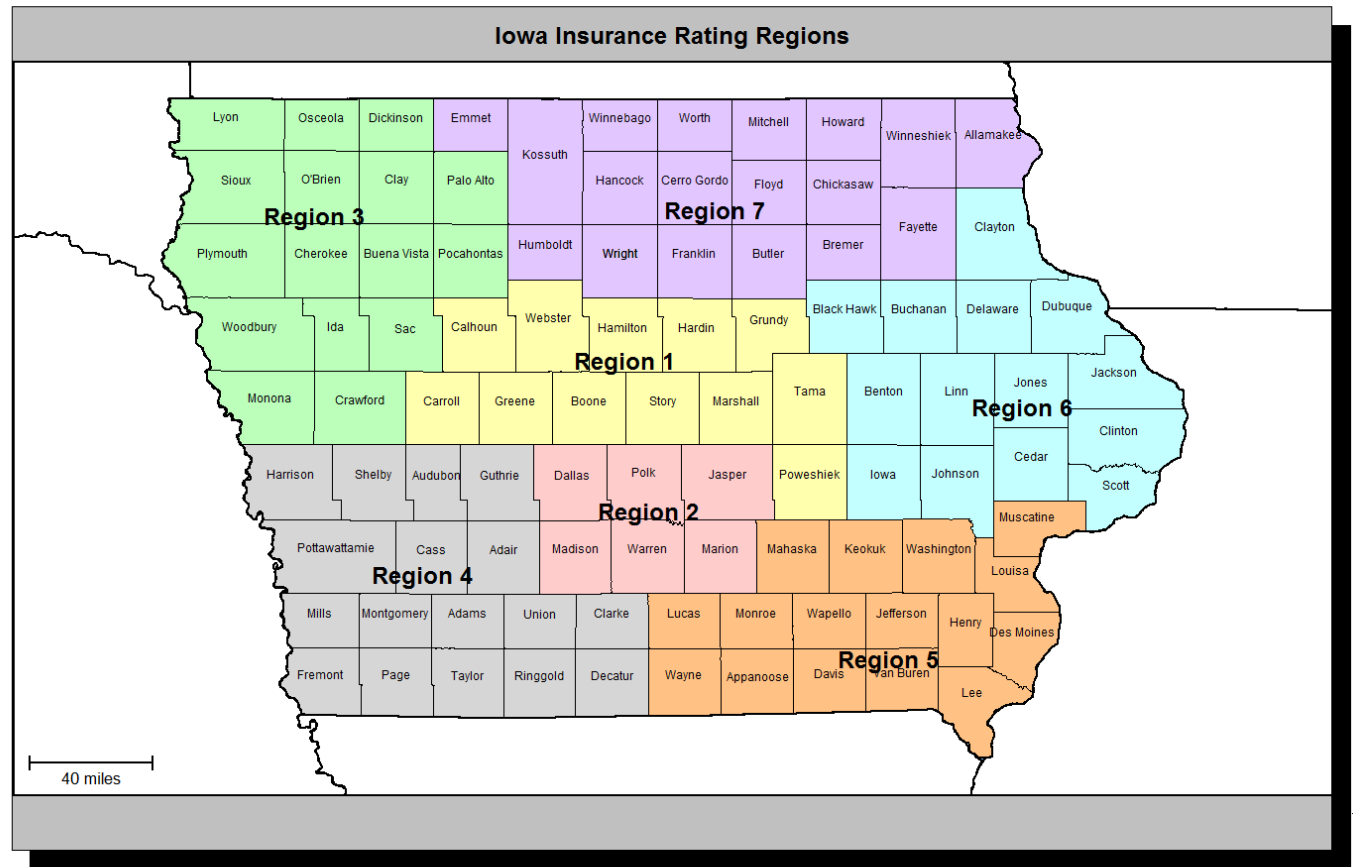
## Survey Results by County

COUNTY	Meets Access to Care Y/N	Routine 4-6 weeks?	Persistent within 48 hours?	Urgent within 24 hours?	Meets NCQA 50% Y/N	Does office provide access to routine and urgent care appointments outside of regular business hours?	Does office provide continuity of medical record information for care and advice when the office is not open?	Does your office provide timely clinical advice by telephone such as a Nurse Line or On Call provider when the office is not open?	Does your office provide timely clinical advice using a secure, interactive electronic system when the office is not open?	Does your office document after hours clinical advice in patient records?
ADAMS	Y	Y	Y	Y	Y	Y	Y	Y	N	Y
APPANOSE	Y	Y	Y	Y	Y	N	N	Y	Y	Y
CALHOUN	Y	Y	Y	Y	Y	N	Y	Y	Y	Y
CARROLL	Y	Y	Y	Y	N	N	N	N	N	N
CRAWFORD	Y	Y	Y	Y	Y	N	Y	Y	N	Y
DECATUR	Y	Y	Y	Y	Y	Y	Y	Y	N	Y
EMMET	Y	Y	Y	Y	N	Y	Y	N	N	Y
FLOYD	Y	Y	Y	Y	Y	N	Y	Y	Y	Y
FRANKLIN	Y	Y	Y	Y	Y	N	Y	Y	N	Y
HANCOCK	Y	Y	Y	Y	Y	Y	Y	Y	N	Y
HUMBOLDT	Y	Y	Y	Y	Y	N	Y	Y	Y	Y
MITCHELL	Y	Y	Y	Y	N	Y	Y	N	N	Y
MONROE	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
RINGGOLD	Y	Y	Y	Y	N	N	N	N	N	N
SAC	Y	Y	Y	Y	Y	N	Y	Y	Y	Y
SIOUX	Y	Y	Y	Y	N	Y	N	N	Y	Y
VAN BUREN	Y	Y	Y	Y	Y	N	Y	Y	Y	Y
WAYNE	Y	Y	Y	Y	Y	N	Y	Y	Y	Y
WINNEBAGO	Y	Y	Y	Y	Y	N	Y	Y	N	Y
WINNESHIEK	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y

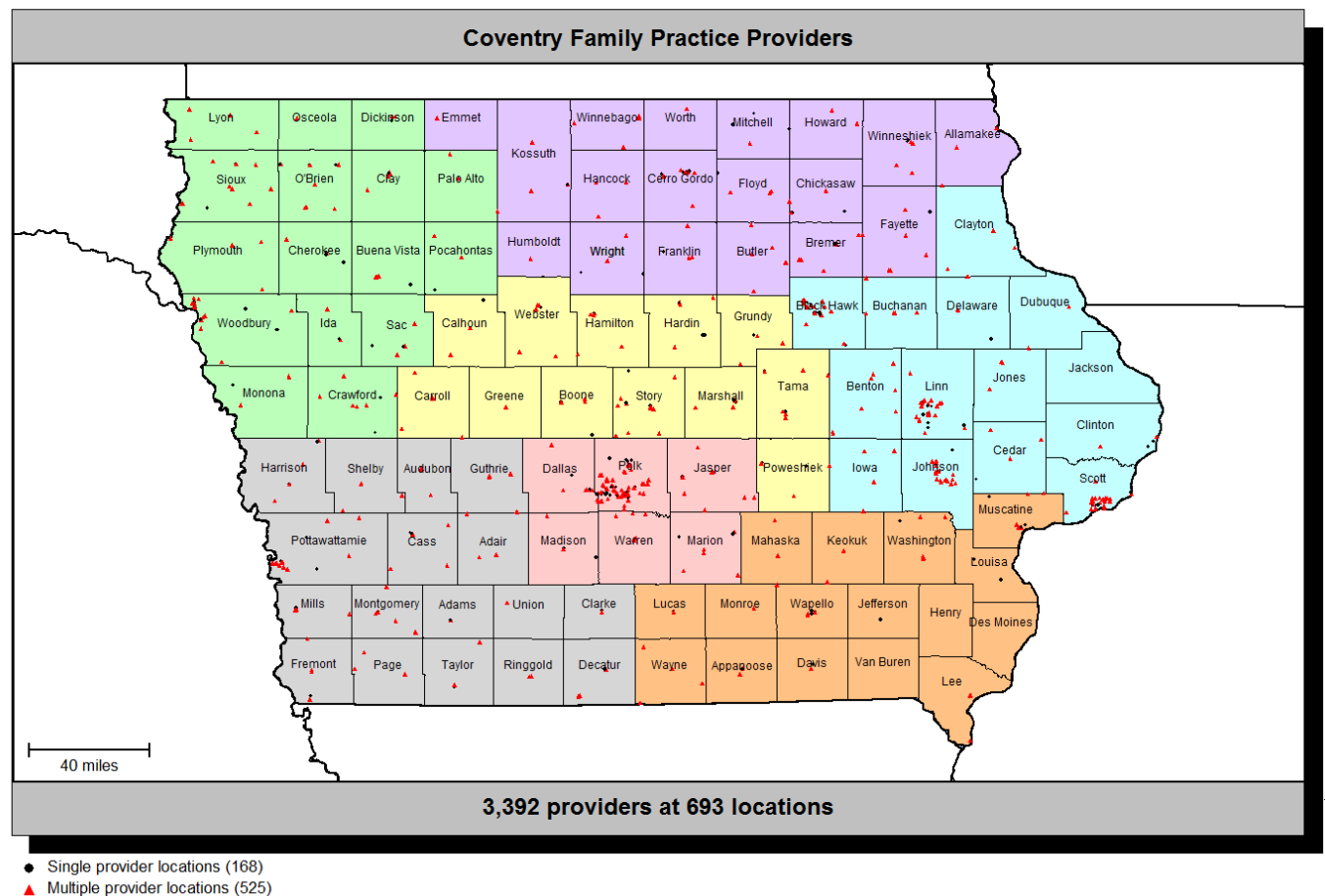
ALLAMAKEE	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
BUCHANAN	Y	Y	Y	Y	N	Y	Y	N	Y	Y
CASS	Y	Y	Y	Y	N	Y	Y	N	Y	Y
CEDAR	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
CERRO GORDO	Y	Y	Y	Y	Y	N	Y	Y	Y	Y
CHEROKEE	Y	Y	Y	Y	Y	N	Y	Y	N	Y
CHICKASAW	Y	Y	Y	Y	Y	N	N	Y	Y	Y
CLAY	Y	Y	Y	Y	Y	Y	N	Y	Y	Y
DAVIS	Y	Y	Y	Y	N	N	Y	N	Y	Y
DELAWARE	Y	Y	Y	Y	Y	Y	Y	Y	N	Y
DES MOINES	Y	Y	Y	Y	Y	N	Y	Y	Y	Y
DICKINSON	Y	Y	Y	Y	Y	Y	Y	N	Y	Y
FAYETTE	Y	Y	Y	Y	Y	N	Y	Y	Y	Y
FREMONT	Y	Y	Y	Y	Y	N	Y	Y	Y	Y
BUTLER	Y	Y	Y	Y	N	N	N	N	N	Y
HAMILTON	Y	Y	Y	Y	N	Y	N	N	N	N
HARDIN	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
HENRY	Y	Y	Y	Y	Y	N	Y	Y	N	Y
HOWARD	Y	Y	Y	Y	Y	Y	N	Y	Y	Y
IOWA	Y	Y	Y	Y	N	Y	Y	N	Y	Y
ADAIR	Y	Y	Y	Y	Y	N	Y	Y	Y	Y
AUDUBON	Y	Y	Y	Y	Y	Y	Y	N	N	Y
BOONE	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
BREMER	Y	Y	Y	Y	Y	N	Y	Y	N	Y
BUTLER	Y	Y	Y	Y	Y	N	Y	Y	Y	Y
CLARKE	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
CLAYTON	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
CLINTON	Y	Y	Y	Y	Y	N	N	Y	Y	Y
IDA	Y	Y	Y	Y	N	N	Y	N	N	Y
JASPER	Y	Y	Y	Y	Y	Y	N	Y	N	Y
KEOKUK	Y	Y	Y	Y	Y	N	Y	Y	Y	Y
MARSHALL	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
KOSSUTH	Y	Y	Y	Y	Y	Y	N	Y	Y	Y

MARSHALL	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
MUSCATINE	Y	Y	Y	Y	Y	N	Y	Y	Y	Y
ADAIR	Y	Y	Y	Y	Y	N	Y	Y	Y	N
BOONE	Y	Y	Y	Y	Y	N	Y	Y	Y	Y
HAMILTON	Y	Y	Y	Y	Y	Y	N	Y	Y	Y
BREMER	Y	Y	Y	Y	Y	Y	N	Y	N	Y
CLINTON	Y	Y	Y	Y	Y	N	Y	Y	Y	Y

