



**OPEN MINDS**

# Iowa Health & Human Services Market Profile: 2025



# Health & Human Services Market Profile Overview

## A. [Executive Summary](#)

1. Health Care Coverage by Payer
2. Medicaid Care Coordination Initiatives
3. Behavioral Health Safety-Net System Overview

## B. [Health Financing System Overview](#)

1. Population Demographics
2. Population Centers
3. Population Distribution By Payer
4. Largest Health Plans
5. Health Insurance Marketplace
6. Accountable Care Organizations (ACOs)

## C. [Medicaid Administration, Governance & Operations](#)

1. Medicaid Governance
2. Medicaid Program Spending
3. Medicaid Expansion Status
4. Medicaid Program Benefits

## D. [Medicaid Financing & Service Delivery System](#)

1. Medicaid Financing & Service Delivery System
2. Medicaid FFS Program
3. Medicaid Managed Care Program
4. Medicaid Program: Care Coordination Initiatives
5. Medicaid Program Waivers
6. Medicaid Program: New Initiatives

## E. [Medicare Financing & Service Delivery System](#)

1. Medicare Financing & Service Delivery System
2. Medicare System: Overview
3. Medicare ACOs
4. Medicare Financing & Delivery System: New Initiatives

## F. [Dual Eligible Financing & Service Delivery System](#)

1. Dual Eligible Medicaid Financing & Service Delivery System
2. Largest Dual Eligible Health Plans By Estimated SMI Enrollment
3. Dual Eligible Medicaid Financing & Delivery System: Overview
4. Dual Eligible Medicaid Financing & Delivery System: New Initiatives

## G. [Long-Term Services & Supports Financing & Service Delivery System](#)

1. LTSS Financing & Service Delivery System
2. LTSS Medicaid Financing & Delivery System: Overview
3. Medicaid LTSS Program: Health Plan Characteristics
4. Medicaid LTSS Program: Health Benefits
5. LTSS Medicaid Financing & Delivery System: New Initiatives

## H. [State Behavioral Health Administration & Finance System](#)

1. Public Behavioral Health System Governance
2. Public Behavioral Health System Spending
3. Behavioral Health Hospital Capacity
4. Behavioral Health Safety-Net Delivery System
5. Behavioral Health System: New Initiatives

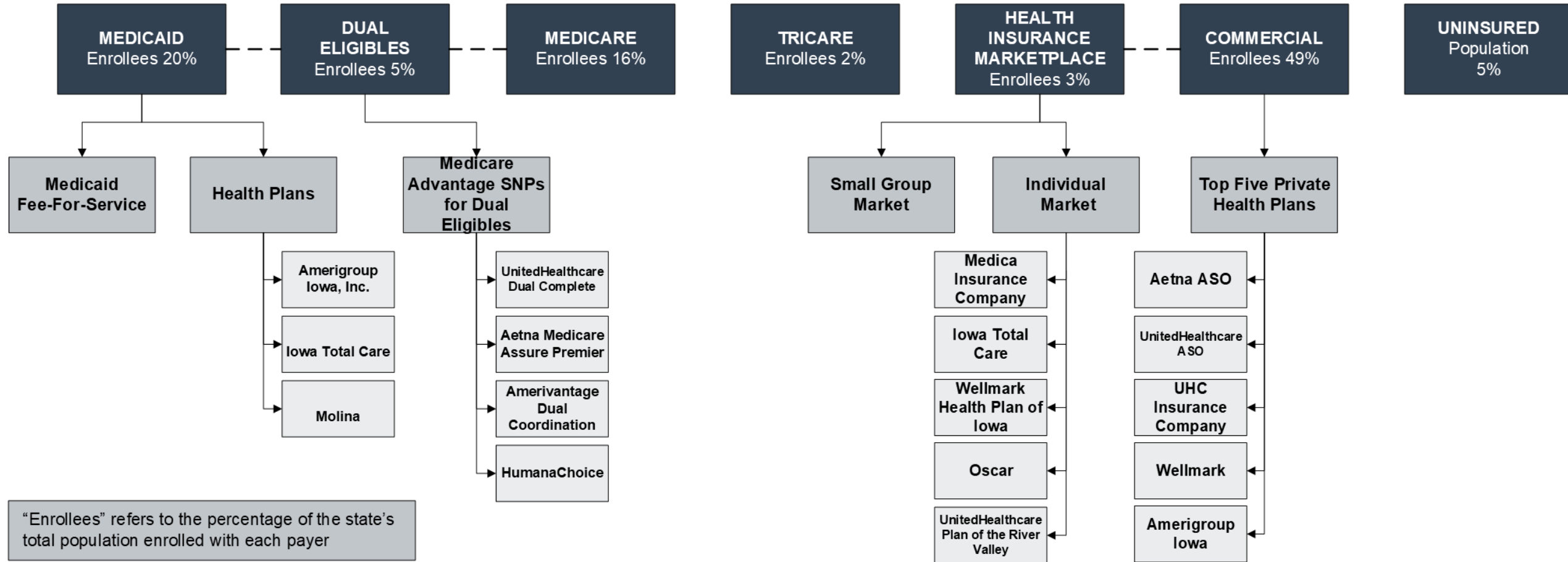
## I. [Appendices](#)

1. *OPEN MINDS* Estimates For The Share Of SMI Consumers By Payer/Plan
2. Glossary Of Terms
3. Sources

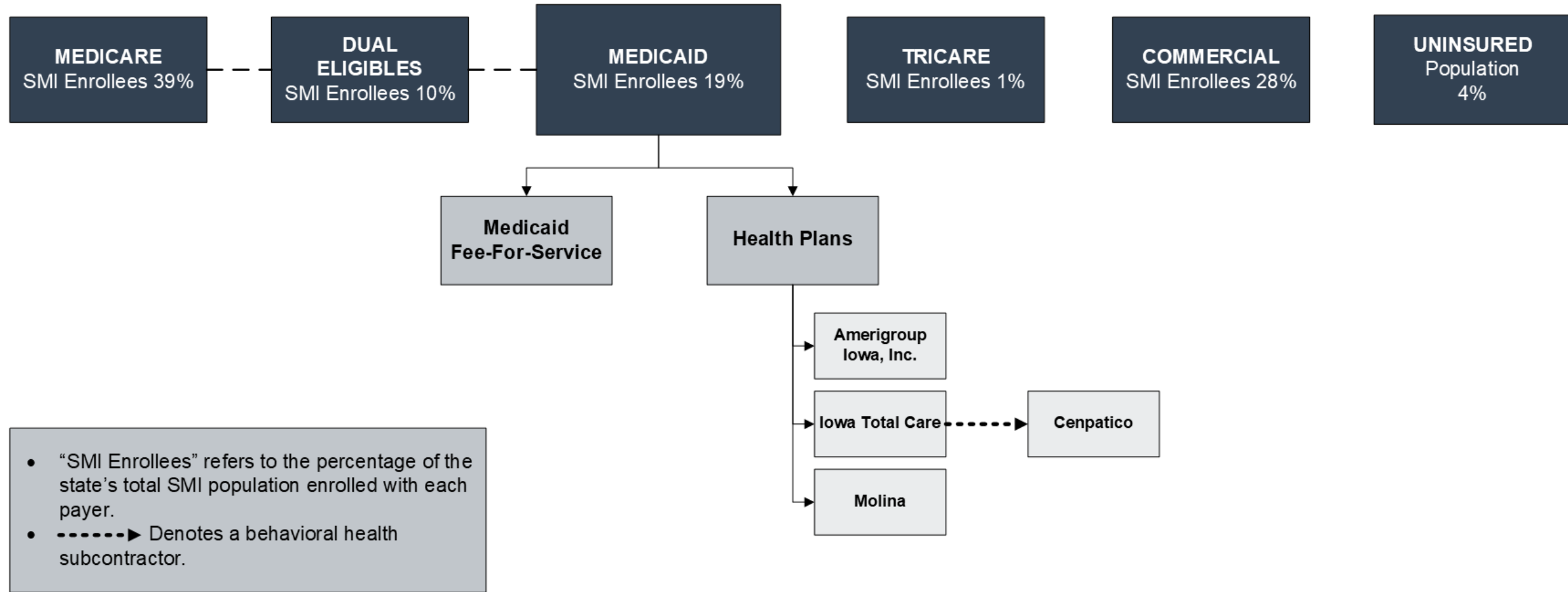
# A. Executive Summary

# A.1. Iowa Physical Health Care Coverage by Payer

Total Iowa Population- 3,207,004  
 Estimated SMI Population- 256,560



# A.1. Iowa Behavioral Health Care Coverage by Payer



Totals may not equal 100% due to rounding

## A.2. Health & Human Services Care Coordination Initiatives

Medicaid Care Coordination Entities For Chronic Care Populations (Including SMI)		
Care Coordination Entity	Active Program	Description
Managed Care Health Plan	✓	Health plans are responsible for care coordination for at-risk populations.
Primary Care Case Management (PCCM)		None
Accountable Care Organization (ACO) Program	✓	The state offers four Medicaid ACOs
Affordable Care Act (ACA) Model Health Home	✓	The state has two health home programs: one for individuals with chronic conditions and one for individuals with Serious Mental Illness (SMI) or Serious Emotional Disturbance (SED).
Patient-Centered Medical Home (PCMH)	✓	Provider organizations that operate as Medicaid health homes for individuals with chronic conditions must earn PCMH accreditation.
Dual Eligible Demonstration		None
Managed Long-Term Services and Supports (MLTSS)	✓	Health plans are responsible for providing LTSS to the managed care population.
Certified Community Behavioral Health Clinics (CCBHC) Grant	✓	Iowa operates nine CCBHC under the federal expansion grant.

## A.3. Health Care Safety-Net Delivery System

### State Agencies Responsible For Uninsured Citizens & Delivery System Model

#### Physical Health Services

- The Department of Public Health delivers physical health services to the safety-net population by operating 28 free clinics throughout the state.

#### Mental Health Services

- The Department of Health & Human Services oversees the operations of 14 county-funded Mental Health and Disabilities Service (MHDS) regions that provide mental health services to uninsured individuals.

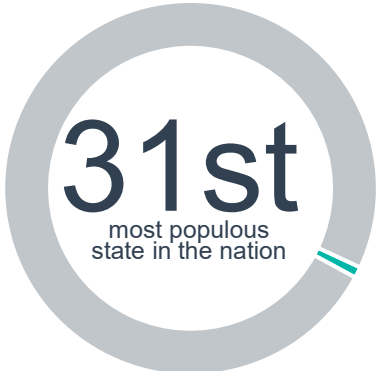
#### Addiction Treatment Services

- The Department of Public Health funds a network of 19 provider organizations, each responsible for two or more counties, to provide safety-net addiction treatment services.

