

**IOWA MARKETPLACE CHOICE PLAN
SECTION 1115 DEMONSTRATION
FACT SHEET**

Name of Section 1115 Demonstration:	Iowa Marketplace Choice Plan
Waiver Number:	11-W-00288/5
Date Proposal Submitted:	August 23, 2013
Date Proposal Approved:	December 10, 2013
Date Implemented:	January 1, 2014
Date Renewed:	n/a
Date Expires:	December 31, 2016

SUMMARY

Under the Iowa Marketplace Choice Plan, the state will use premium assistance to purchase qualified health plan (QHP) coverage offered in the individual marketplace for uninsured Medicaid eligible childless adults between 19 and 64 years of age with incomes up to and including 133 percent of the federal poverty level. Individuals in this program are not eligible for Medicare, other comprehensive Medicaid benefits and do not have access to employer sponsored health coverage. The demonstration will further the objectives of title XIX of the Social Security Act by promoting delivery system innovation, care management, care coordination and quality.

ELIGIBILITY

Individuals eligible for coverage under the new adult group are childless adults and parents, ages 19 through 64 with incomes from 100 and up to and including 133 percent of the FPL.

ENROLLMENT

Enrollment activities for the new adult population began on October 1, 2013 for the Marketplace Choice Plan QHPs with eligibility effective January 1, 2014.

DELIVERY SYSTEM

Iowa will use the premium assistance model to purchase Marketplace coverage for its members from the QHPs. The state will use this demonstration to provide coverage for state-plan eligible adults with benefits through QHPs offered in the individual market instead of the fee-for-service delivery system that serves the traditional Medicaid population. The state will pay premiums for QHPs in the Marketplace for Marketplace Choice Plan members. Members enrolled in the QHP will be offered benefits through the QHP with wrap around provisions by the state Medicaid agency such as family planning at non-network providers, and for individuals aged 19 and 20, early and periodic screening and diagnostic treatment (EPSDT). Marketplace Choice Plan does not include non-emergency medical transportation (NEMT).

PREMIUMS

Premiums that the state can impose must be consistent with Marketplace premiums and are subject to a quarterly aggregate cap of 5 percent of family income. Premiums are

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based on 2 percent of income. The Iowa Marketplace Choice demonstration contains an incentive program that is intended to improve the use of preventive services and other healthy behaviors. Monthly premiums for enrollees with incomes above 100 percent of the FPL, up to and including 133 percent of the FPL, can be imposed in year 2 of the demonstration. Enrollees who complete all required healthy behaviors during year 1 of the demonstration shall have their premiums waived in year 2. For each subsequent year, enrollees will have the opportunity to complete healthy behaviors and will not need to make financial contributions if they do so. In other words, beneficiaries who meet healthy behaviors goals in year 2 will not pay premiums for year 3.

COST SHARING

Within the demonstration, cost sharing obligations will be consistent with both the state plan and with the cost-sharing rules applicable to individuals with comparable incomes in the Marketplace. All individuals who are statutorily required to be exempt from cost sharing will be exempt from cost sharing under the demonstration.

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