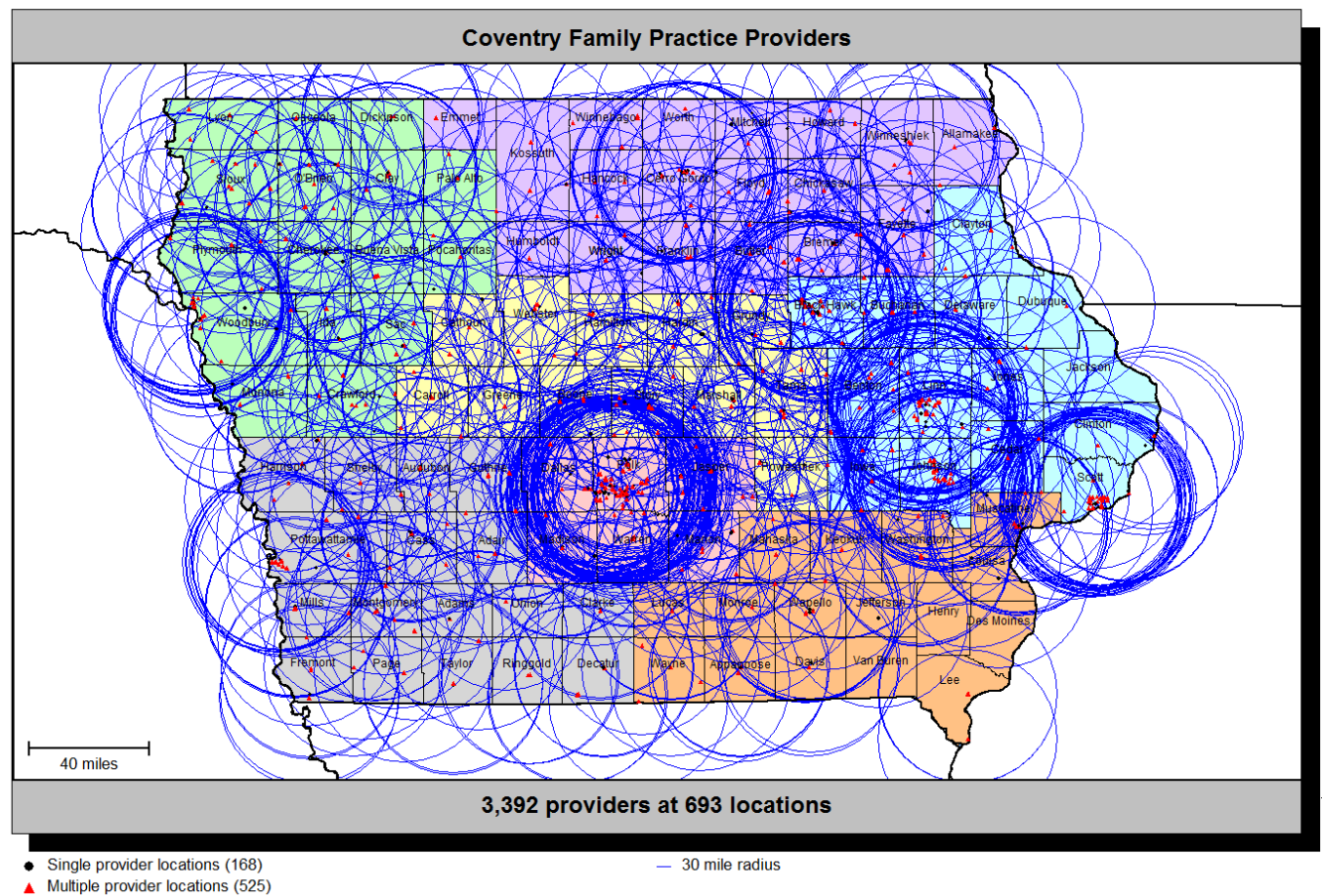
## Overview of Regions



## Provider locations

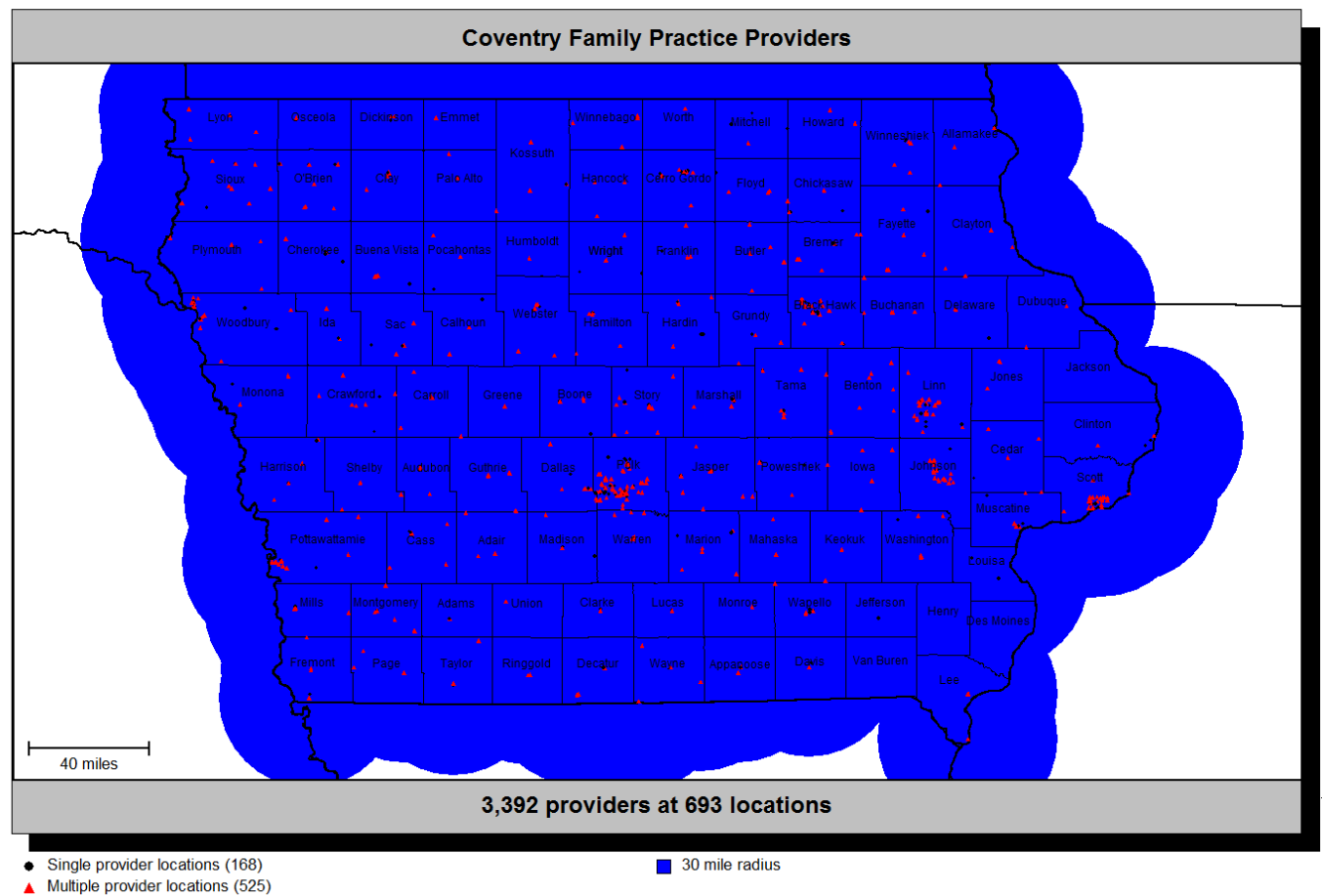


## Provider locations with 30-mile radius

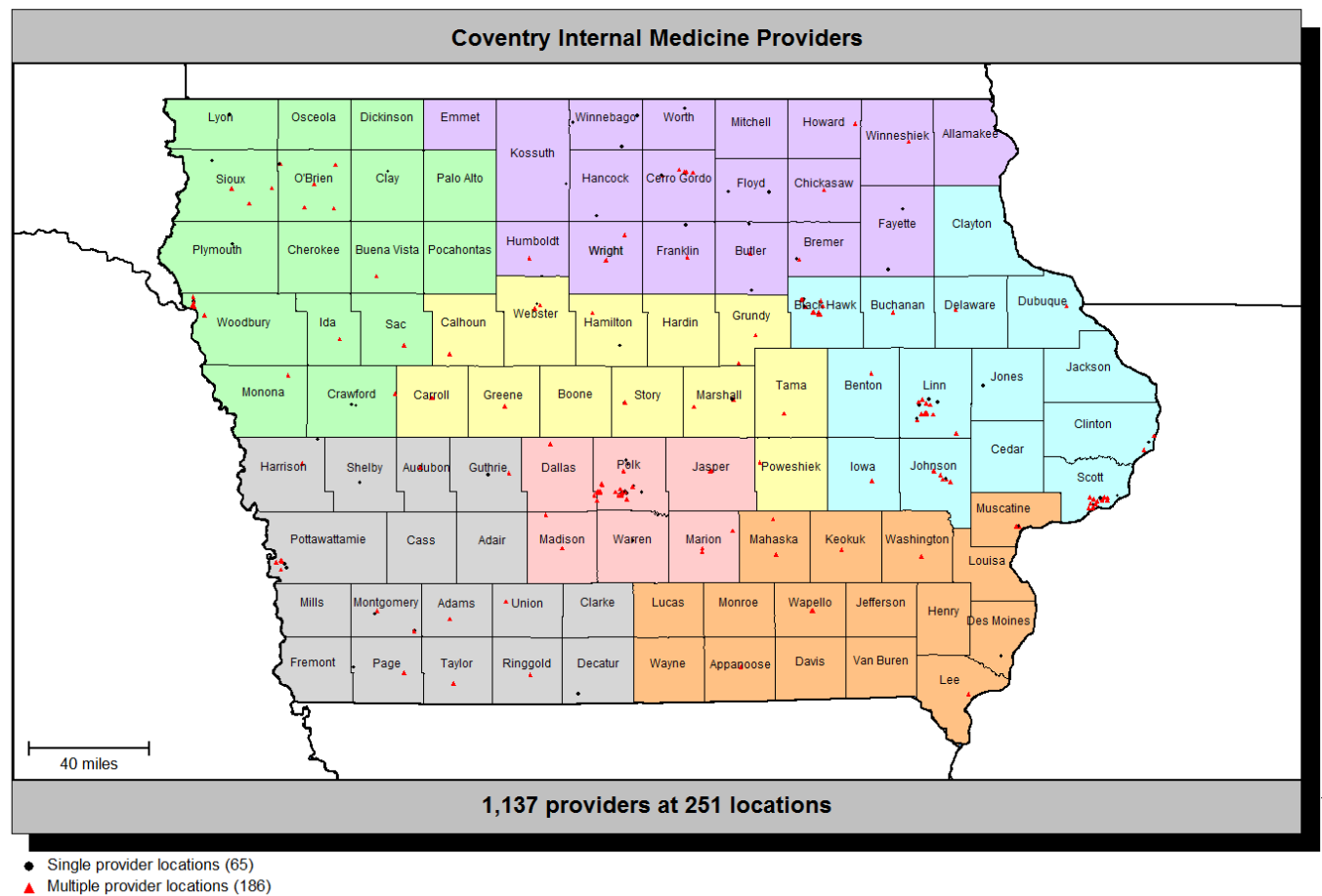