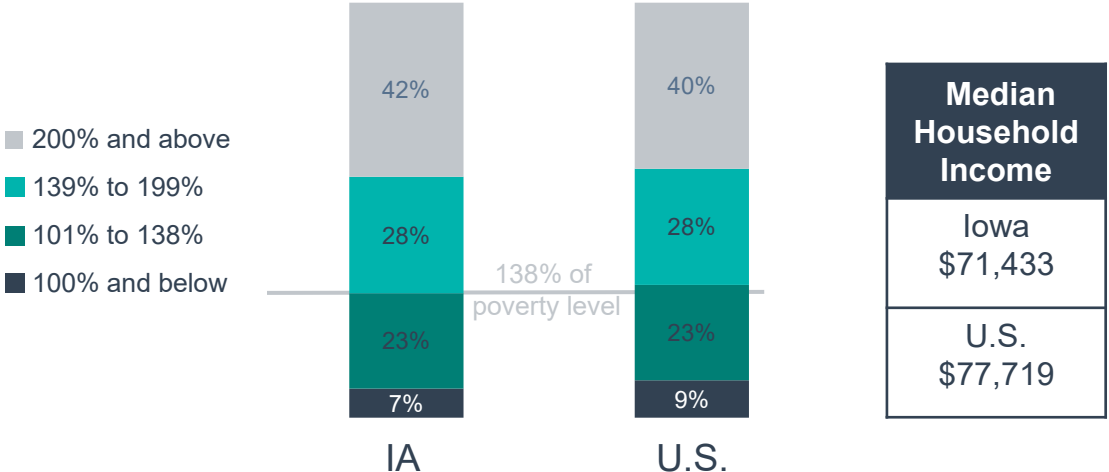
# B. Iowa Health Financing System Overview

# B.1. Population Demographics

Total Iowa Population- 3,207,004  
 Estimated SMI Population- 256,560



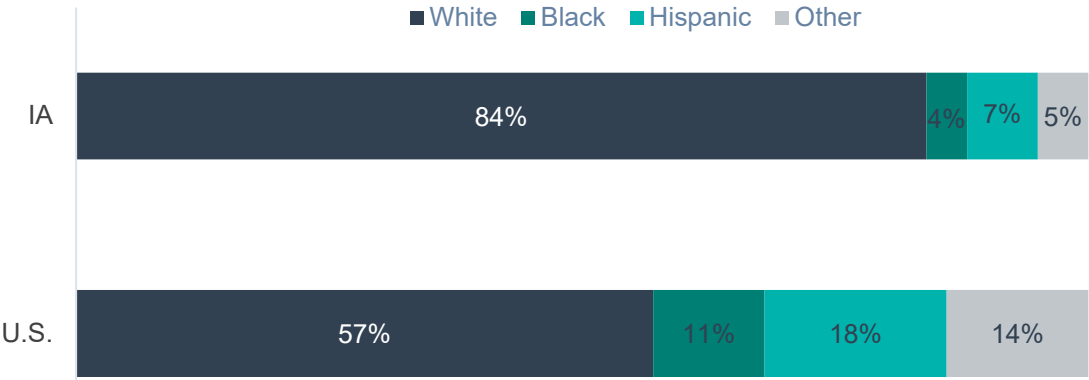
Population Distribution By Income To Poverty Threshold Ratio



Population Distribution By Age



Iowa & U.S. Racial Composition

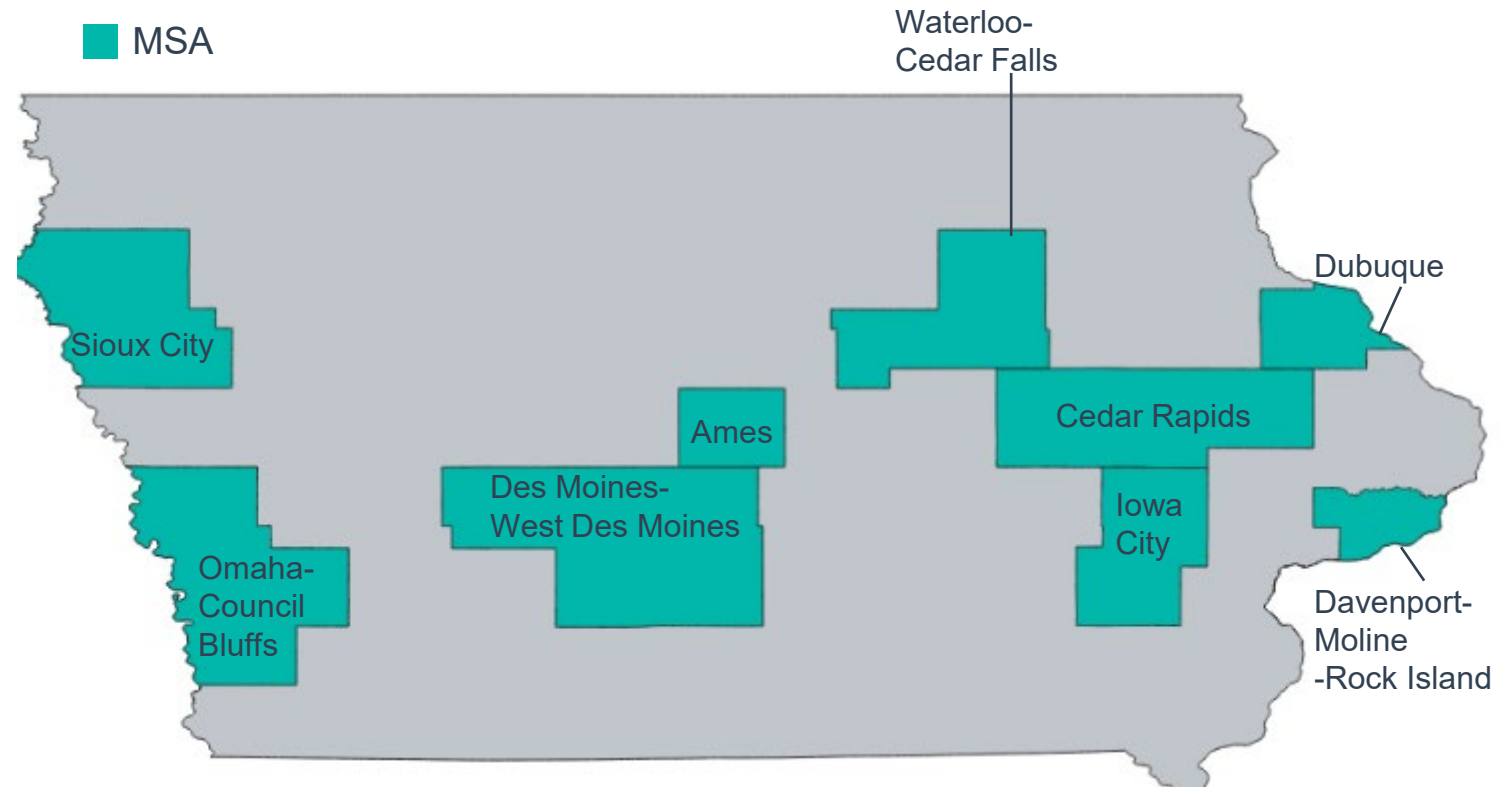


Totals may not equal 100% due to rounding

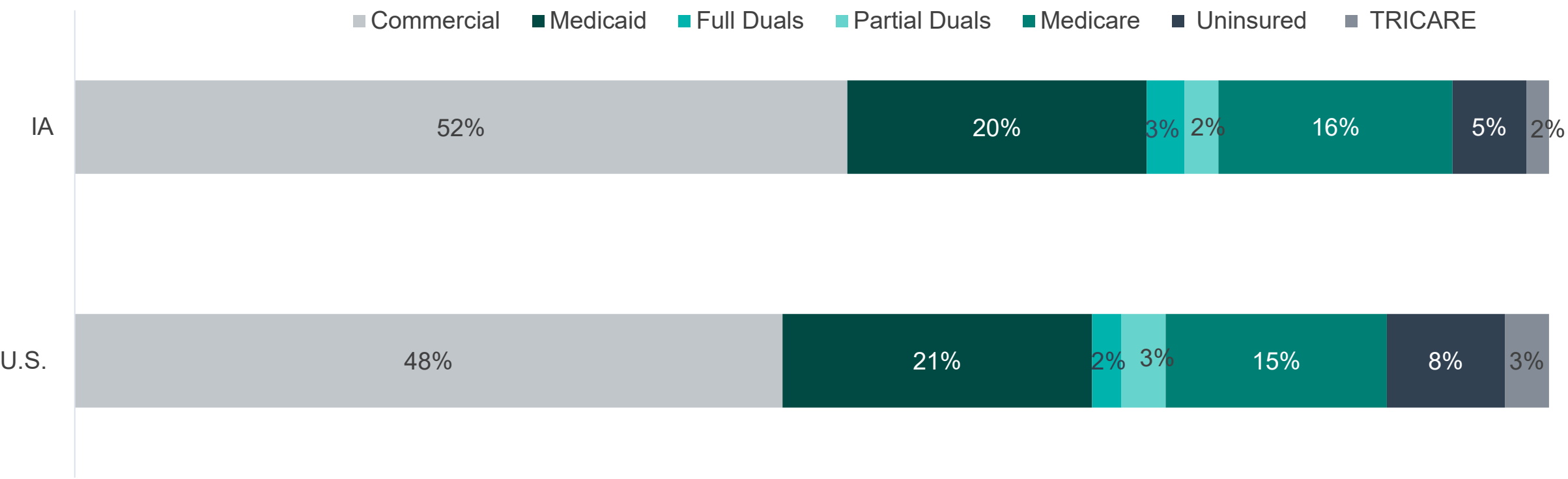
## B.2. Population Centers

Metropolitan Statistical Areas (MSAs)*		
MSA	MSA Residents	Percent Of Population
<b>Total MSA Population</b>	<b>3,123,317</b>	<b>97%</b>
Omaha-Council Bluffs, NE-IA	976,671	30%
Des Moines-West Des Moines, IA	753,913	24%
Davenport-Moline-Rock Island, IA-IL	381,801	12%
Cedar Rapids, IA	278,677	9%
Iowa City, IA	187,711	6%
Waterloo-Cedar Falls, IA	170,081	5%
Sioux City, IA-NE-SD	145,994	5%
Ames, IA	129,227	4%
Dubuque, IA	99,242	3%

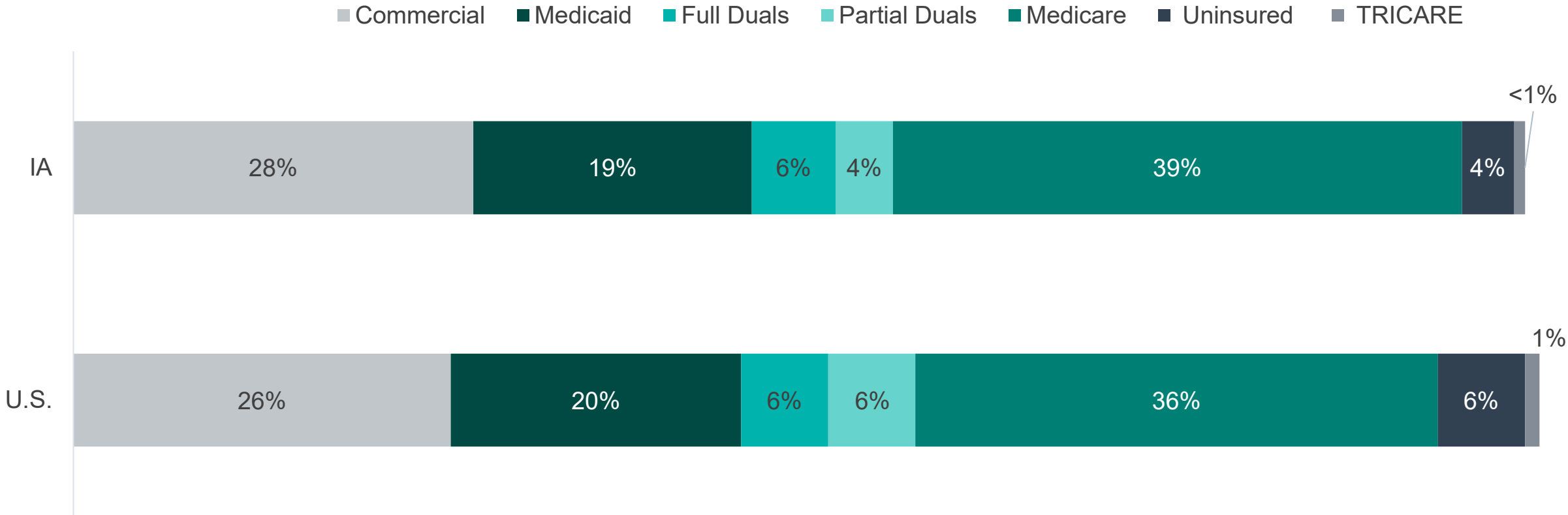
\*Data shown is from MSA as defined by 2024 census.



