## Iowa Managed Care Program Features, as of 2021

Features	lowa Health Link	PACE	Dental Wellness Plan
Program type	Comprehensive MCO + MLTSS	Program of All-inclusive Care for the Elderly (PACE)	Dental only (PAHP)
Statewide or region-specific?	Statewide	Statewide	Statewide
Federal operating authority	1915(b),1915(b)/1915(c),1937 Alt Benefit Plan,1945 Health Homes	PACE	1115(a) (Medicaid demonstration waivers),1937 Alt Benefit Plan
Program start date	04/01/2016	08/01/2018	05/01/2014
Waiver expiration date (if applicable)	03/31/2026		12/31/2024
If the program ended in 2020, indicate the end date			
Populations enrolled: Low-income adults <u>not covered</u> under ACA Section VIII (excludes pregnant women and people with disabilities)	Mandatory		Mandatory
Populations enrolled: Low-income adults <u>covered</u> under ACA Section VIII (excludes pregnant women and people with disabilities)	Mandatory		Mandatory
Populations enrolled: Aged, Blind or Disabled Children or Adults	Mandatory	Voluntary	Mandatory
Populations enrolled: Non-Disabled Children (excludes children in foster care or receiving adoption assistance)	Mandatory		Mandatory
Populations enrolled: Individuals receiving Limited Benefits (excludes partial duals)			
Populations enrolled: Full Duals	Mandatory	Voluntary	Mandatory
Populations enrolled: Children with Special Health Care Needs	Mandatory		Mandatory
Populations enrolled: American Indian/Alaska Native	Voluntary	Exempt	Voluntary

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Populations enrolled: Foster Care and Adoption Assistance Children	Mandatory	Exempt	Mandatory
Populations enrolled: Enrollment choice period	Pre-assigned	N/A	Pre-assigned
Populations enrolled: Enrollment broker name (if applicable)	Maximus		Maximus
Populations enrolled: Notes on enrollment choice period			
Benefits covered: Inpatient hospital physical health	Х	×	
Benefits covered: Inpatient hospital behavioral health (MH and/or SUD)	x	×	
Benefits covered: Outpatient hospital physical health	х	Х	
Benefits covered: Outpatient hospital behavioral health (MH and/or SUD)	Х	Х	
Benefits covered: Partial hospitalization	Х	Х	
Benefits covered: Physician	Х	Х	
Benefits covered: Nurse practitioner	Х	Х	
Benefits covered: Rural health clinics and FQHCs	х	Х	
Benefits covered: Clinic services	Х	Х	
Benefits covered: Lab and x-ray	Х	Х	
Benefits covered: Prescription drugs	Х	Х	
Benefits covered: Prosthetic devices	Х	Х	
Benefits covered: EPSDT	Х		
Benefits covered: Case management	Х	Х	
Benefits covered: SSA Section 1945- authorized Health Home	х		

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Benefits covered: Home health services (services in home)	х	х	
Benefits covered: Family planning			
Benefits covered: Dental services (medical/surgical)	x	X	Х
Benefits covered: Dental (preventative or corrective)		X	Х
Benefits covered: Personal care (state plan option)	х	Х	
Benefits covered: HCBS waiver services	х	Х	
Benefits covered: Private duty nursing	х	Х	
Benefits covered: ICF-IDD	х	х	
Benefits covered: Nursing facility services	X	X	
Benefits covered: Hospice care	х	х	
Benefits covered: Non-Emergency Medical Transportation	X	X	
Benefits covered: Institution for Mental Disease inpatient treatment for people ages 21-64 defined by 42 CFR §438.6(e) as an 'in lieu of' benefit	X	X	
Benefits covered: Other (e.g., nurse midwife services, freestanding birth centers, podiatry, etc.)	Tobacco Cessation; Vision Care Exams		
Quality assurance and improvement: HEDIS data required?	Yes	No	No
Quality assurance and improvement: CAHPS data required?	Yes	No	No

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Quality assurance and improvement: Accreditation required?	Yes	No	No
Quality assurance and improvement: Accrediting organization	NCQA		
Quality assurance and improvement: EQRO contractor name (if applicable)	Health Services Advisory Group (HSAG)		Health Services Advisory Group (HSAG)
Performance incentives: Payment bonuses/differentials to reward plans			
Performance incentives: Preferential auto-enrollment to reward plans			
Performance incentives: Public reports comparing plan performance on key metrics	x		
Performance incentives: Withholds tied to performance metrics	Х		Х
Performance incentives: MCOs/PHPs required or encouraged to pay providers for value/quality outcomes	x		х
Participating plans: Plans in Program	Amerigroup of Iowa, Inc.; Iowa Total Care	PACE	Delta Dental of Iowa; MCNA Dental Plans, Inc.

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Notes: Program notes	EPSDT is not covered under Hawki (State CHIP Plan); Private duty nursing and personal care services are covered as a benefit under EPSDT as provided through a home health agency for up to 16 hours per day; ICF/ID Must meet level of care; nursing facility - must meet level of care; hospiceuse utilization management guidelines; IMD <15 days: When the member is served in an IMD for 15 days or less in a calendar month, the MCO reimburses the IMD for the IMD member days using the current weighted average inpatient and hospitalization rate; IMD > 15 days: When the member's stays that exceed the 15 member days permitted the MCI Contractor will not reimburse the IMD for any of the IMD member days in that month; Vision: Routine eye examinations are covered once in a 12-month period; NEMT is available to all IA Health links members except for the lowa Health and Wellness Plan (IHAWP) Non-Medically Exempt population. Members that have Medically Exempt status are eligible for NEMT services.		Delta Dental covers all of our Hawki (State CHIP) members