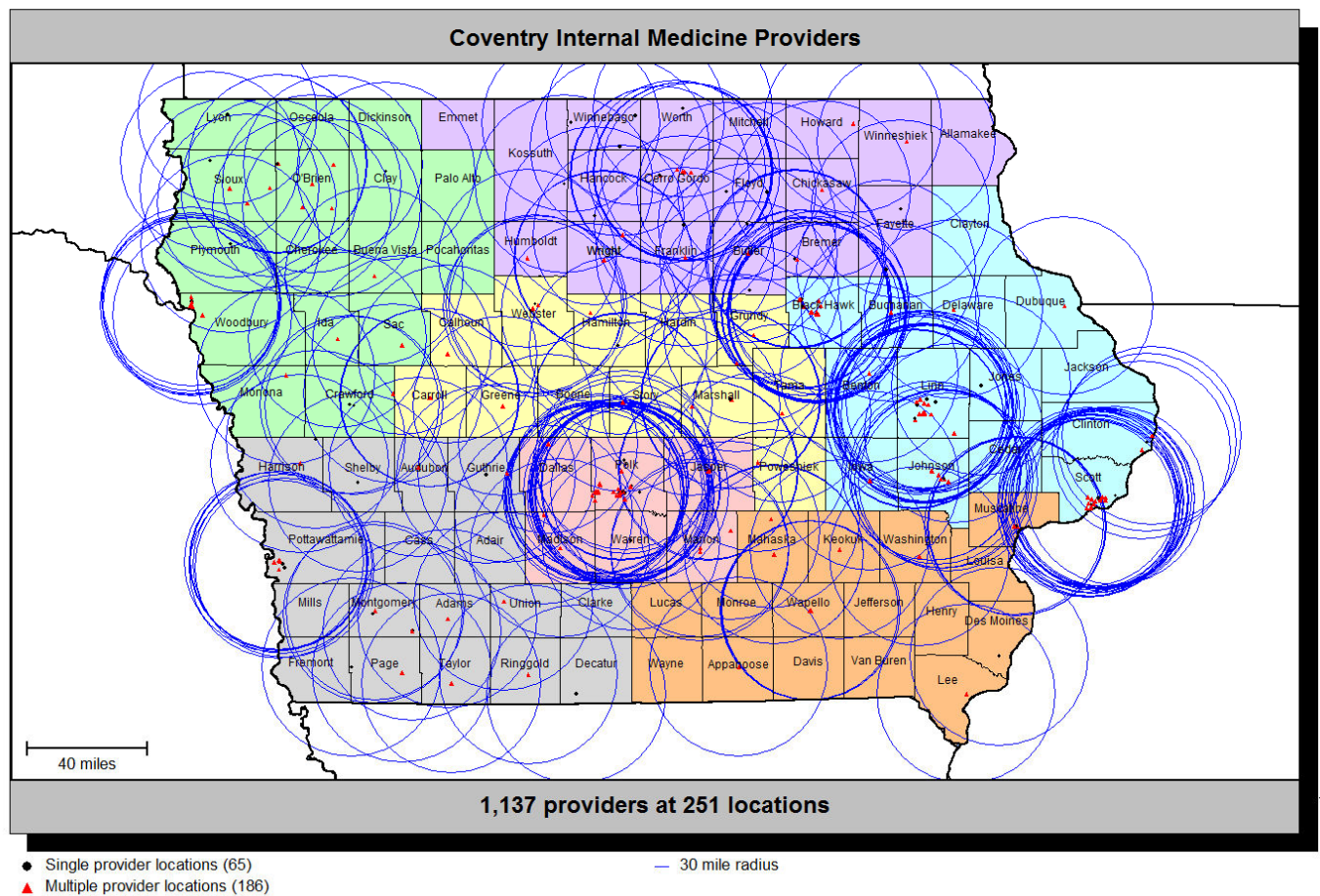
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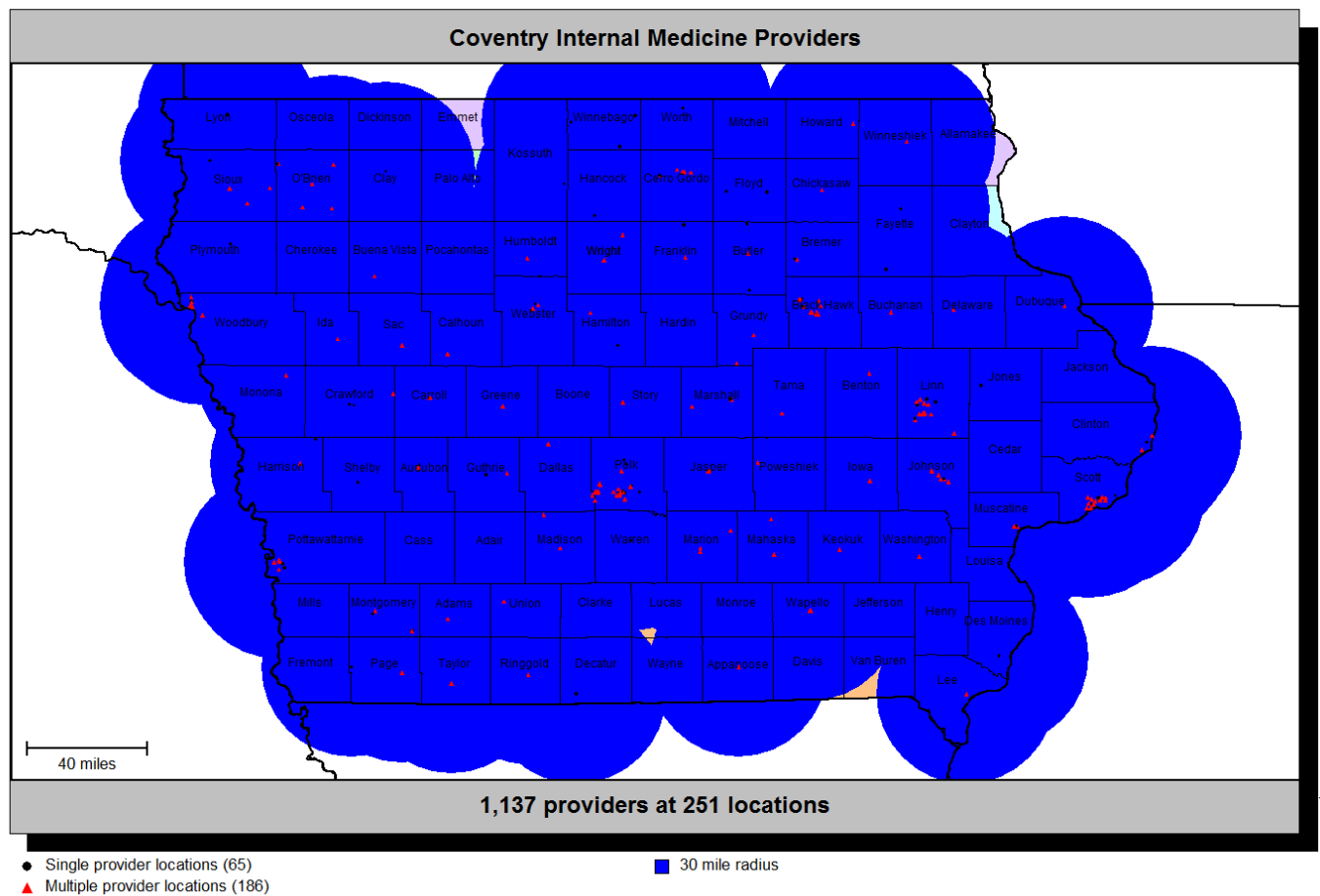
## Provider locations



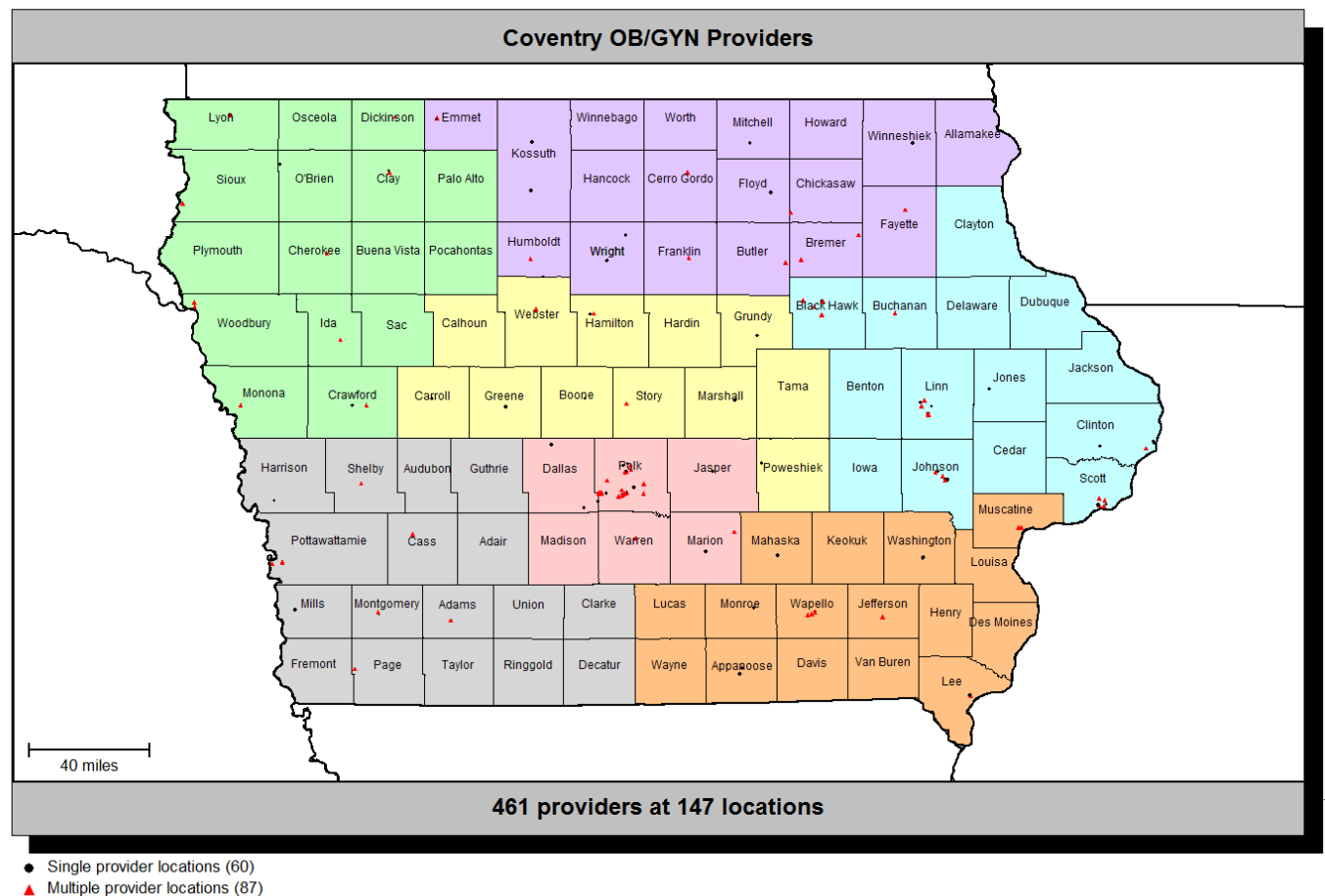
## Provider locations with 30-mile radius