# B.3. Population Distribution By Payer: National vs. State



# B.3. SMI Population Distribution By Payer: National vs. State



Totals may not equal 100% due to rounding

## B.4. Largest Iowa Health Plans By Enrollment

Plan Name	Plan Type	Enrollment*
Wellmark, Inc.	Commercial	710,621
UnitedHealthcare of Wisconsin, Inc**	Medicare Advantage	541,756
Iowa Medicare fee-for-service (FFS)	Medicare	428,277
Wellmark Health Plan of Iowa	Commercial	365,016
UnitedHealthcare ASO	Commercial administrative services only (ASO)	179,455
Amerigroup Health Link	Medicaid managed care	159,148
Iowa Total Care Health Link	Medicaid managed care	142,023
Molina Health Link	Medicaid managed care	118,832
Aetna ASO	Commercial ASO	63,267
Amerigroup Iowa Wellness Plan	Medicaid managed care	60,673

\*Medicaid enrollment as of September 2024; TRICARE as of December 2023; Commercial as of September 2023; Medicare enrollment as of September 2024

\*\*UnitedHealthcare of Wisconsin, Inc serves individuals in Iowa as well as Wisconsin.

## B.4. Largest Iowa Health Plans By Estimated SMI Enrollment

Plan Name	Plan Type	Enrollment*	Estimated SMI Enrollment***
UnitedHealthcare of Wisconsin	Medicare Advantage	541,756	122,979
Medicare FFS	Medicare	428,277	97,219
Wellmark	Commercial	710,621	34,820
Wellmark Health Plan of Iowa	Commercial	365,016	17,886
Amerigroup Health Link	Medicaid managed care	159,148	14,005
Iowa Total Care Health Link	Medicaid managed care	142,023	12,498
Molina Health Link	Medicaid managed care	118,832	10,457
UnitedHealthcare ASO	Commercial ASO	179,455	8,793
Aetna Medicare	Medicare Advantage	38,353	8,706
HumanaChoice	Medicare Advantage	28,460	6,460
Coventry Advantra	Medicare Advantage	25,833	5,864

\*Medicaid enrollment as of September 2024; TRICARE as of December 2023; Commercial as of September 2023; Medicare enrollment as of September 2024

\*\*UnitedHealthcare of Wisconsin, Inc serves individuals in Iowa as well as Wisconsin.

\*\*\* See [slide I.1.1](#) for OPEN MINDS SMI estimates.

# B.5. Health Insurance Marketplace

Health Insurance Marketplace	
Health Plan Marketplace Percentage	3%
Type of Marketplace	State partnership marketplace
Individual Enrollment Contact	<a href="https://www.healthcare.gov/">https://www.healthcare.gov/</a>
	1-800-318-2596
Small Business Enrollment Contact	No small group plans are available through the marketplace. Employers must purchase coverage directly from an insurance carrier or through an insurance broker.

2025 Individual Market Health Plans
<ol style="list-style-type: none"> <li>1. Medica Insurance Company</li> <li>2. Iowa Total Care</li> <li>3. Oscar</li> <li>4. UnitedHealthcare Plan of the River Valley</li> <li>5. Wellmark Health Plan of Iowa</li> </ol>

2025 Small Group Market Health Plans
None

# B.6. Accountable Care Organizations

## Medicare Shared Savings ACOs

- |   |  |
|---|--|
| 1. ACO Collaborative, LLC                     | 13. Main Street Rural Health Juniper ACO LLC     |
| 2. Caravan Health ACO 43, LLC                 | 14. Main Street Rural Health Sycamore ACO LLC    |
| 3. Caravan Health ACO 50, LLC                 | 15. MercyOne ACO III                             |
| 4. Aledade 90 National MSSP Enhanced          | 16. MercyOne ACO IV                              |
| 5. Aledade 103 Upper Midwest MSSP             | 17. MercyCare Accountable Care Organization, LLC |
| 6. Aledade 155 National MSSP                  | 18. Midwest Health Coalition ACO                 |
| 7. CHI Health Partners                        | 19. Nebraska Health Network, LLC                 |
| 8. Collaborative ACO 30, LLC                  | 20. NPG Health Collaborative LLC                 |
| 9. Genesis Accountable Care Organization, LLC | 21. Prairie Vista Care Organization              |
| 10. Gundersen ACO                             | 22. Stratum Med ACO                              |
| 11. IowaHealth+                               | 23. Think ACO, LLC                               |
| 12. Main Street Rural Health Hawthorn ACO LLC | 24. UnityPoint Accountable Care                  |

# B.6. Accountable Care Organizations:

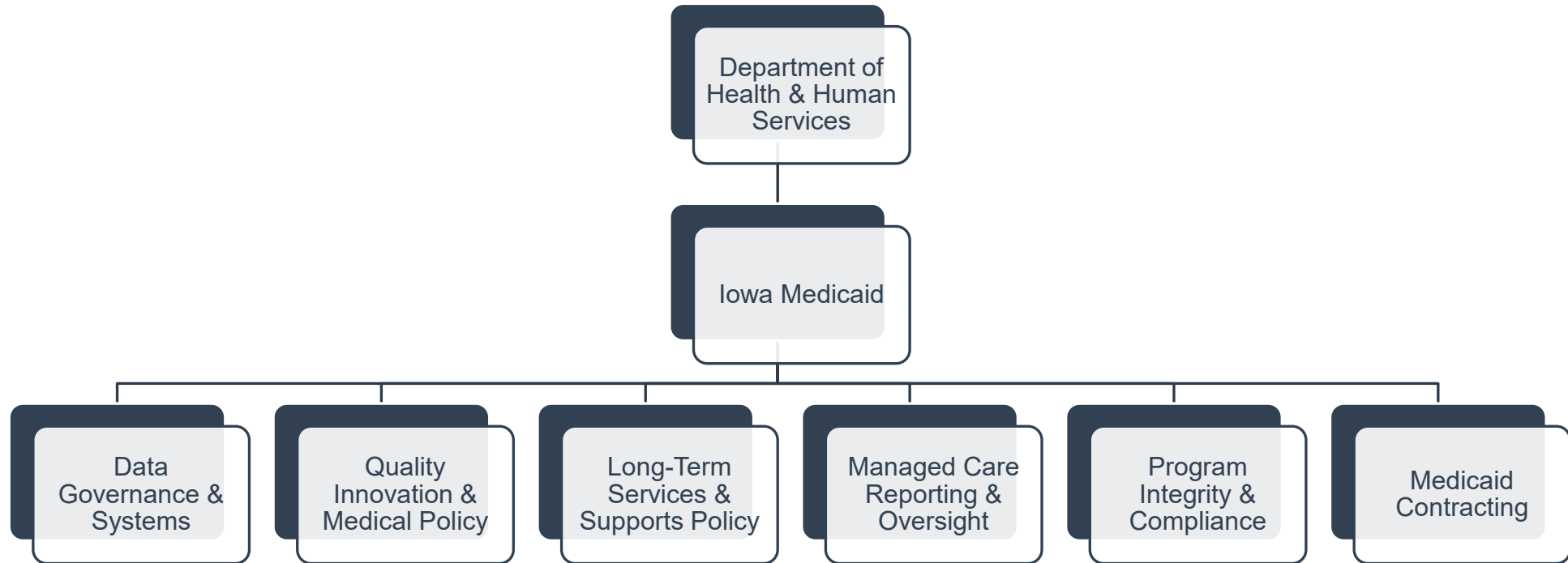
Medicaid ACOs	
1.	Broadlawns Medical Center
2.	IowaHealth+ Medicaid Wellness ACO
3.	Mercy ACO, LLC
4.	UnityPoint Accountable Care, LLC

Commercial ACOs	
ACO	Commercial Insurer
Family Health Care of Siouxland	Wellmark BCBS of Iowa
Great River Health Systems	Wellmark BCBS of Iowa
The Iowa Clinic PC	Wellmark BCBS of Iowa
UnityPoint Accountable Care, LLC	Aetna, BCBS of Illinois*, UnitedHealthcare

\*BCBS of Illinois serves individuals in Illinois, Iowa, and Wisconsin.

# C. Medicaid Administration, Governance & Operations

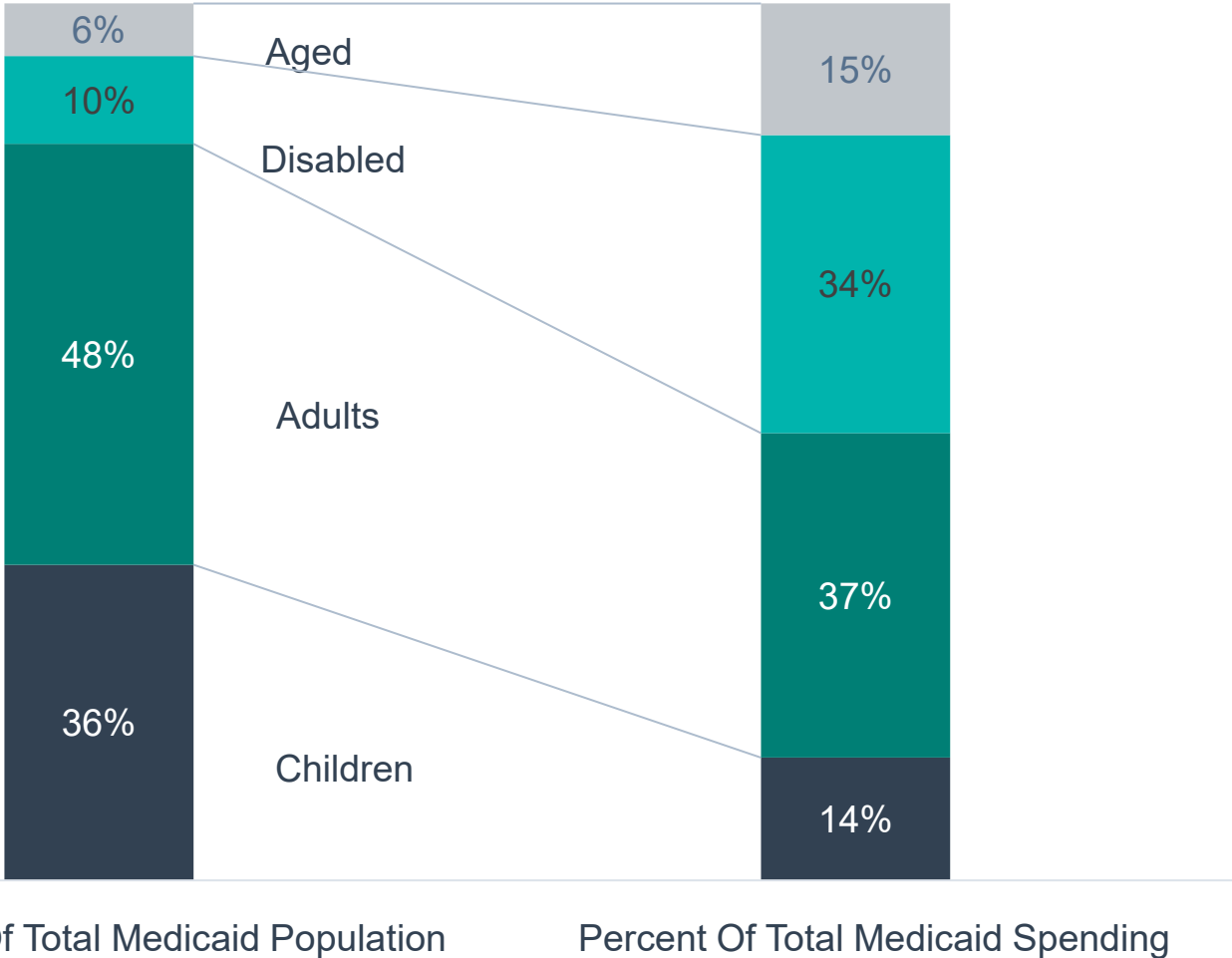
# C.1. Medicaid Governance: Organization Chart



# C.1. Medicaid Governance: Key Leadership

Name	Position	Department	Email
Kelly Garcia	Director	Iowa Department of Health & Human Services	director@dhs.state.ia.us
Vacant	State Medicaid Director	Iowa Medicaid	N/A
Julie Lovelady	Deputy Medicaid Director	Iowa Medicaid	jlovelady@dhs.state.ia.us
Joanne Bush	Director, Managed Care Reporting and Oversight	Iowa Medicaid	jbush@dhs.state.ia.us
Vacant	Director, Medicaid Contracting	Iowa Medicaid	N/A
Paula Motsinger	Director, Long-Term Services & Supports Policy	Iowa Medicaid	pmotsin@dhs.state.ia.us
Jennifer Steenblock	Director, Program Integrity and Compliance	Iowa Medicaid	jsteenb@dhs.state.ia.us
Jenny Erdman	Director, Quality Innovation and Medical Policy	Iowa Medicaid	jerdman@dhs.state.ia.us

# C.2. Medicaid Program Spending By Eligibility Group



Medicaid Spending Per Enrollee, FY 2022		
	U.S.	Iowa
All populations	\$8,813	\$8,667
Children	\$3,786	\$3,332
Adults	\$5,443	\$6,270
Expansion adults	\$7,569	\$6,882
Blind and disabled	\$25,483	\$27,853
Aged	\$19,191	\$22,520

Based on 2022 data

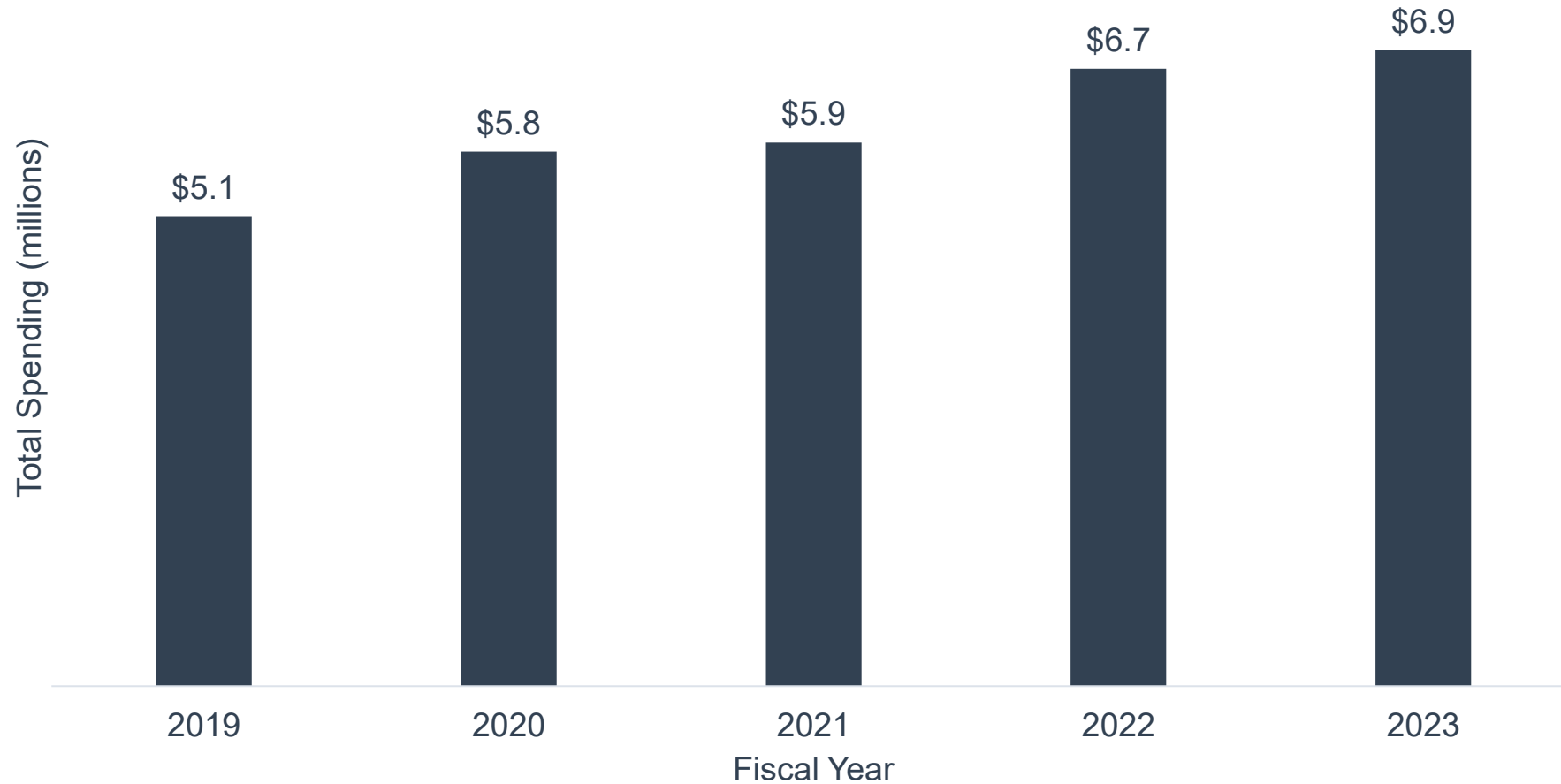
## C.2. Medicaid Program Spending

Budget Item	SFY23 Spending	Percent Of Budget
Managed care and premium assistance	\$6,293,000,000	91%
Medicare premiums and coinsurance	\$209,000,000	3%
Other acute services	\$133,000,000	2%
Hospital	\$126,000,000	2%
Clinic and health center	\$50,000,000	1%
Home- and community-based LTSS	\$54,000,000	1%
Institutional LTSS	\$35,000,000	1%
Physician	\$14,000,000	<1%
Drugs	\$7,000,000	<1%
Other practitioner	\$2,000,000	<1%
<b>Budget Total: \$6,923,000,000</b>		

Federal & County Financial Participation	
FY 2025 Federal Medical Assistance Percentage (FMAP)	63.2%
CY 2025 Newly Eligible FMAP (expansion population)	88.0%
Counties contribute to state Medicaid share	No.

Totals may not equal 100% due to rounding

## C.2. Medicaid Program Spending: Change Over Time



## C.3. Medicaid Expansion Status

Medicaid Expansion	
Participating In Expansion	Yes
Date Expansion Occurred	January 2014
Medicaid Eligibility Income Limit For Able-Bodied Adults	<ul style="list-style-type: none"> <li>138% of the Federal Poverty Level (FPL)</li> <li>Note: The Patient Protection and Affordable Care Act (PPACA) disregards 5% of income for eligibility</li> </ul>
Legislation Used To Expand Medicaid	SF 446, 85th General Assembly
Number Of Individuals Enrolled In The Expansion Group (June 2024)	182,541
Number Of Enrollees Newly Eligible Due To Expansion	179,933
Benefits Plan For Expansion Population	<ul style="list-style-type: none"> <li>The alternative benefit plan (ABP) is based on a small group marketplace plan and provides benefits like those of the state plan. <ul style="list-style-type: none"> <li>LTSS covered under the ABP are limited to state plan home health services and 120 days of nursing facility care.</li> <li>Behavioral health waiver services and assertive community treatment are not covered under the ABP.</li> <li>To receive health home services, expansion enrollees must receive a medical exemption.</li> </ul> </li> <li>Medically frail individuals must be offered the full array of state plan services.</li> <li>Individuals with SMI or chronic addiction are considered to be medically frail.</li> <li>The state implemented a process to ensure continuity of care upon receiving services.</li> </ul>

# C.4. Medicaid Program Benefits

## Federally Mandated Benefits

1. Inpatient hospital services
2. Outpatient hospital services
3. Mental health and substance use disorder inpatient/outpatient services
4. Rural Health Clinic services
5. Federally Qualified Health Center (FQHC) services
6. Laboratory and x-ray services
7. Nursing facilities for individuals 21 and over
8. Early and Periodic Screening and Diagnosis and Treatment (EPSDT)
9. Family planning services and supplies
10. Free standing birth centers
11. Pregnancy-related and postpartum services
12. Nurse midwife services
13. Tobacco cessation programs for pregnant women
14. Physician services
15. Medical and surgical services of a dentist
16. Home health services
17. Nurse practitioner services
18. Non-emergency transportation to medical care

## Iowa's Optional Benefits

1. Case management services
2. Chiropractic services
3. Clinical services
4. Dental services, including dentures
5. Hearing aids
6. Diagnostic, preventive, and rehabilitative services
7. Durable medical equipment and supplies
8. Optometry and eyeglasses
9. Hospice services
10. IMD services for individuals over age 65
11. Inpatient psychiatric services for individuals 21 and under
12. Intermediate care facility for individuals with intellectual disabilities (ICF/IDD) services
13. Nursing facility services for individuals 21 and under
14. Occupational and physical therapy
15. Other practitioners' services
16. Podiatric services
17. Prescribed drugs
18. Speech, hearing, and language therapy services
19. Transplant services

# D. Medicaid Financing & Service Delivery System

# D.1. Medicaid Financing & Service Delivery System

Medicaid System Characteristics		
Characteristics	Medicaid Fee-For-Service (FFS)	Medicaid Managed Care
Enrollment (September 2024)	42,715	657,582
SMI Enrollment	<ul style="list-style-type: none"> <li>Iowa does not specifically preclude individuals with SMI from enrolling in managed care; therefore, the majority of the SMI population is enrolled in managed care.</li> <li>Estimated 6% of the SMI population in FFS; 94% in managed care</li> </ul>	
Management	Department of Health & Human Services, Iowa Medicaid Enterprise	Three health plans
Payment Model	FFS	Capitated rate
Geographic Service Area	Statewide	Statewide