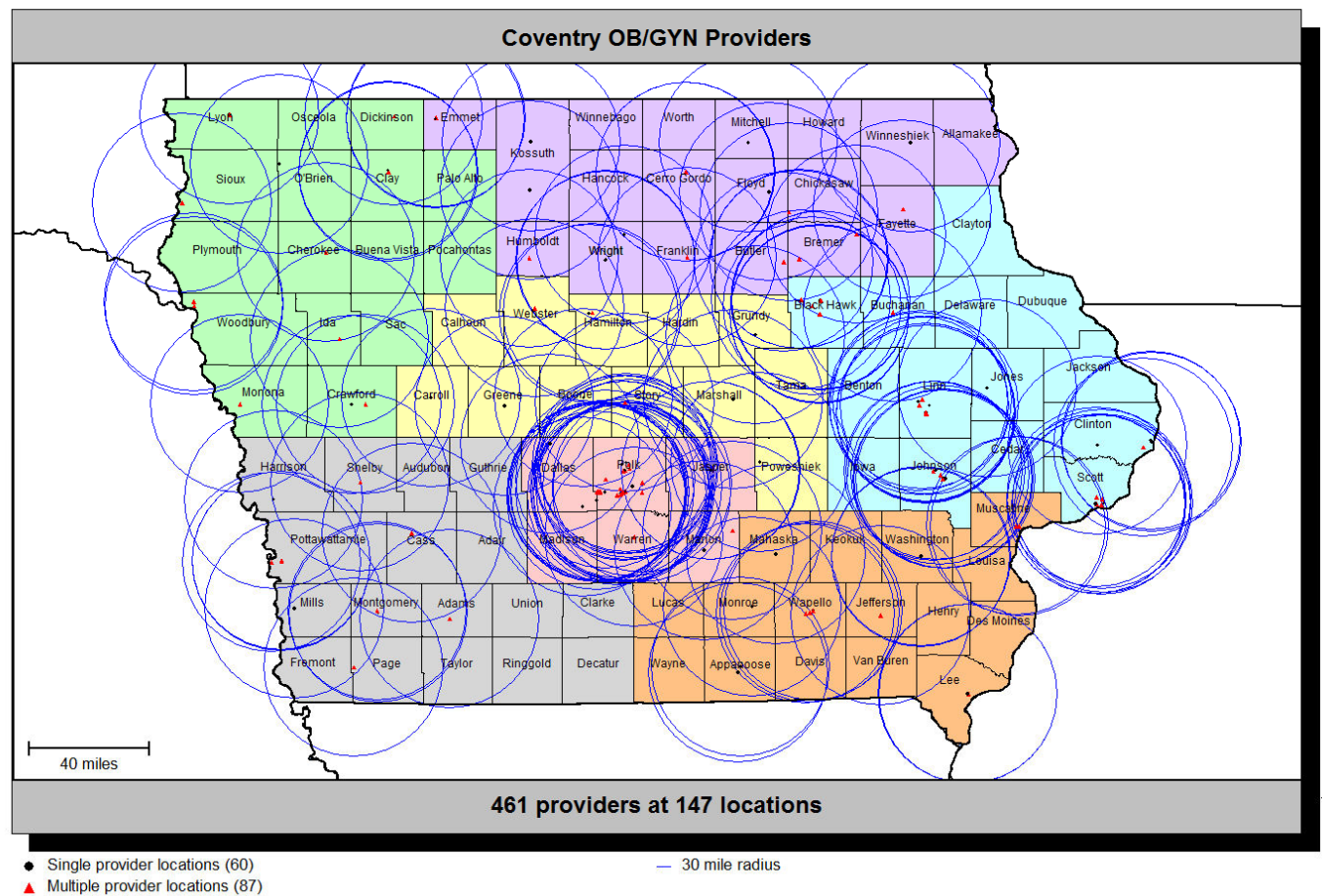
## Provider coverage/penetration



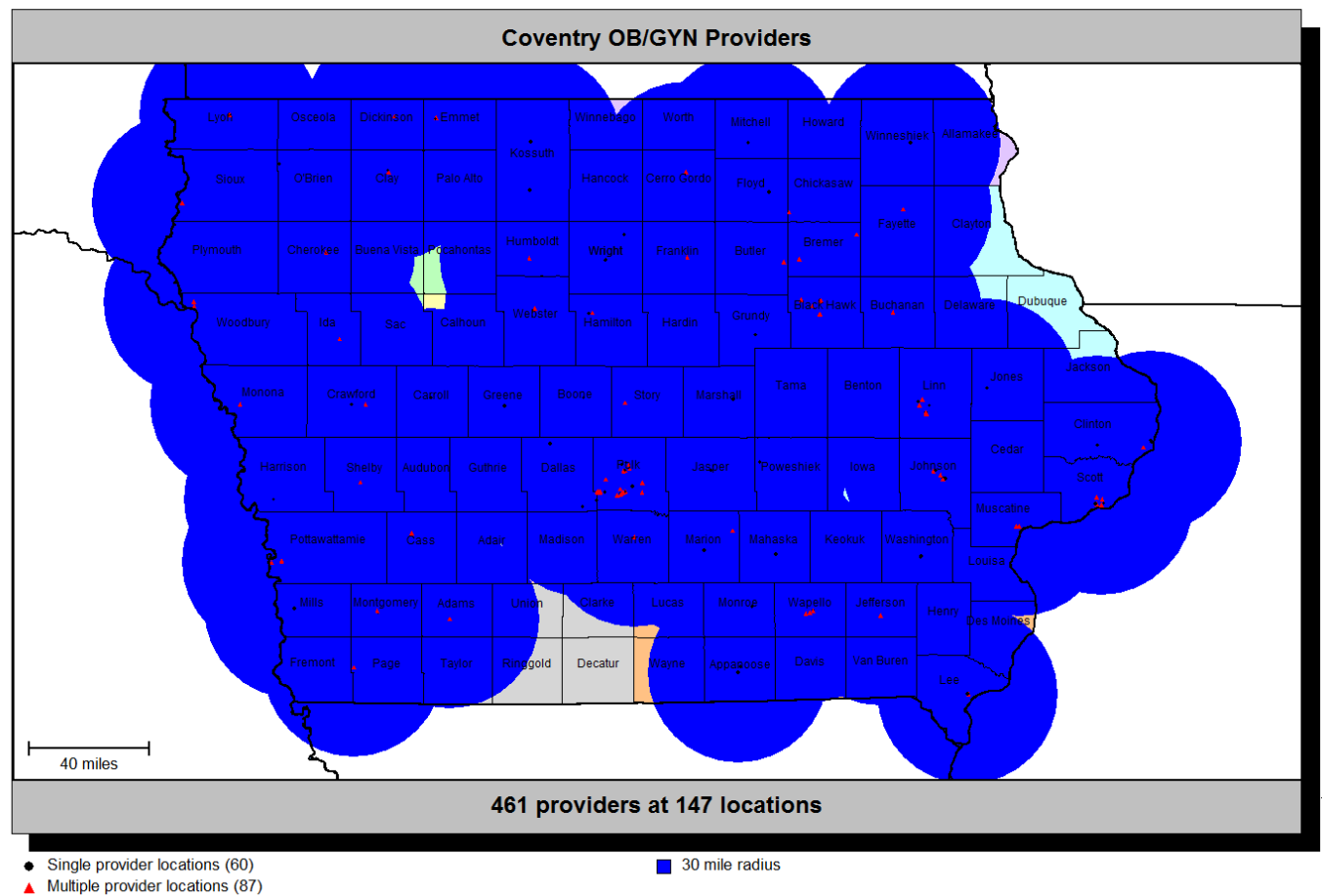
## Provider locations



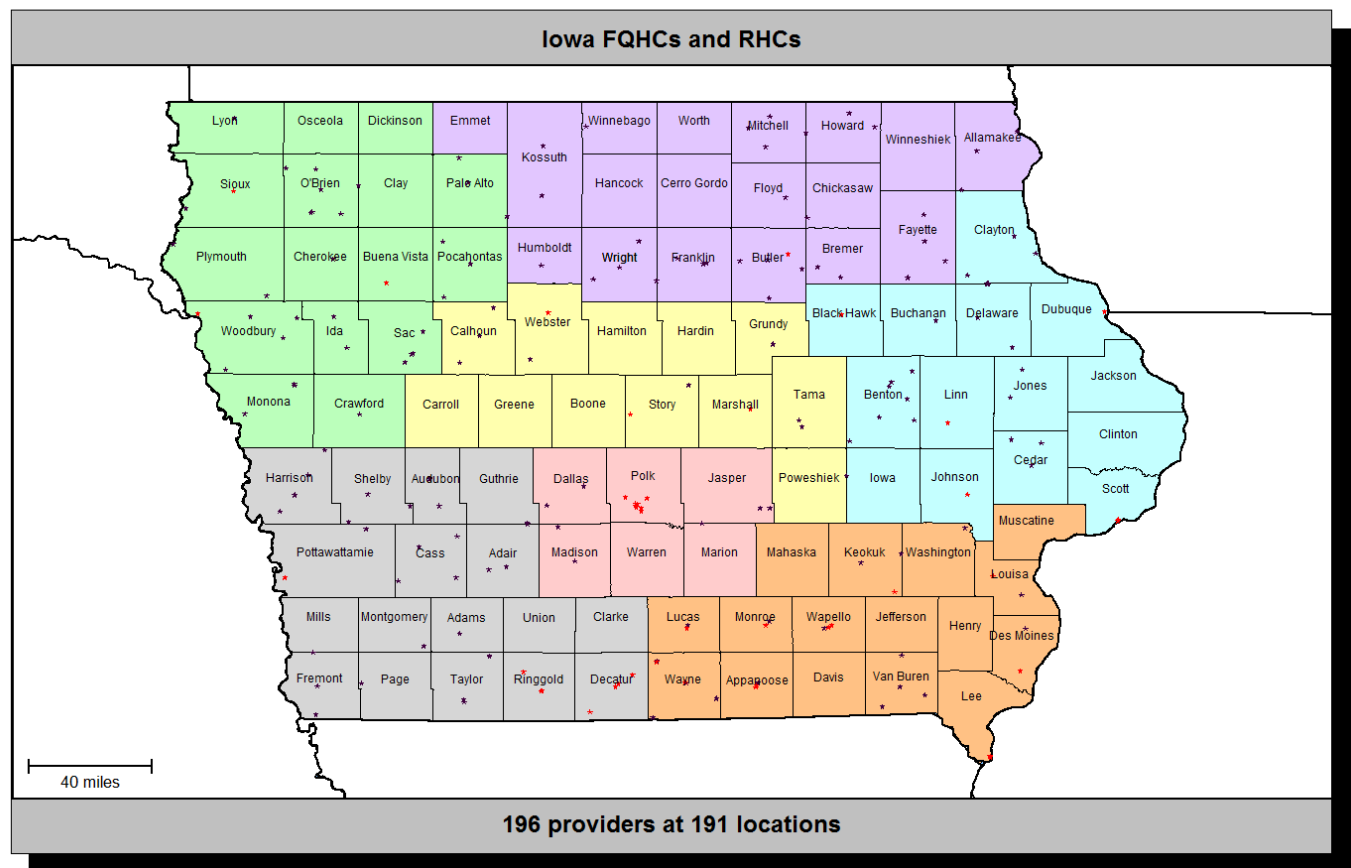
## Provider locations with 30-mile radius



## Provider coverage/penetration



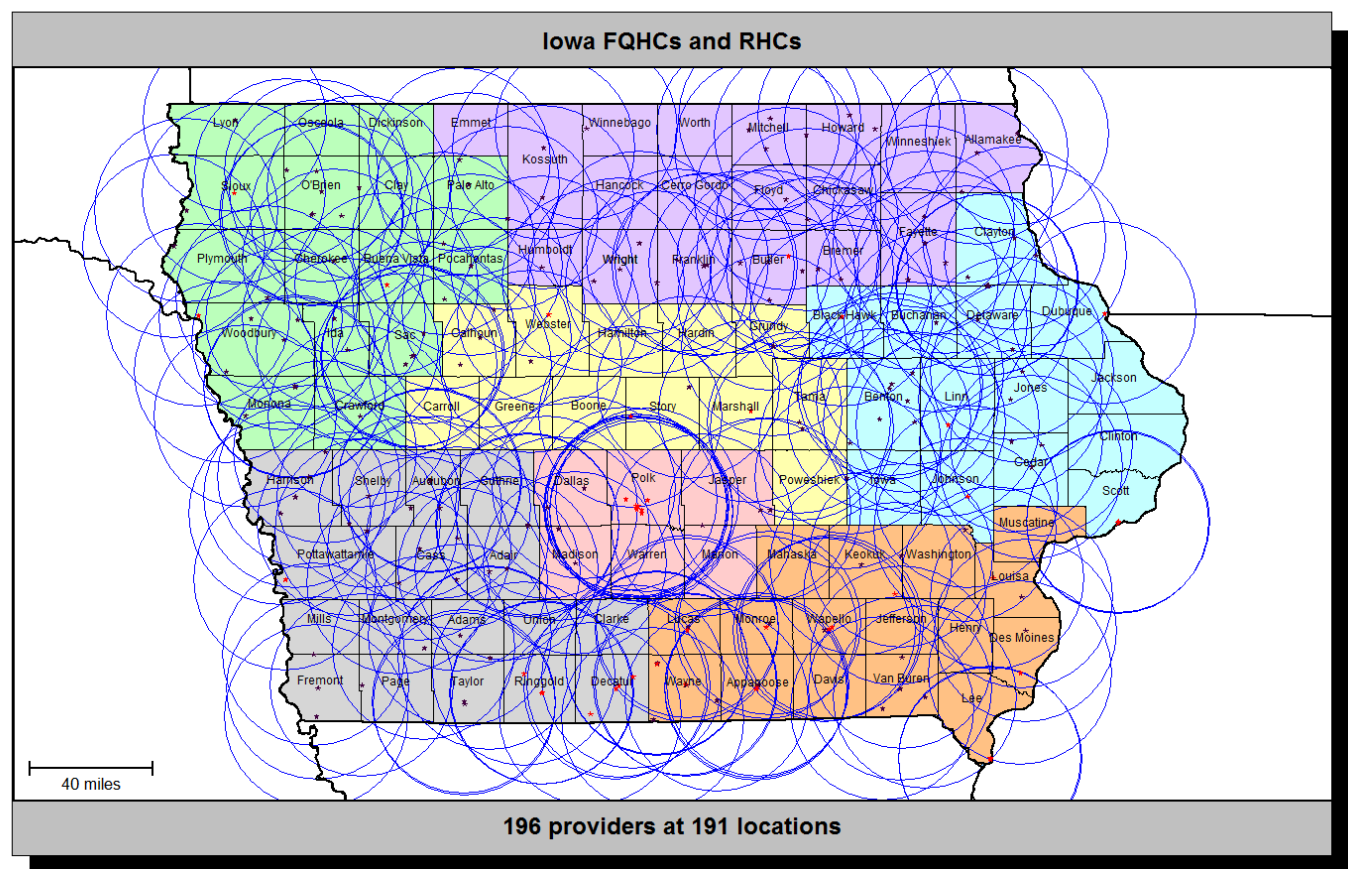
## Provider locations



- ★ Wellness Plan FQHCs (43)
- ★ Wellness Plan RHCs (148)



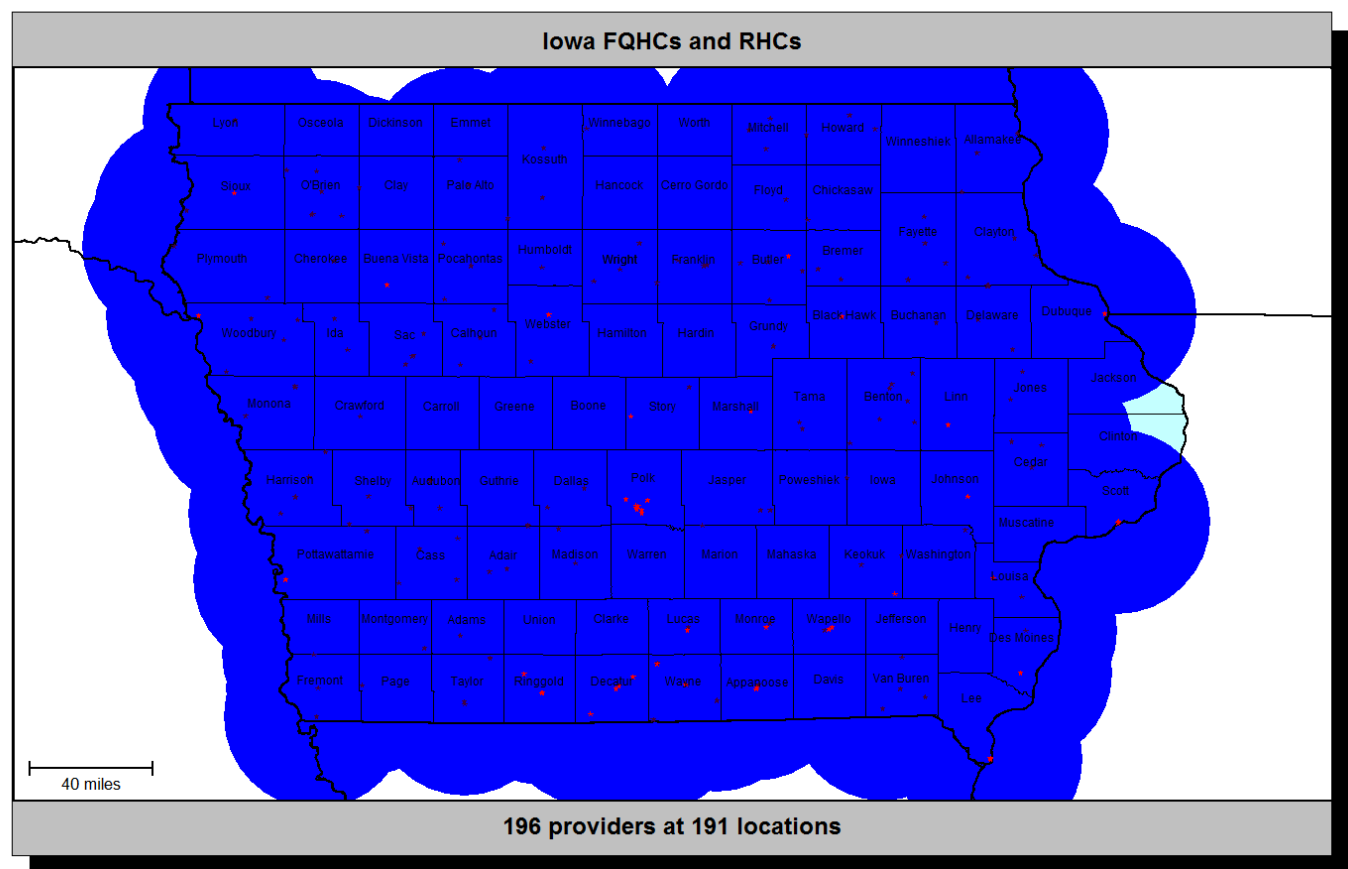
## Provider locations with 30-mile radius



- ★ Wellness Plan FQHCs (43)
- ★ Wellness Plan RHCs (148)

— 30 mile radius - ALL

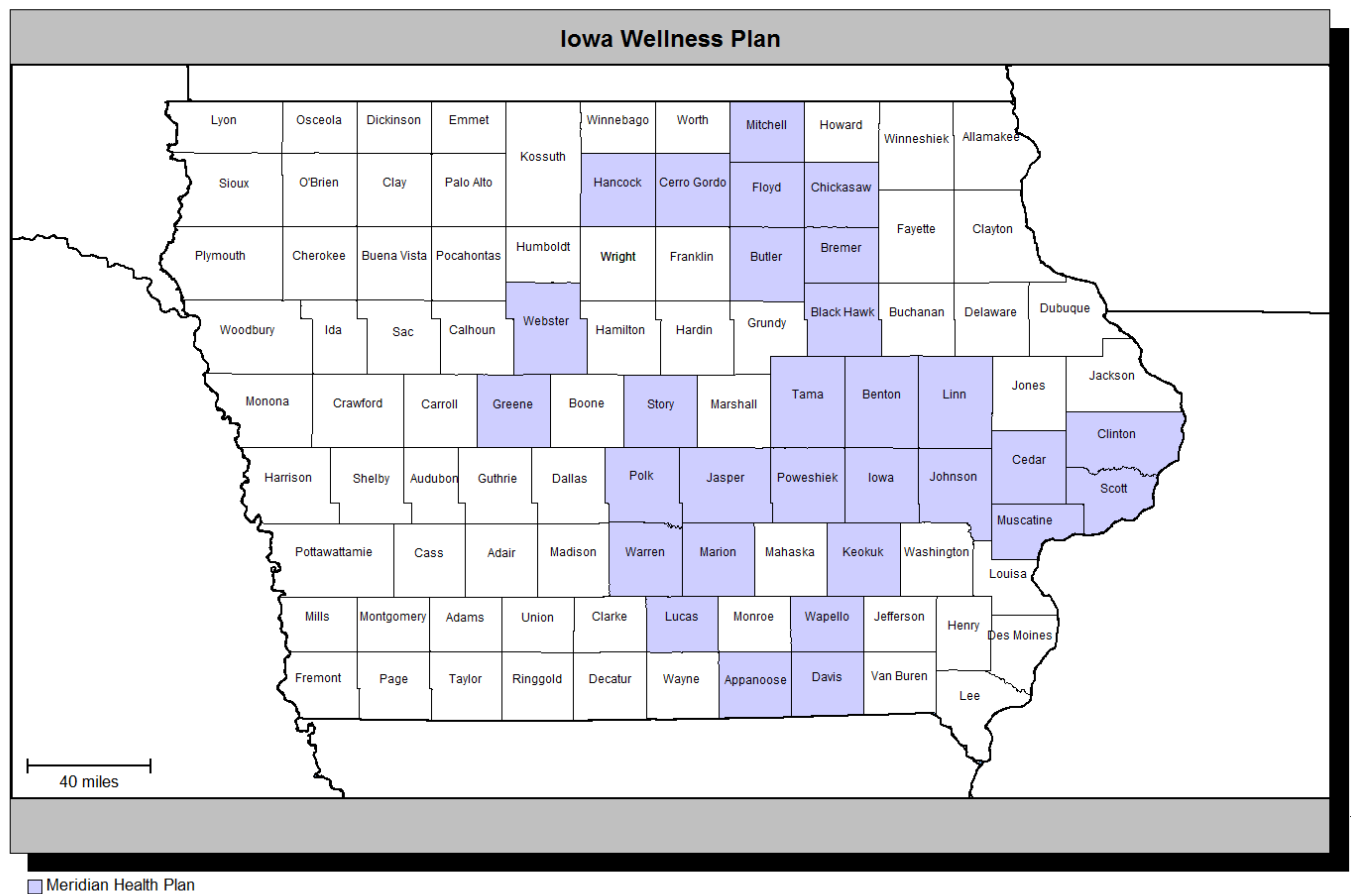
## Provider coverage/penetration



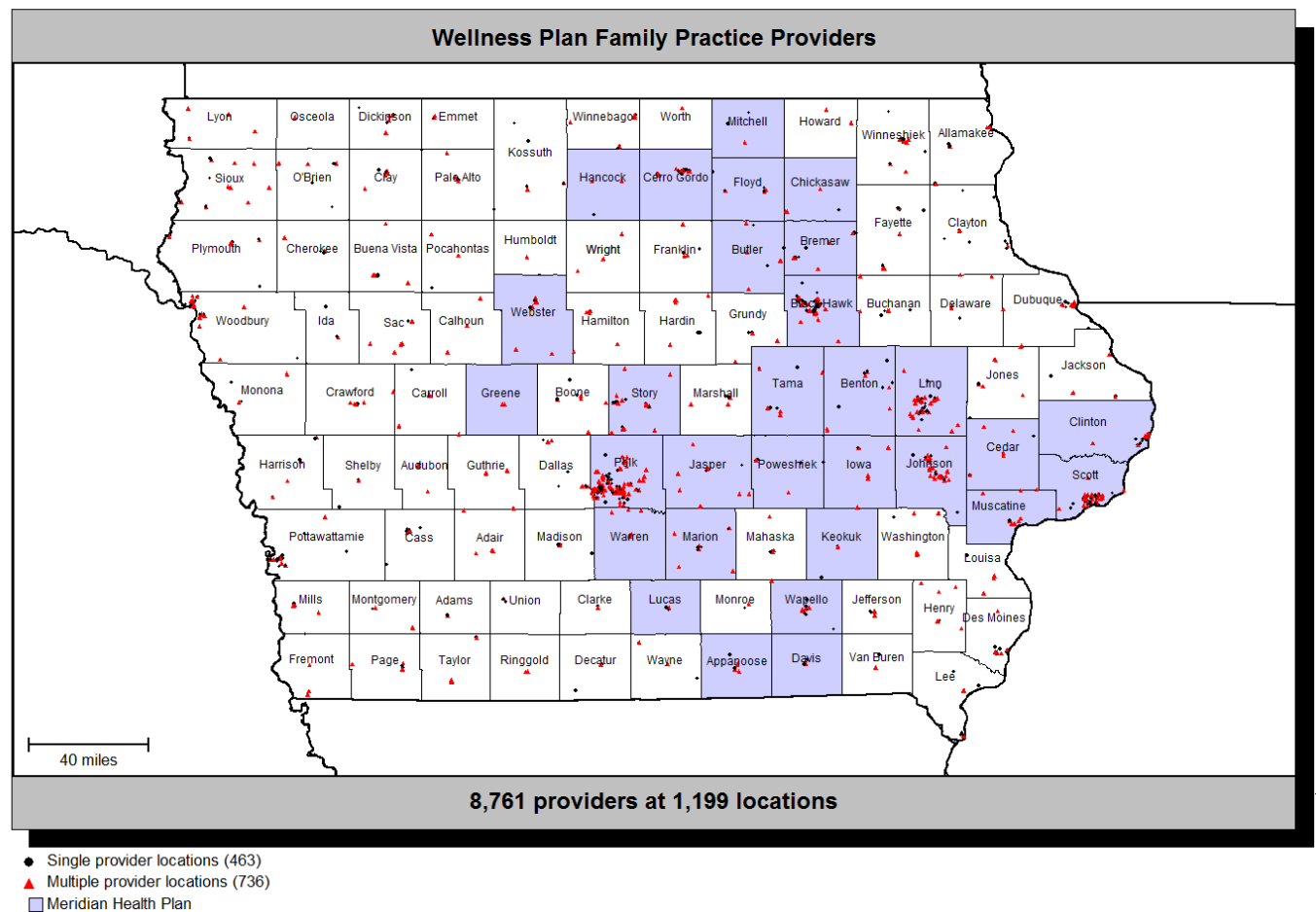
- ★ Wellness Plan FQHCs (43)
- ★ Wellness Plan RHCs (148)