**Total Medicaid: 700,297 | Total Medicaid With SMI: 57,865**

# D.1. Medicaid System Overview

Medicaid Financial Delivery System Enrollment	
Total Medicaid population distribution	As of September 2024: 6% in fee-for-service (FFS); 94% in managed care
SMI population inclusion in managed care	<ul style="list-style-type: none"> <li>Iowa does not specifically preclude individuals with SMI from enrolling in managed care; therefore, the majority of the SMI population is enrolled in managed care.</li> <li>Estimated 6% of the SMI population in FFS; 94% in managed care</li> </ul>
Dual eligible population inclusion in managed care	<ul style="list-style-type: none"> <li>Managed care is mandatory for full benefit dual eligibles</li> <li>Estimated 23% of population in FFS; 77% in managed care</li> </ul>
Long-term services and supports (LTSS) population inclusion in managed care	<ul style="list-style-type: none"> <li>All Medicaid managed care beneficiaries in need of LTSS receive services through the health plan's capitation rate.</li> </ul>

Medicaid Financing & Risk Arrangements: Behavioral Health		
Service Type	FFS Population	Managed Care Population
Traditional behavioral health	Covered FFS by the state	Included in the health plan's capitation rate
Specialty behavioral health	Covered FFS by the state	Included in the health plan's capitation rate
Pharmaceuticals	Covered FFS by the state	Included in the health plan's capitation rate
Long-term services and supports (LTSS)	Covered FFS by the state	Included in the health plan's capitation rate

# D.1. Medicaid System Overview: Care Coordination Initiatives

Medicaid Care Coordination Entities For Chronic Care Populations (Including SMI)		
Care Coordination Entity	Active Program	Description
Managed Care Health Plan	✓	Health plans are responsible for care coordination for at-risk populations.
Primary Care Case Management (PCCM)		None
Accountable Care Organization (ACO) Program	✓	The state offers four Medicaid ACOs.
Affordable Care Act (ACA) Model Health Home	✓	The state has two health home programs: one for individuals with chronic conditions and one for individuals with SMI or SED.
Patient-Centered Medical Home (PCMH)	✓	Provider organizations that operate as Medicaid health homes for individuals with chronic conditions must earn PCMH accreditation.
Dual Eligible Demonstration		None
Managed Long-Term Services and Supports (MLTSS)	✓	Health plans are responsible for providing LTSS to the managed care population.
Certified Community Behavioral Health Clinics (CCBHC) Grant	✓	Iowa operates nine CCBHCs under the federal expansion grant.

# D.1. Medicaid Service Delivery System Enrollment By Eligibility Group

Population	Mandatory FFS Enrollment	Option To Enroll In FFS Or Managed Care	Mandatory Managed Care Enrollment
Parents and caretakers			X
Children			X
Blind and disabled individuals			X
Aged individuals			X
Dual eligibles	Partial benefit dual eligibles		Full benefit dual eligibles
Medicaid expansion			X
Individuals residing in nursing homes			X
Individuals residing in ICF/IDD			X
Individuals in foster care			X
Other populations	<ul style="list-style-type: none"> <li>• Premium payment program</li> <li>• Emergency services only</li> <li>• Medically needy</li> <li>• Presumptive eligibility</li> <li>• Retroactive eligibility</li> </ul>	<ul style="list-style-type: none"> <li>• American Indian or Alaskan Native individuals</li> <li>• PACE</li> </ul>	

## D.2. Medicaid FFS Program: Overview

- Iowa's FFS enrollment as of September 2024 was 42,715.

## D.2. Medicaid FFS Program: Behavioral Health Benefits

- Behavioral health services and pharmacy are provided FFS by the state for individuals that receive FFS benefits.
- When Iowa implemented its managed care program in 2016, the state ended its carve-out for behavioral health services. As a result, the FFS population lost access to behavioral health benefits available through the state's section 1915 (b)(3) waiver for individuals enrolled in managed care.

### FFS Mental Health Benefits

1. Behavioral health intervention services
2. Inpatient treatment
3. Outpatient treatment
4. Partial hospitalization
5. Day treatment
6. Counseling
7. Psychiatric medical institutions for children
8. Assertive community treatment for individuals with SMI
  - a. Medication education, management, and monitoring
  - b. Integrated therapy and counseling
  - c. Skill teaching and development
  - d. Community support
  - e. Care management
  - f. Crisis response or intervention
  - g. Work-related services

### FFS Addiction Treatment Benefits

1. Inpatient treatment
2. Outpatient treatment
3. Counseling and intervention
4. Mental health assessment

## D.2. Medicaid FFS Program: SMI Population

- Iowa does not specifically preclude individuals with SMI from enrolling in managed care based on a diagnosis of SMI; however, individuals with SMI may be enrolled in FFS based on other criteria.
- As of September 2024, *OPEN MINDS* estimates that 6% of the SMI population was enrolled in FFS.
- Health homes and assertive community treatment (ACT) are available for individuals with SMI.

## D.2. Medicaid FFS Program: Pharmacy Benefit

Iowa FFS Program Pharmacy Benefit & Utilization Restrictions	
State Uses Pharmacy Benefit Manager	No
Responsible For Financing General Pharmacy Benefit	Medicaid FFS
Responsible For Financing Mental Health Pharmacy Benefit	Medicaid FFS
State Uses A Preferred Drug List (PDL) For General Pharmacy	Yes
State Uses A PDL For Mental Health Drugs	Yes, antidepressants, antipsychotics, anticonvulsants, and anxiolytics are included in the general pharmacy PDL.
State Uses A PDL For Addiction Treatment Drugs	Yes, narcotic antagonists and alcohol deterrents are included in the general pharmacy PDL.
Coverage Of Antipsychotic Injectable Medications	Covered as a pharmacy benefit; Step therapy is required.
Utilization Restrictions For Mental Health Or Addiction Treatment Drugs	<ul style="list-style-type: none"> <li>• Non-preferred drugs require prior approval.</li> <li>• Step therapy is in place for atypical antipsychotics.</li> <li>• Prior authorization using additional clinical criteria is required for some behavioral health and addiction treatment drugs.</li> <li>• Prior authorization is required for all non-preferred opioids that exceed the morphine milligram equivalent (MME) threshold.</li> </ul>
State Has A Pharmacy Lock-In Program Or Other Restriction Program	Members who use Medicaid benefits at a frequency, or in an amount that is considered overuse, are restricted to one pharmacy, one hospital, and one primary care physician to assist in coordination of all Medicaid services.

## D.3. Medicaid Managed Care Program: Overview

- Managed care enrollment as of September 2024 was 657,582.
- The managed care program is called IA Health Link. IA Health Link serves two different population groups who have different benefits and cost-sharing requirements:
  - Non-expansion population: Aged, blind, and disabled individuals; children; and parents and caretaker relatives. These enrollees receive the full-benefit package and are not responsible for additional cost-sharing.
  - Medicaid expansion population: Childless adults with income less than 138% of the FPL. These enrollees are subject to cost-sharing requirements and receive an alternative benefit package.
- The state contracts with three managed health plans to provide physical health and behavioral health services, pharmacy, and long-term services and supports (LTSS) to both the Medicaid expansion and non-expansion population.
- The health plan's start date determines the percentage of the population that must be in value-based arrangements. Health plans must have 40% of enrollees in value-based arrangements.
  - Incentives and/or risks in qualifying arrangements must take into consideration both a cost component and the state's approved set of quality measures, called the Value Index Score (VIS).
- The Department of Health & Human Services (DHHS) currently operates three health plans – Iowa Total Care, Amerigroup, and Molina Healthcare.
  - New protections for LTSS members include level of care assessments to ensure additional quality oversight for Long-Term Services and Supports members, credentialing and claim payment system issues.
  - New contracts incorporate policy changes and legislative requirements, which include additional funding for providers, including nursing facilities, Federally Qualified Health Centers, Intermediate Care Facilities for the Intellectually Disabled, Rural Health Clinics, and increased access to services.

## D.3. Medicaid Managed Care Program: Iowa Wellness Program

- The Iowa Wellness Program is a section 1115 waiver-based expansion of the Medicaid program for persons aged 19 to 64 with incomes between 0% and 138% of the federal poverty level (FPL).
  - Services are delivered through the IA Health Link health plans.
- The program offers an alternative benefits plan (ABP) that differs from the state plan benefits offered to the non-expansion population.
- After their first year in the program, households with incomes between 50% and 100% FPL are required to pay \$5 monthly premiums. Households with incomes between 100% and 133% FPL are required to pay \$10 monthly premiums. If an individual visits the emergency room for non-emergency services, a copayment of \$8 will be charged.
  - Individuals who accomplish two healthy behaviors (health risk assessment and a physical or dental exam) can have their premiums waived for the year.
  - Unpaid premiums are considered a collectible debt owed to the state and do not result in loss of coverage for the enrollee.

# D.3. Medicaid Managed Care Program: Health Plan Characteristics

Amerigroup Iowa, Inc.	Molina Healthcare		
<ul style="list-style-type: none"><li>1. <b>Profit status:</b> For-profit</li><li>2. <b>Parent company:</b> Anthem, Inc.</li><li>3. <b>Behavioral health subcontractor:</b> Carelon</li><li>4. <b>Pharmacy benefit manager:</b> CarelonRx</li><li>5. <b>Enrollment share:</b> 37%</li></ul>	<ul style="list-style-type: none"><li>1. <b>Profit status:</b> For-profit</li><li>2. <b>Parent company:</b> None</li><li>3. <b>Behavioral health subcontractor:</b> None</li><li>4. <b>Pharmacy benefit manager:</b> CVS Caremark</li><li>5. <b>Enrollment share:</b> 30%</li></ul>		
<table border="1"><thead><tr><th data-bbox="794 768 1658 868">Iowa Total Care, Inc.</th></tr></thead><tbody><tr><td data-bbox="794 868 1658 1328"><ul style="list-style-type: none"><li>1. <b>Profit status:</b> For-profit</li><li>2. <b>Parent company:</b> WellCare-Centene</li><li>3. <b>Behavioral health subcontractor:</b> Cenpatico</li><li>4. <b>Pharmacy benefit manager:</b> Express Scripts</li><li>5. <b>Enrollment share:</b> 33%</li></ul></td></tr></tbody></table>		Iowa Total Care, Inc.	<ul style="list-style-type: none"><li>1. <b>Profit status:</b> For-profit</li><li>2. <b>Parent company:</b> WellCare-Centene</li><li>3. <b>Behavioral health subcontractor:</b> Cenpatico</li><li>4. <b>Pharmacy benefit manager:</b> Express Scripts</li><li>5. <b>Enrollment share:</b> 33%</li></ul>
Iowa Total Care, Inc.			
<ul style="list-style-type: none"><li>1. <b>Profit status:</b> For-profit</li><li>2. <b>Parent company:</b> WellCare-Centene</li><li>3. <b>Behavioral health subcontractor:</b> Cenpatico</li><li>4. <b>Pharmacy benefit manager:</b> Express Scripts</li><li>5. <b>Enrollment share:</b> 33%</li></ul>			

## D.3. Medicaid Managed Care Program: Behavioral Health Overview

- Behavioral health and pharmacy benefits are included in the health plan's capitation rate.
- Individuals with SMI are eligible to receive assertive community treatment (ACT), health home services, and 1915 (b)(3) waiver services.
  - These services are not available to members of the Medicaid expansion population unless they demonstrate medical need.
- For individuals between the ages of 22 and 64, with the consent of the enrollee, health plans may offer inpatient psychiatric treatment in an institution for mental disease for stays that are 15 days or less in a calendar month in lieu of similar services covered by the state plan.