■ 30 mile radius - ALL

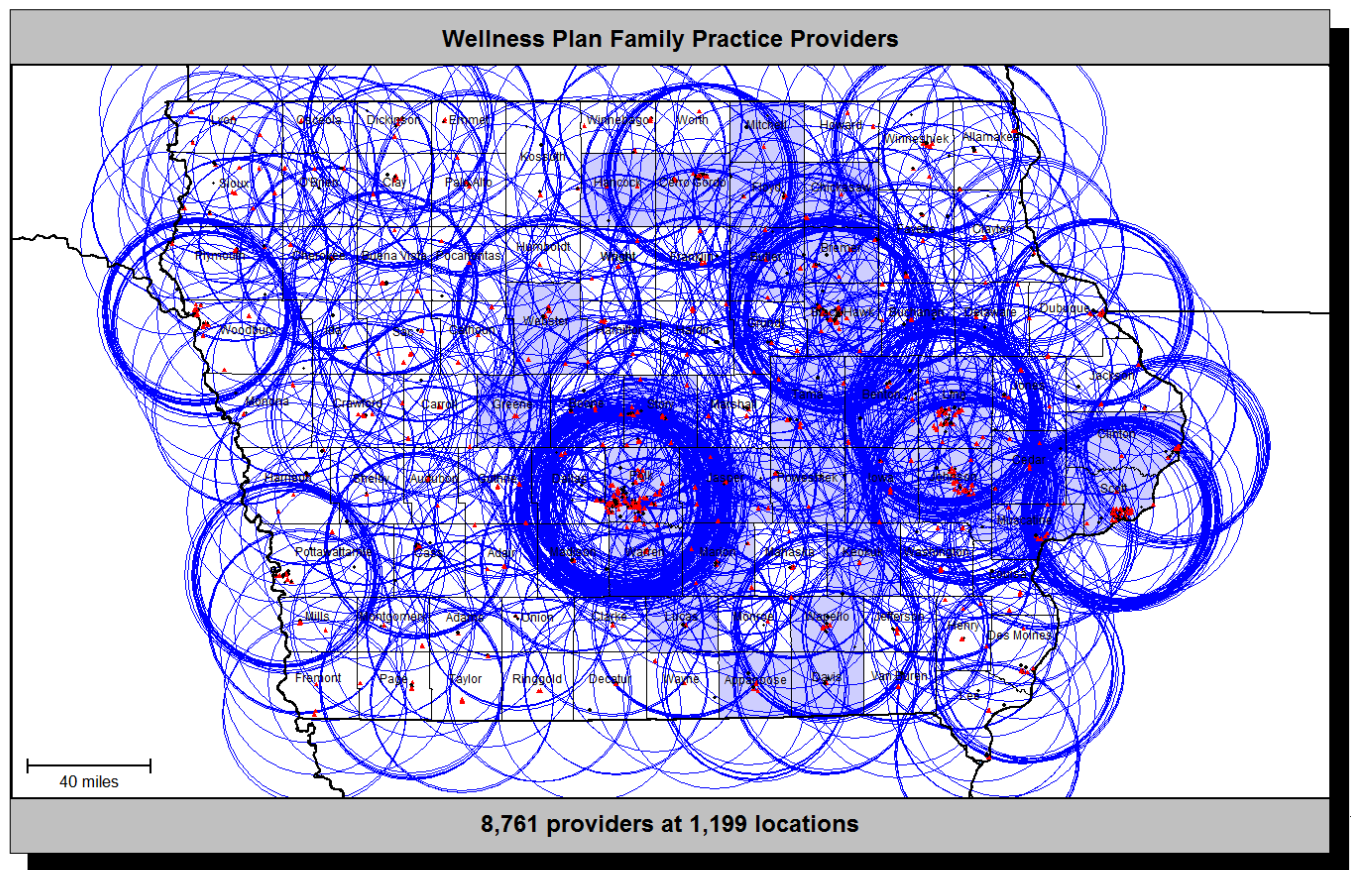
## Geographic overview



## Provider locations



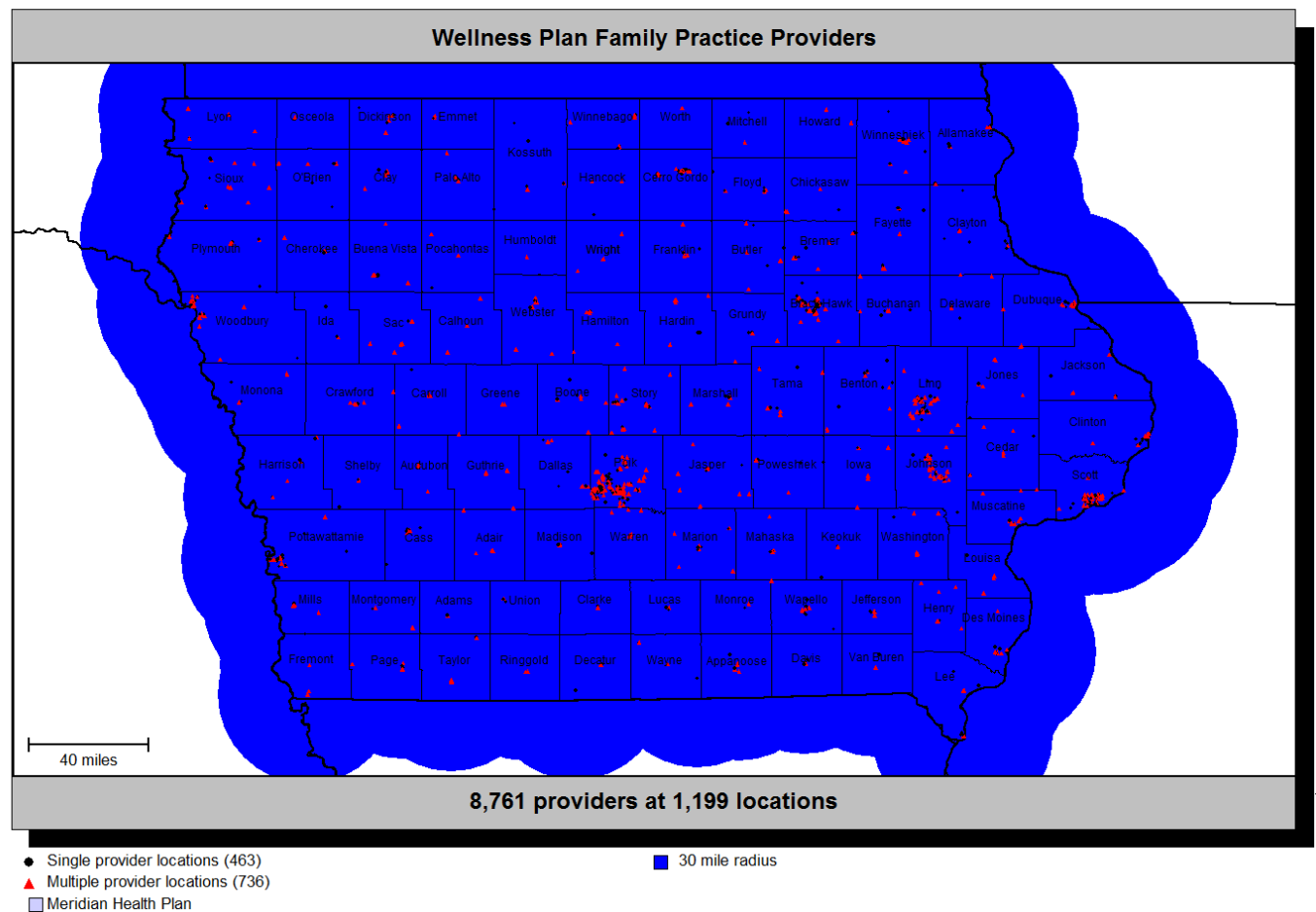
## Provider locations with 30-mile radius



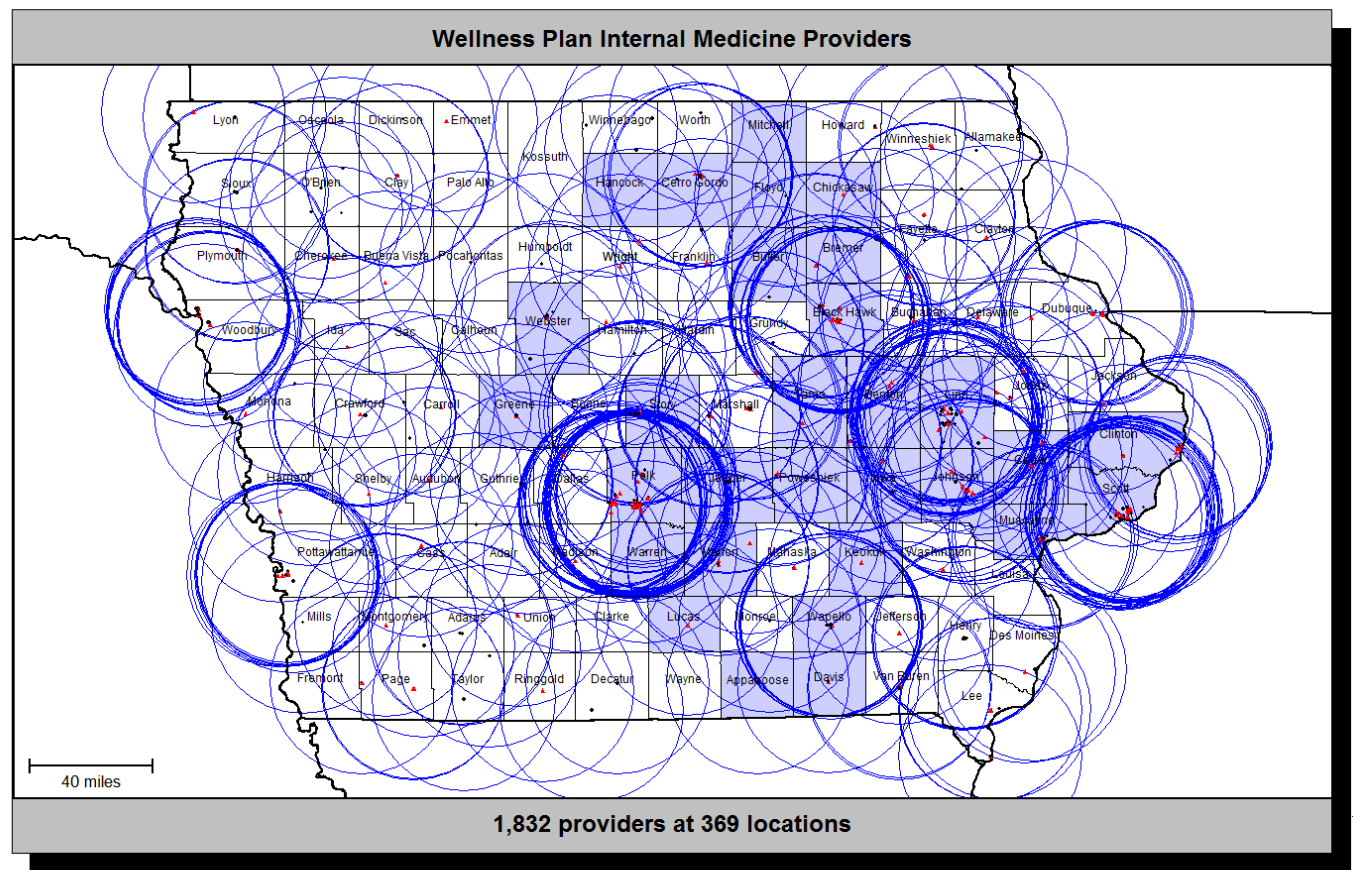
- Single provider locations (463)
- ▲ Multiple provider locations (736)
- Meridian Health Plan

— 30 mile radius

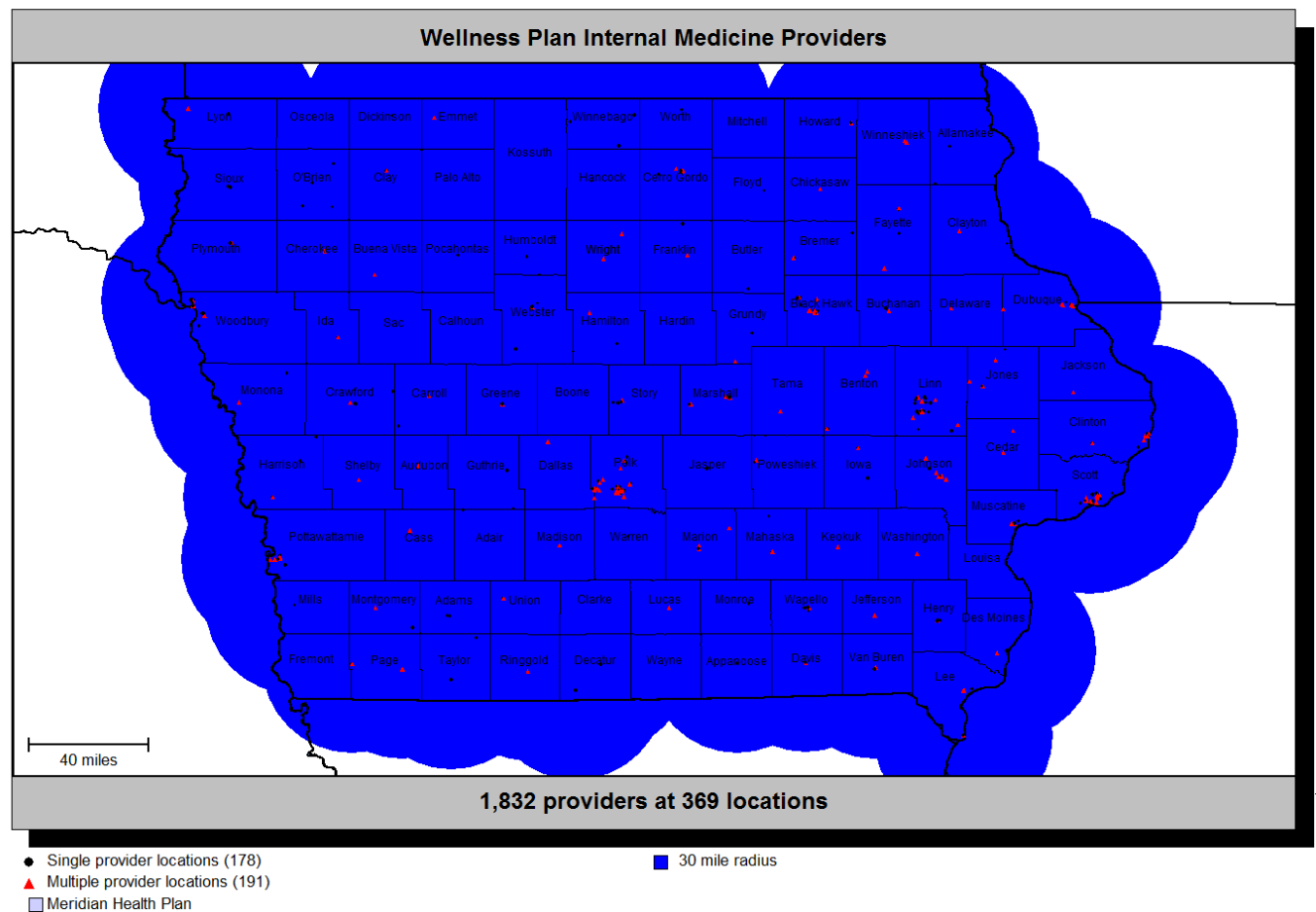
## Provider coverage/penetration



## Provider locations with 30-mile radius

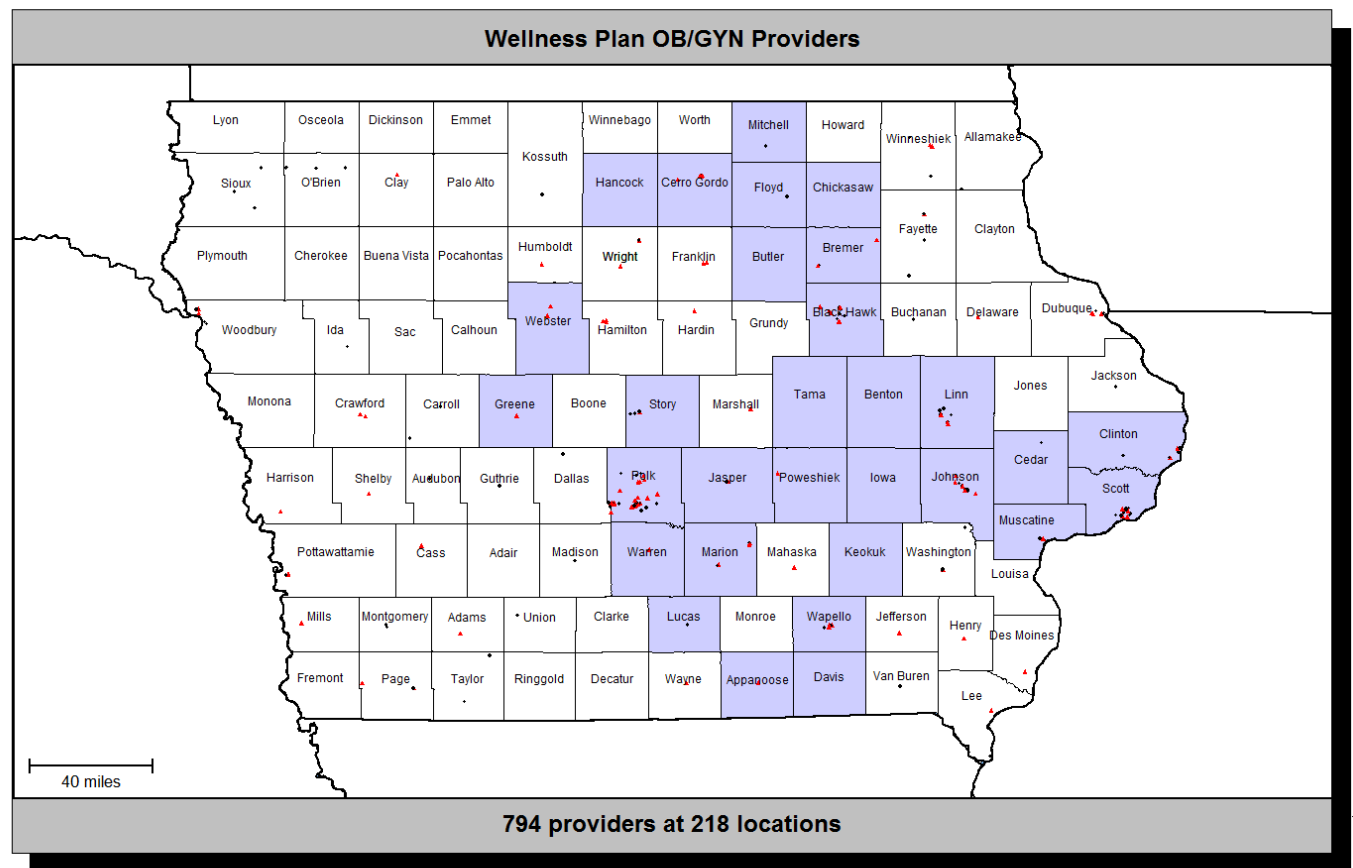


## Provider coverage/penetration

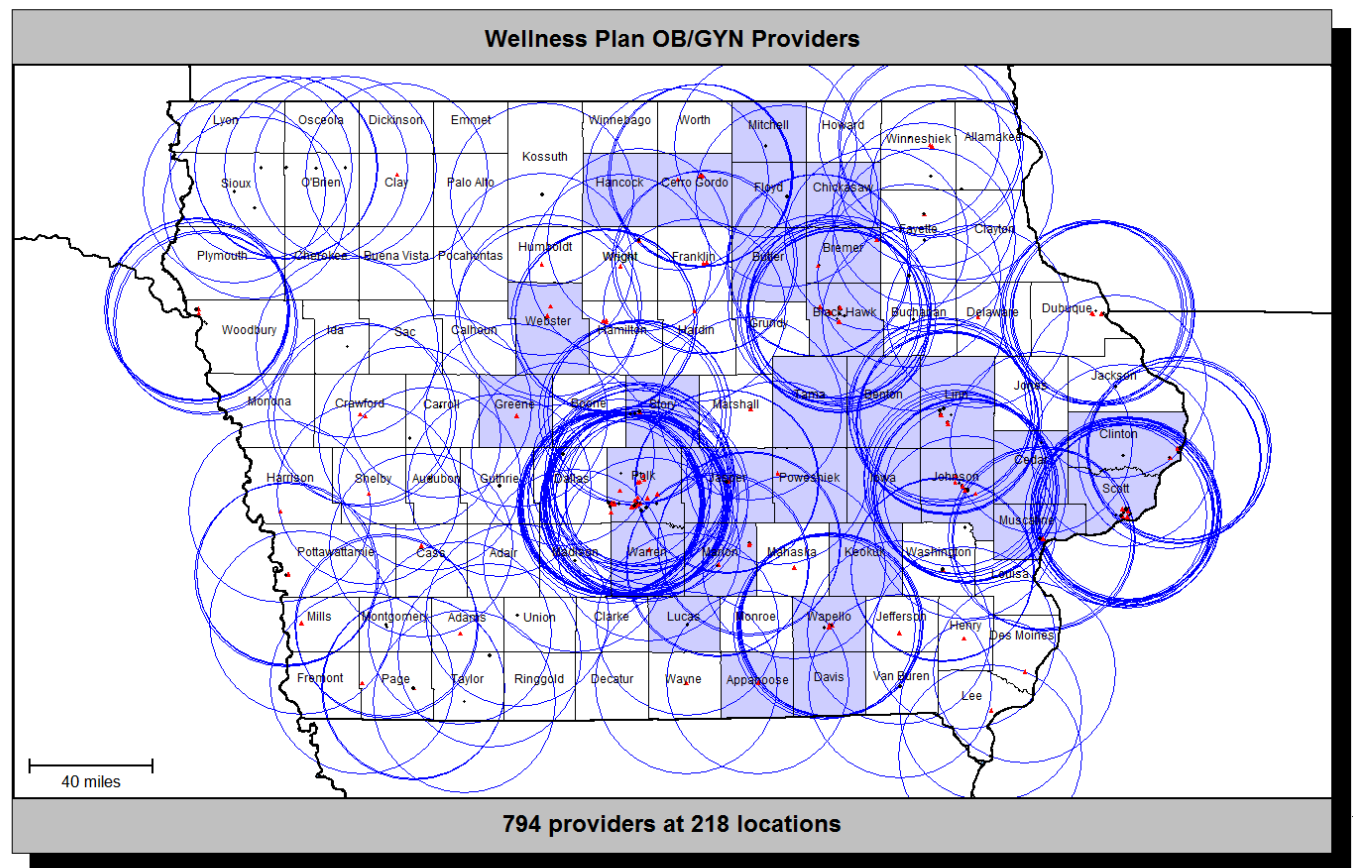




## Provider locations



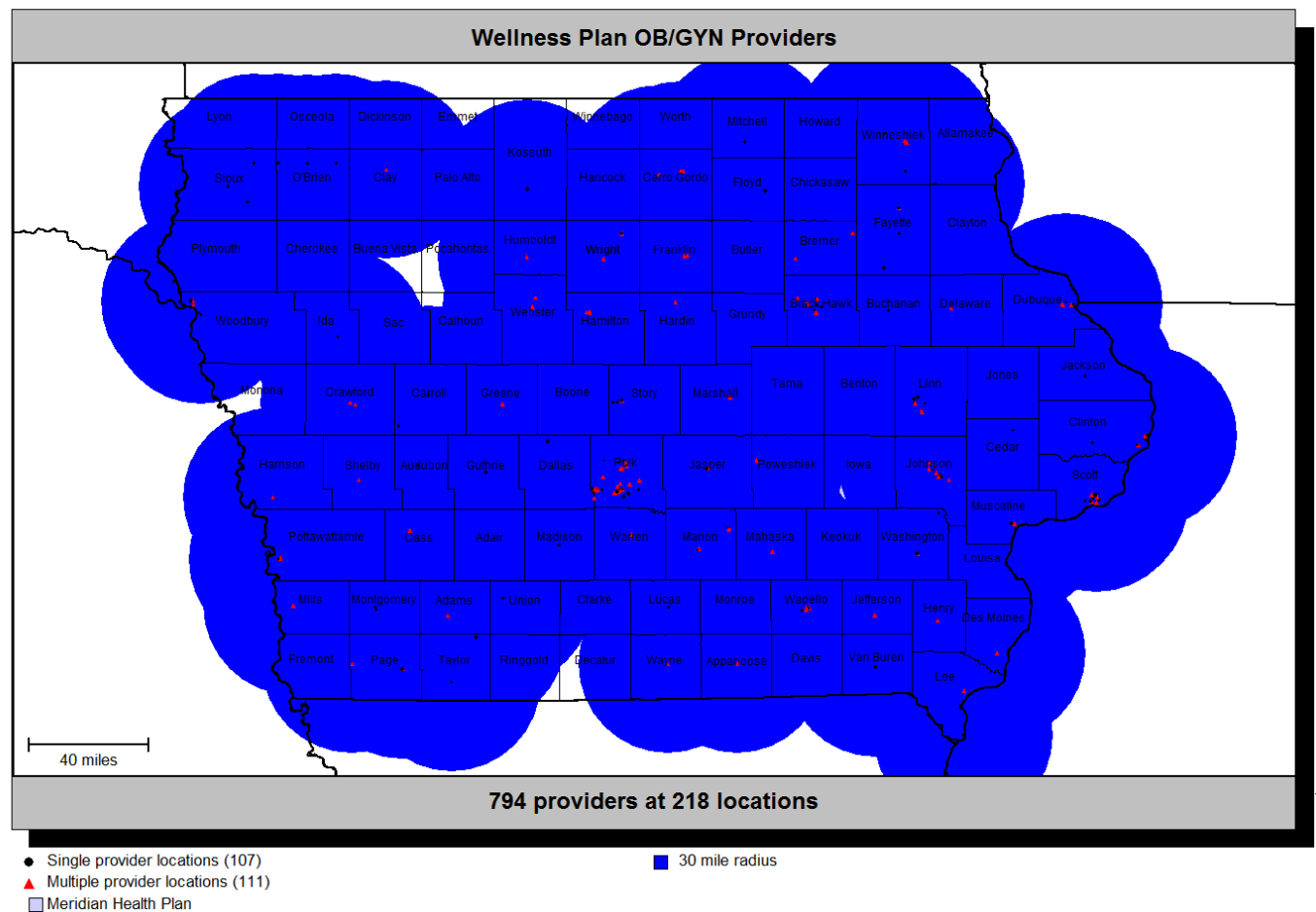
## Provider locations with 30-mile radius