# D.3. Medicaid Managed Care Program: Behavioral Health Benefits

Managed Care Mental Health Benefits	Managed Care Addiction Treatment Benefits	Benefits For Individuals With SMI*
<ol style="list-style-type: none"> <li>1. Inpatient services</li> <li>2. Outpatient therapy</li> <li>3. Medication management</li> <li>4. Community-based and facility sub-acute services</li> <li>5. Crisis services</li> <li>6. Care consultation</li> <li>7. Health home services</li> <li>8. Stabilization services</li> <li>9. Behavioral health intervention services</li> <li>10. Psychiatric medical institutions for children</li> <li>11. Court-ordered services</li> </ol>	<ol style="list-style-type: none"> <li>1. Inpatient services</li> <li>2. Outpatient treatment</li> <li>3. Detoxification services</li> <li>4. Partial hospitalization and day treatment</li> <li>5. Clinically managed, non-residential treatment</li> <li>6. Medically monitored, non-residential treatment</li> <li>7. Intake, assessment, and diagnosis</li> <li>8. Evaluation, treatment planning, and service coordination</li> <li>9. Counseling in an opioid treatment program</li> <li>10. Psychiatric medical institutions for children</li> <li>11. Court-ordered services</li> </ol>	<ol style="list-style-type: none"> <li>1. Assertive community treatment               <ol style="list-style-type: none"> <li>a. Medication education, management, and monitoring</li> <li>b. Integrated therapy and counseling</li> <li>c. Skill teaching and development</li> <li>d. Community support</li> <li>e. Care management</li> <li>f. Crisis response</li> <li>g. Work-related services</li> </ol> </li> <li>2. 1915 (b)(3) services               <ol style="list-style-type: none"> <li>a. Intensive psychiatric rehabilitation</li> <li>b. Community support services</li> <li>c. Peer support</li> <li>d. Residential addiction treatment</li> </ol> </li> </ol> <p>*Not available for members of the expansion population unless they demonstrate medical need</p>

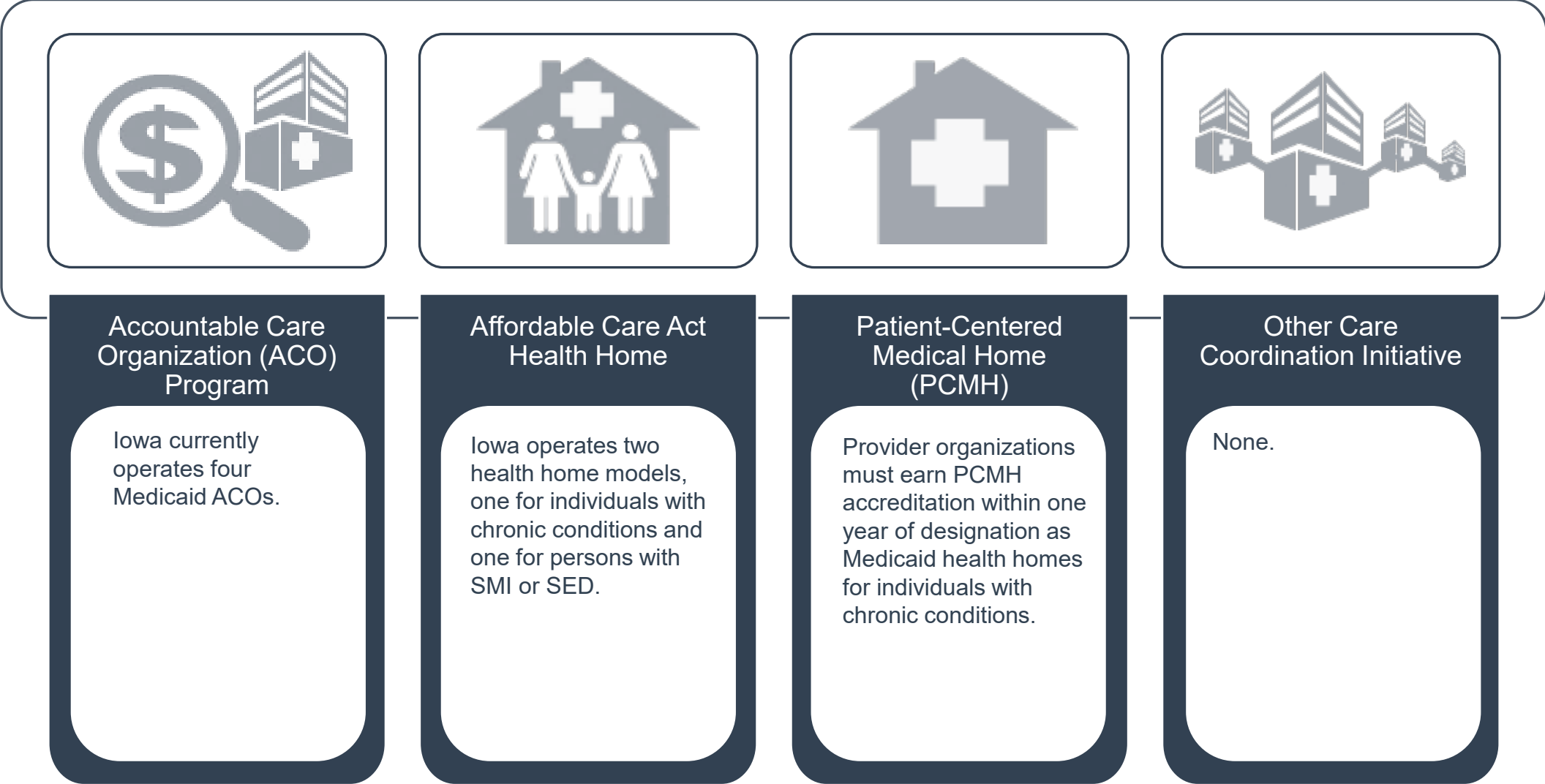
## D.3. Medicaid Managed Care Program: SMI Population

- Iowa does not specifically preclude individuals with SMI from enrolling in managed care based on a diagnosis of SMI.
- As of September 2024, *OPEN MINDS* estimates that 94% of the SMI population was enrolled in managed care.
- Health homes and ACT are available for individuals with SMI. Managed care enrollees with SMI are eligible to receive 1915 (b)(3) waiver services not available to the FFS population.

# D.3. Medicaid Managed Care Program: Pharmacy Benefit

Iowa Managed Care Program Pharmacy Benefit	
Responsible For Financing General Pharmacy Benefit	Health plan; Hemophilia drugs are covered by the state.
Responsible For Financing Mental Health Pharmacy Benefit	Health plan
Health Plan Uses A Preferred Drug List (PDL) For General Pharmacy	The health plans are required to adhere to the state’s PDL. The state’s PDL includes both mental health and addiction treatment drugs.
Health Plan Uses A PDL For Mental Health Drugs	
Health Plan Uses A PDL For Addiction Treatment Drugs	
Health Plan Use Of Utilization Restrictions For Mental Health & Addiction Treatment Drugs	<p>The health plans are required to adhere to the state’s utilization restrictions for behavioral health drugs.</p> <ul style="list-style-type: none"> <li>• Non-preferred drugs require prior approval.</li> <li>• Step therapy is in place for atypical antipsychotics.</li> <li>• Prior authorization using additional clinical criteria is required for some behavioral health and addiction treatment drugs.</li> <li>• Prior authorization is required for all non-preferred opioids that exceed the morphine milligram equivalent (MME) threshold.</li> </ul>
Health Plan Allowed To Implement Pharmacy Lock-In Program	The health plans may implement restriction programs subject to state approval.

# D.4. Medicaid Program: Care Coordination Initiatives



## D.4. State Medicaid Health Home Characteristics

Integrated Health Homes For Individuals With Serious Mental Illness (SMI)	
<b>Target Population</b>	<ul style="list-style-type: none"> <li>Adults with SMI and children with SED</li> </ul>
<b>Enrollment Model</b>	<ul style="list-style-type: none"> <li>Health homes identify and engage qualifying members treated at their practices.</li> <li>The state or health plan may also attribute members, but those members may opt out.</li> <li>Members eligible for both Iowa health homes programs may choose one program in which they wish to enroll.</li> </ul>
<b>Geographic Service Area</b>	<ul style="list-style-type: none"> <li>Authorized to operate statewide</li> <li>There are 38 chronic health homes operating statewide.</li> </ul>
<b>Care Delivery Model</b>	<ul style="list-style-type: none"> <li>Team of health care professionals (e.g., physicians, social workers, behavioral health specialists, etc.) led by lead entity</li> <li>Provision of the six core health home functions</li> <li>Lead entity is responsible for data sharing using health information technology</li> </ul>
<b>Payment Model</b>	<ul style="list-style-type: none"> <li>FFS: Tiered PMPM rate- Tier 5 (adult): \$160.46; Tier 6 (child): \$200.97; Tier 7 (adult intense case management): \$199.09; Tier 8 (child intense case management): \$200.97</li> <li>Managed care: Reimbursement structures proposed by each health plan and approved by the state</li> <li>Iowa Total Care plans to operate a health home program.</li> <li>Care management monitoring for treatment gaps is the minimum activity required to qualify for payment</li> </ul>
<b>Practice Performance &amp; Improvement</b>	<ul style="list-style-type: none"> <li>Readmission rates</li> <li>Hospital, SNF, and ER admission rates</li> <li>Self-matched pre-program and program PMPM costs per enrollee; Case-control-matched PMPM cost comparisons</li> </ul>

# D.4. State Medicaid Health Home Characteristics

Iowa Chronic Condition Health Home Services	
<b>Target Population</b>	<ul style="list-style-type: none"> <li>Individuals with two chronic conditions, or one chronic condition and at-risk of another</li> </ul>
<b>Enrollment Model</b>	<ul style="list-style-type: none"> <li>Health home provider organizations identify and engage qualifying members treated at their practices. Individuals may opt into the program.</li> <li>The state or managed care health plans may also attribute members, but those members may opt out.</li> <li>Members eligible for both Iowa health homes programs may choose one program in which they wish to enroll.</li> </ul>
<b>Geographic Service Area</b>	Authorized statewide
<b>Care Delivery Model</b>	<ul style="list-style-type: none"> <li>Individual or group practices, rural health clinics, community mental health centers, and FQHCs may be designated as health homes</li> <li>Health homes perform the six core health home functions</li> <li>Continuity of care document must be maintained for each participant</li> <li>Use of health information technology is required.</li> </ul>
<b>Payment Model</b>	<ul style="list-style-type: none"> <li>FFS: Tiered PMPM payment based on the participant’s number of chronic conditions- One to three conditions: \$13.48; Four to six conditions: \$26.96; Seven to nine conditions: \$53.91; Ten or more conditions: \$80.87</li> <li>Managed care: Payment structures proposed by each health plan and approved by the state.</li> <li>Iowa Total Care is operating in the health home program.</li> <li>Care management monitoring for treatment gaps is the minimum activity required to qualify for payment</li> </ul>
<b>Practice Performance &amp; Improvement</b>	<ul style="list-style-type: none"> <li>NCQA PCMH recognition within first year of operation</li> <li>EHR measures which must be reported using a continuity of care document via the Iowa Health Information Network</li> <li>Providers can receive a performance payment of up to 20% of total annual PMPM based on achievement of quality and performance benchmarks</li> <li>Managed care: Performance payment structures were developed by each health plan and were approved by the state.</li> </ul>

# D.5. Medicaid Program: Demonstration & Care Management Waivers

Waiver Title	Waiver Description	Waiver Type	Enrollment Cap	Effective Date	Expiration Date
Iowa Wellness Plan	<ul style="list-style-type: none"> <li>• Authorizes an alternative Medicaid expansion program for childless adults with income up to 138% of the FPL</li> <li>• Waives the three-month retroactive eligibility period for all enrollment groups except pregnant women and infants</li> </ul>	1115	None	01/01/17	06/30/2025
Iowa's High Quality Healthcare Initiative-HealthLink (IA-08)	Authorizes the state's managed care program for the majority of Medicaid enrollees	1915 (b1), 1915 (b3), 1915 (b4)	None	04/01/21	03/31/26

## D.5. Medicaid Program: Section 1915 (c) HCBS Waivers

Waiver Title	Target Population	2025 Enrollment Cap	Operating Unit	Concurrent Management Authority
IA HCBS Intellectual Disabilities (0242.R07.00)	Individuals with I/DD who would normally receive intermediate care facility services.	14,780	DHHS	N/A
IA Home and Community Based Services - Physical Disability Waiver (0345.R05.00)	Individuals who meet nursing facility level of care.	1,615	DHHS	N/A
IA HCBS Elderly Waiver (4155.R07.00)	Individuals who have been deemed necessary to receive nursing facility or skilled nursing facility level of care.	10,653	DHHS	N/A
IA Children's Mental Health (0819.R03.00)	Individuals under the age of 21 who would normally be institutionalized and would instead be given community supports.	1,860	DHHS	N/A
IA HCBS - Brain Injury (BI) (0299.R06.00)	Individuals with a TBI who would normally meet the criteria to receive nursing facility or skilled nursing facility services.	1,747	DHHS	N/A
IA HCBS AIDS/HIV (0213.R06.00)	Individuals who have a diagnosis of HIV or AIDS who would normally receive institutional services.	50	DHHS	N/A
IA Home and Community Based Services - Health and Disability Waiver (4111.R08.00)	Individuals who meet nursing facility level of care.	3,619	DHHS	N/A

## D.6. Medicaid Program: New Initiatives- Postpartum Coverage

- Beginning April 1, 2025, postpartum coverage will be available for eligible women through Iowa Medicaid. This coverage provides health care services for 12 months after a woman's pregnancy ends.
- Extending postpartum Medicaid coverage for 12 months can help lower the risk of pregnancy-related deaths and complications for the mother.
  - It can also help with ongoing care for chronic conditions such as diabetes, high blood pressure, heart disease, substance use disorder and depression.
- Extending Medicaid coverage will allow 2,700 women who would have otherwise lost coverage after 60 days to remain on Medicaid for a full year. Another 2,300 women will be able to remain on Medicaid after the first two months, rather than qualifying for insurance through the Iowa Health and Wellness Program.
- The changes are expected to cost Iowa an extra \$1.1 million next year and \$3.3 million the following year before dropping to \$286,000 per year.

# E. Medicare Financing & Service Delivery System

# E.1. Medicare Financing & Service Delivery System

Medicare System Characteristics		
Characteristics	Traditional Medicare (FFS)	Medicare Advantage
Enrollment (September 2024)	428,277	251,482
SMI Enrollment	<ul style="list-style-type: none"> <li>• <i>OPEN MINDS</i> estimates 37% of the population in Medicare Advantage, 63% in Traditional Medicare.</li> </ul>	
Management	<ul style="list-style-type: none"> <li>• Part A: Inpatient hospital, skilled nursing facility care, nursing home care, hospice and home health care</li> <li>• Part B: Clinical research, ambulance services, durable medical equipment, mental health and limited outpatient prescription drugs</li> </ul>	<ul style="list-style-type: none"> <li>• Medicare Advantage Plans provide Part A and Part B benefits, plus additional benefits based on plan chosen</li> </ul>
Payment Model	<ul style="list-style-type: none"> <li>• Part A &amp; B cover up to 80%, remaining costs can be paid out of pocket</li> </ul>	<ul style="list-style-type: none"> <li>• Fixed amounts paid based on health plan chosen</li> </ul>
Geographic Service Area	Statewide	Statewide

**Total Medicare: 679,759 | Total Medicare With SMI: 154,305**

# E.1. Medicare Financing & Service Delivery System

Medicare Financial Delivery System Enrollment	
Total Medicare population distribution	As of September 2024: 37% Medicare Advantage, 63% in traditional Medicare.
SMI population inclusion in managed care	Estimated 37% of population in Medicare Advantage, 63% in traditional Medicare.
Medicare population inclusion in Chronic special needs plan or (C-SNP).	There are currently no C-SNP plans in Iowa.
Medicare population inclusion in Institutional Special Needs Plan (I-SNP).	There are currently no I-SNP plans in Iowa.

## E.2. Medicare System: Overview

- Medicare enrollment as of September 2024 was 679,759.
- Currently an estimated 16% of the state's total population is enrolled in Medicare, compared with about 15% of the United States population enrolled in Medicare.
- *OPEN MINDS* estimates approximately 39% of the Medicare population has an SMI.
- Iowa residents have 70 Medicare Advantage plan options available for purchase in 2025, depending on where they live.
- There are 46 insurers offering Medigap plans in Iowa for 2025.
- There are 16 stand-alone Medicare Part D plans for sale in Iowa for 2025, with premiums that start at \$0/month.
- More than 343,678 Iowa residents had stand-alone Medicare Part D plans as of August 2024.
  - Another 231,411 Iowa Medicare beneficiaries had Part D prescription coverage as part of their Medicare Advantage plans.
- Many Medicare beneficiaries receive financial assistance through Medicaid with the cost of Medicare premiums, prescription drug expenses, and services not covered by Medicare – such as long-term care.

## E.3. Medicare ACOs

### Medicare Shared Savings ACOs

- |   |  |
|---|--|
| 1. ACO Collaborative, LLC                     | 13. Main Street Rural Health Juniper ACO LLC     |
| 2. Caravan Health ACO 43, LLC                 | 14. Main Street Rural Health Sycamore ACO LLC    |
| 3. Caravan Health ACO 50, LLC                 | 15. MercyOne ACO III                             |
| 4. Aledade 90 National MSSP Enhanced          | 16. MercyOne ACO IV                              |
| 5. Aledade 103 Upper Midwest MSSP             | 17. MercyCare Accountable Care Organization, LLC |
| 6. Aledade 155 National MSSP                  | 18. Midwest Health Coalition ACO                 |
| 7. CHI Health Partners                        | 19. Nebraska Health Network, LLC                 |
| 8. Collaborative ACO 30, LLC                  | 20. NPG Health Collaborative LLC                 |
| 9. Genesis Accountable Care Organization, LLC | 21. Prairie Vista Care Organization              |
| 10. Gundersen ACO                             | 22. Stratum Med ACO                              |
| 11. IowaHealth+                               | 23. Think ACO, LLC                               |
| 12. Main Street Rural Health Hawthorn ACO LLC | 24. UnityPoint Accountable Care                  |

## E.4. Medicare System: New Initiatives

- There are no new or pending initiative regarding Medicare.

# F. Dual Eligible Financing & Service Delivery System

# F.1. Dual Eligible Medicaid Financing & Service Delivery System

Dual Eligible* Medicaid System Characteristics		
Characteristics	Managed Care	PACE
Enrollment (April 2024)	76,325	1,177
Estimated SMI Enrollment	16,028	247
Management	Two health plans	Three non-profit organizations
Payment Model	Capitated rate	Blended capitated rate
Geographic Service Area	Statewide	Select counties

**Total Dual Eligible Enrollment: 77,502 | Total Dual Eligible Enrollment With SMI: 16,275**

\*Unless otherwise noted, the term *dual eligibles* in this section refers to Medicare enrollees with full Medicaid benefits

## F.2. Largest Dual Eligible Plans By Estimated SMI Enrollment

Health Plans	Parent Company	Plan Type	April 2024 Enrollment	Estimated SMI Enrollment
UnitedHealthcare Dual Complete	UnitedHealthcare	Medicare Advantage D-SNP	14,497	3,044
Amerivantage Dual Coordination	Anthem, Inc	Medicare Advantage D-SNP	5,741	1,206
Aetna Medicare Assure Premier	Aetna/ CVS	Medicare Advantage D-SNP	3,933	826
HumanaChoice	Humana, Inc	Medicare Advantage D-SNP	3,908	821
Immanuel Pathways PACE	Immanuel Pathways	PACE	440	92
PACE Iowa	None	PACE	381	86
Siouxland PACE	Iowa Health System	PACE	356	75

## F.3. Dual Eligible Medicaid Financing & Delivery System: Overview

- Dual eligible enrollment as of April 2024 was 77,502.
- Medicare covers most acute services (which may include psychiatric care); whereas Medicaid (the payer of last resort) covers LTSS and non-physician behavioral health services.
- Unless they meet FFS criteria or are enrolled in PACE, dual eligibles receive Medicaid services through the Medicaid managed care program.
- D-SNP enrollment as of April 2024 was 28,079, D-SNP SMI enrollment was 5,897.

## F.4. Dual Eligible Medicaid Financing & Delivery System: New Initiatives

- The state has no pending dual eligible initiatives.

# G. Long-Term Services & Supports Financing & Service Delivery System

# G.1. LTSS Financing & Service Delivery System

- Iowa’s MLTSS population receives long-term services and supports through health plans contracted with Medicaid managed care. Iowa’s managed care program is called IA Health Link and provides beneficiaries with comprehensive physical health, behavioral health, pharmacy, and long-term services and supports.

LTSS Medicaid System Characteristics	
Characteristics	Medicaid Managed Care
Enrollment (February 2025)	38,643
Estimated SMI Enrollment	8,115
Management	<ul style="list-style-type: none"> <li>Physical health: Three Health Plans</li> <li>Behavioral health: Three Health Plans</li> </ul>
Payment Model	<ul style="list-style-type: none"> <li>Physical health: Capitated rate</li> <li>Behavioral health: Behavioral Health Services Only (BHSOs) and Behavioral Health Administrative Service Organizations (BH-ASOs)</li> </ul>
Geographic Service Area	Statewide

**Total LTSS Enrollment: 38,643 | Total LTSS Enrollment With SMI: 8,115**

# G.1. Medicaid LTSS Service Delivery System Enrollment By Eligibility Group

Population	Mandatory FFS Enrollment	Option To Enroll In FFS Or Managed Care	Mandatory Managed Care Enrollment
Disabled adults			X
Disabled children			X
Blind individuals			X
Aged individuals			X
Dual eligibles	Partial Benefit Enrollees		Full Benefit Enrollees
Individuals with I/DD			X
Individuals residing in nursing homes			X
Individuals residing in ICF/IDD			X
Other HCBS Recipients			X
Other populations			

## G.2. LTSS Medicaid Financing & Delivery System: Overview

- In Iowa, LTSS services are offered by IA Health Link, and by extension the three health plans associated with it.
- IA Health Link covers a majority of LTSS services, including HCBS services, ICF/IDD, Residential Care Facilities, Nursing facilities and Skilled Nursing Facilities, Community-based Neurobehavioral rehabilitation services, and Medical Assistance Income Trust.
- The state has an additional series of seven waivers that offer specialized care for the HCBS population. See [slide 46](#) for a list of waivers.