- Single provider locations (107)
- ▲ Multiple provider locations (111)
- Meridian Health Plan

— 30 mile radius

## Provider coverage/penetration





## IOWA WELLNESS PLAN - FIRST QUARTER 2015

### EXCEPTION TO POLICY REQUESTS

MONTH	CATEGORY	OUTCOME	COUNT
January	Non-Covered Service	Approved	2
	Pharmacy	Approved	1
February	Non-Covered Service	Approved	2
	Durable Medical Equipment	Approved	2
March	Non-Covered Service	Approved	4
	Surgical procedure	Approved	2
	Out-of state placement	Approved	1

TOTAL EXCEPTIONS	14
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**MEMBER APPEALS**

<b>MONTH</b>	<b>CATEGORY</b>	<b>ALJ PROPOSED DECISION</b>	<b>COUNT</b>
January	Pharmacy	Affirmed	4
February	Contributions	Reversed - currently under Director review	1
March	None to report		0
TOTAL APPEALS			5

## Iowa Health and Wellness Plan Member Months - 1st Quarter 2015

### Iowa Wellness Plan Members

		Member Counts			
		Elig End Date			
		1/31/2015	2/28/2015	3/31/2015	Grand Total
Elig Start Date	1/1/2015	6109	7809	85870	99788
	2/1/2015		338	7150	7488
	3/1/2015			5706	5706
	Grand Total	6109	8147	98726	112982
		Member Monthss			
		Elig End Date			
		1/31/2015	2/28/2015	3/31/2015	Grand Total
Elig Start Date	1/1/2015	6109	15618	257610	279337
	2/1/2015		338	14300	14638
	3/1/2015			5706	5706
	Grand Total	6109	15956	277616	299681

## Iowa Marketplace Choice Members

		Member Counts			
		Elig End Date			
		1/31/2015	2/28/2015	3/31/2015	Grand Total
Elig Start Date	1/1/2015	1228	1744	6761	9733
	2/1/2015		305	1860	2165
	3/1/2015			1477	1477
	Grand Total	1228	2049	10098	13375
		Member Months			
		Elig End Date			
		1/31/2015	2/28/2015	3/31/2015	Grand Total
Elig Start Date	1/1/2015	1228	3488	20283	24999
	2/1/2015		305	3720	4025
	3/1/2015			1477	1477
	Grand Total	1228	3793	25480	30501



## Iowa Marketplace Choice Members in Wellness Plan and State Plan (Medically Exempt)

		Member Counts			
		Elig End Date			
		1/31/2015	2/28/2015	3/31/2015	Grand Total
Elig Start Date	1/1/2015	4940	4175	14070	23185
	2/1/2015		552	4254	4806
	3/1/2015			4859	4859
	Grand Total	4940	4727	23183	32850

		Member Months			
		Elig End Date			
		1/31/2015	2/28/2015	3/31/2015	Grand Total
Elig Start Date	1/1/2015	4940	8350	42210	55500
	2/1/2015		552	8508	9060
	3/1/2015			4859	4859
	Grand Total	4940	8902	55577	69419

## Iowa Dental Wellness Plan Status Report – 1<sup>st</sup> Qtr. 2015

Operations	<ul style="list-style-type: none"> <li>• Activities/Results               <ul style="list-style-type: none"> <li>○ Customer Service calls:                   <ul style="list-style-type: none"> <li>▪ May 1- March 23: 42,899</li> </ul> </li> <li>○ Payment for Claims To-Date: \$21,790,420</li> <li>○ Unique Members Receiving Services: 40,442</li> <li>○ Completed Risk Assessments: 17,861 members</li> <li>○ Number of dentist providing services: 944</li> <li>○ Number of network dentist/location providing service: 1,077</li> <li>○ No reports from members on not getting timely services</li> </ul> </li> <li>• Claims processing Time (average): 8 days</li> <li>• Complaints/Appeals               <ul style="list-style-type: none"> <li>○ 24 complaints, 21 resolved</li> <li>○ 4 appeals, 4 resolved</li> </ul> </li> <li>• DWP Advisory Council               <ul style="list-style-type: none"> <li>○ Brought together council on February 18, 2015</li> </ul> </li> <li>• Network               <ul style="list-style-type: none"> <li>○ 639 General Dentist</li> <li>○ 53 Oral Surgeons</li> <li>○ 11 Periodontists</li> <li>○ 6 Endodontists</li> <li>○ 18 Prosthodontists</li> <li>○ 207 site visits have been conducted with DWP providers</li> </ul> </li> </ul>
DWP Benefit Design and Data	<p>Of the 40,442 members that have received services</p> <ul style="list-style-type: none"> <li>○ 64% received a Diagnosis and Prevention Services</li> <li>○ 23% received a Stabilization Services</li> <li>○ 13% received an Emergent Services</li> </ul> <p>Earned Benefits</p> <ul style="list-style-type: none"> <li>• 23% of members who have received a service have moved into (enhanced tier)</li> </ul>

Premium Monitoring Report - 1st Qtr 2015*								
	JANUARY			FEBRUARY			MARCH	
	IWP	MPC		IWP	MPC		IWP	MPC
Members required to pay premiums	5,546	5,521		6,460	6,371		7,640	7,321
Members who completed Healthy Behaviors (premiums waived)	4,101	3,130		4,435	3,400		4,864	3,590
Members who completed Healthy Behaviors during 31-day grace period	147	265		451	624		693	791
Members who declared hardship (premiums waived)	410	650		566	853		585	769
American Indian/Alaskan Natives (exempt)	317	76		367	82		420	87
Medically Frail (exempt)	1,507	1,035		1,621	1,142		1,761	1,460
Members in the Health Insurance Premium Payment Program (exempt)	26	37		37	49		45	72
Members ineligible for IHAWP - churn (exempt)	80	42		65	45		33	35
Other exemptions - deceased members	1	4		4	5		0	1
Members below 50% of FPL (exempt) - not available								
*Values represent a point in time as of May 1, 2015								

## Iowa Health and Wellness Plan Weekly Report Friday, March 20, 2015

### Overall Program Enrollment: March 20, 2015

Program	Enrollment
Iowa Wellness Plan	94,369
Iowa Marketplace Choice Plan	31,815
<b>Overall Iowa Health and Wellness Plan</b>	<b>126,184</b>

### Medically Exempt: March 20, 2015

Member Surveys	Provider Referrals	Total Exempt*
7,433	11,617 (Magellan referrals included)	<b>19,050</b>

\*Only those surveys and referrals that resulted in an approved medically exempt change are reported.

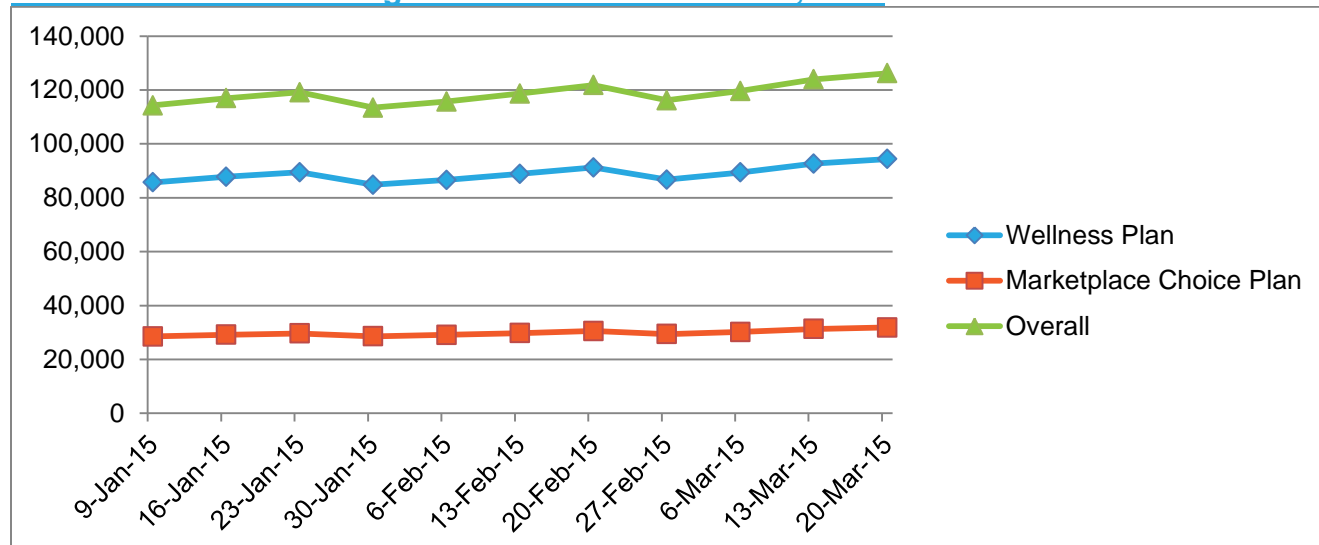
### Healthy Behaviors Activity Report: March 20, 2015

Activity	2014	2015
Health Risk Assessments		
• Assess My Health Surveys	<b>22,885</b>	<b>6,760</b>
• CoOpportunity	865	-
• Coventry	307	44
• Meridian	4,693	-
<b>Total</b>	<b>28,750</b>	<b>6,804</b>
Wellness Exams	34,906	6,280
• Wellness Plan and Marketplace Choice		
<b>Total</b>	<b>34,906</b>	<b>6,280</b>
Dental Wellness Plan Oral Risk Assessments	<b>17,418</b>	

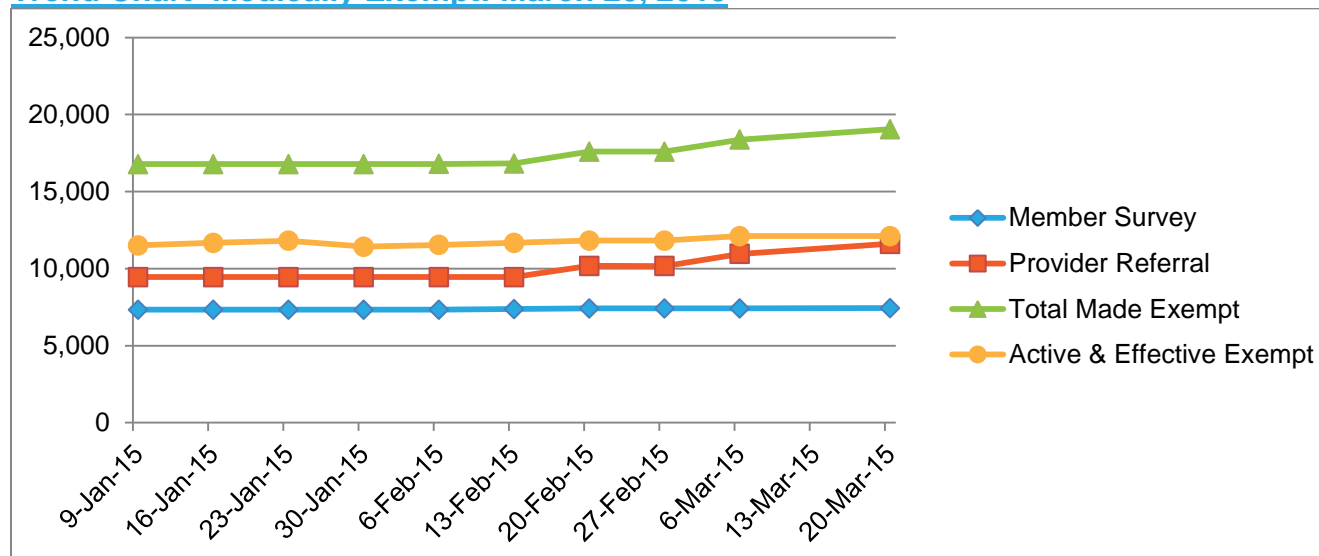
**2015: 2,270 Members Have Completed Both Activities**

**2014: 18,095 Members Have Completed Both Activities**

**Trend Chart- Overall Program Enrollment: March 20, 2015**



**Trend Chart- Medically Exempt: March 20, 2015**



**Trend Chart- Healthy Behaviors Activity Report: March 20, 2015**