# G.3. Medicaid LTSS Program: Health Plan Characteristics

## Amerigroup Iowa, Inc.

1. **Profit status:** For-profit
2. **Parent company:** Anthem, Inc.
3. **Behavioral health subcontractor:** Carelon
4. **Pharmacy benefit manager:** CarelonRx

## Iowa Total Care, Inc.

1. **Profit status:** For-profit
2. **Parent company:** WellCare-Centene
3. **Behavioral health subcontractor:**  
Cenpatico
4. **Pharmacy benefit manager:** Express  
Scripts

## Molina Healthcare

1. **Profit status:** For-profit
2. **Parent company:** None
3. **Behavioral health subcontractor:** CVS  
Caremark
4. **Pharmacy benefit manager:** None

# G.4. Medicaid LTSS Program: Health Benefits

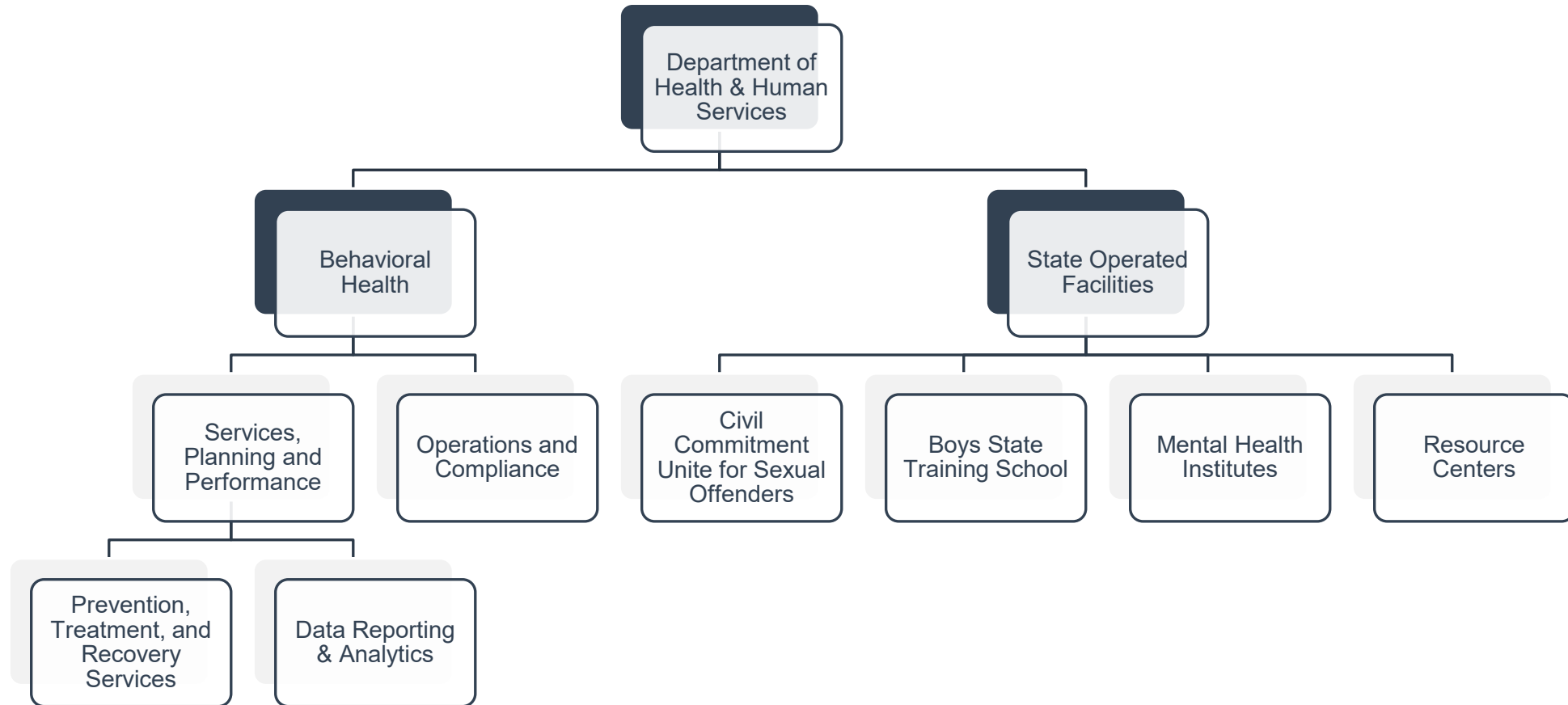
Managed Care Mental Health Benefits	Managed Care Addiction Treatment Benefits	Benefits For Individuals With SMI*
<ol style="list-style-type: none"> <li>1. Inpatient services</li> <li>2. Outpatient therapy</li> <li>3. Medication management</li> <li>4. Community-based and facility sub-acute services</li> <li>5. Crisis services</li> <li>6. Care consultation</li> <li>7. Health home services</li> <li>8. Stabilization services</li> <li>9. Behavioral health intervention services</li> <li>10. Psychiatric medical institutions for children</li> <li>11. Court-ordered services</li> </ol>	<ol style="list-style-type: none"> <li>1. Inpatient services</li> <li>2. Outpatient treatment</li> <li>3. Detoxification services</li> <li>4. Partial hospitalization and day treatment</li> <li>5. Clinically managed, non-residential treatment</li> <li>6. Medically monitored, non-residential treatment</li> <li>7. Intake, assessment, and diagnosis</li> <li>8. Evaluation, treatment planning, and service coordination</li> <li>9. Counseling in an opioid treatment program</li> <li>10. Psychiatric medical institutions for children</li> <li>11. Court-ordered services</li> </ol>	<ol style="list-style-type: none"> <li>1. Assertive community treatment               <ol style="list-style-type: none"> <li>a. Medication education, management, and monitoring</li> <li>b. Integrated therapy and counseling</li> <li>c. Skill teaching and development</li> <li>d. Community support</li> <li>e. Care management</li> <li>f. Crisis response</li> <li>g. Work-related services</li> </ol> </li> <li>2. 1915 (b)(3) services               <ol style="list-style-type: none"> <li>a. Intensive psychiatric rehabilitation</li> <li>b. Community support services</li> <li>c. Peer support</li> <li>d. Residential addiction treatment</li> </ol> </li> </ol>

## G.5. LTSS Medicaid Financing & Delivery System: New Initiatives

- Iowa has no pending initiatives that will influence the finance or delivery systems of the LTSS population.

# H. State Behavioral Health Administration & Finance System

# H.1. Behavioral Health: Organization Chart



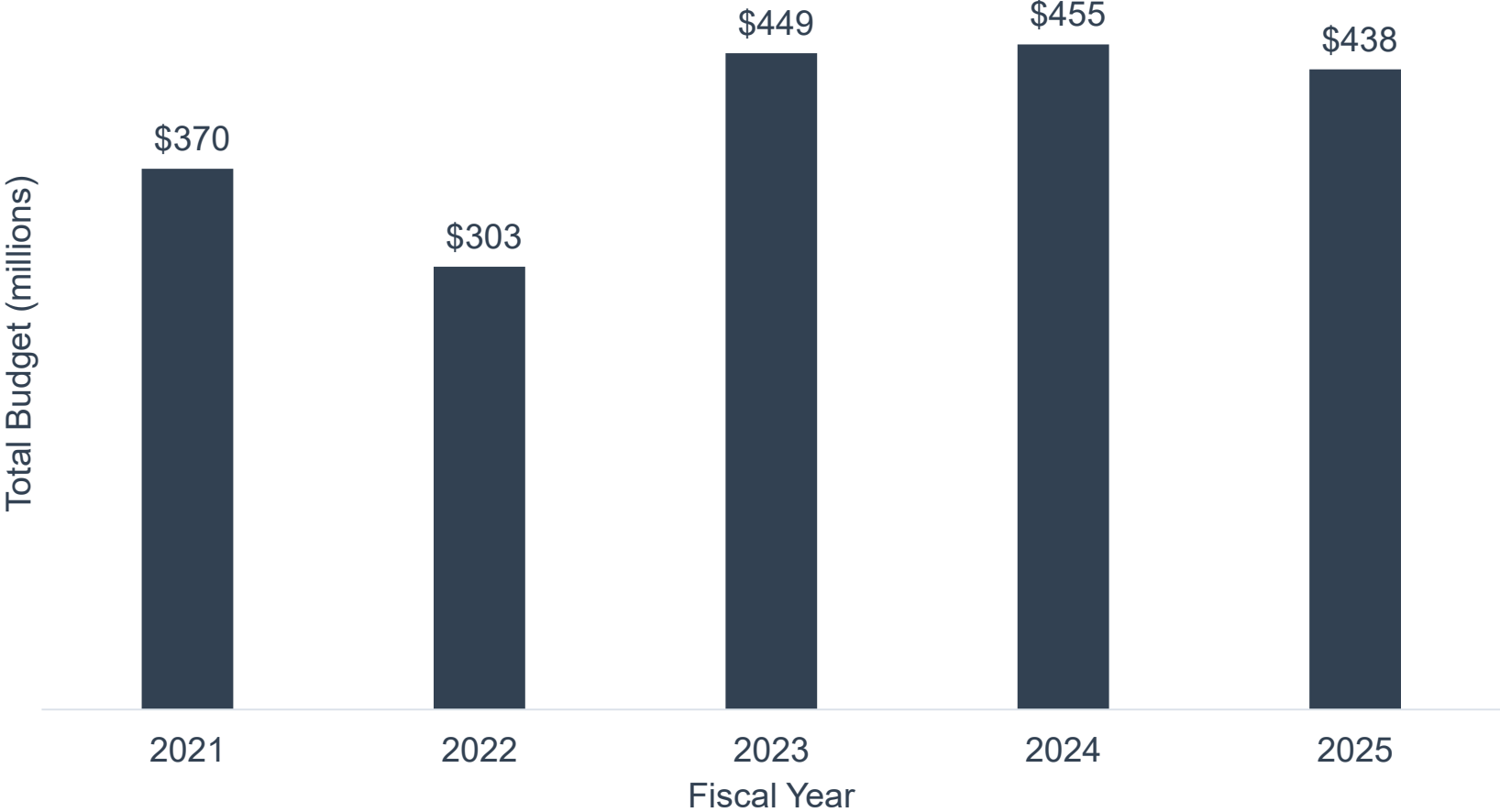
# H.1. Behavioral Health: Key Leadership

Name	Position	Department	Email
Kelly Garcia	Director	Department of Health & Human Services	kgarcia@dhs.state.ia.us
Marissa Eyanson	Director	DHHS, Behavioral Health	meyanso@dhs.state.ia.us
Cory Turner	Director	DHHS, State Operated Facilities	cturner@dhs.state.ia.us
Theresa Armstrong	Director, Operations and Compliance	DHHS, Behavioral Health	tarmstr1@dhs.state.ia.us
DeAnn Decker	Director, Services, Planning, and Performance	DHHS, Behavioral Health	deann.decker@idph.iowa.gov

## H.2. Behavioral Health: Budget

Budget Item	SFY 2025 Budget Enacted	Percent Of Budget
MHDS Regional Services Fund	\$134,421,714	31%
Administration	\$92,594,081	21%
Woodward Resource Center	\$71,694,131	16%
Glenwood Resource Center	\$31,667,097	7%
Independence Mental Health Institute	\$27,397,750	6%
Addictive Disorders	\$23,656,992	5%
Cherokee Mental Health Institute	\$22,361,171	5%
Civil Commitment Unit for Sexual Offenders	\$18,477,938	4%
Department-wide duties	\$7,882,987	2%
Essential Public Health Services	\$7,662,464	2%
Conners Training	\$33,632	<1%
<b>Budget Total: \$437,849,957</b>		

# H.2. Behavioral Health: Budget Over Time



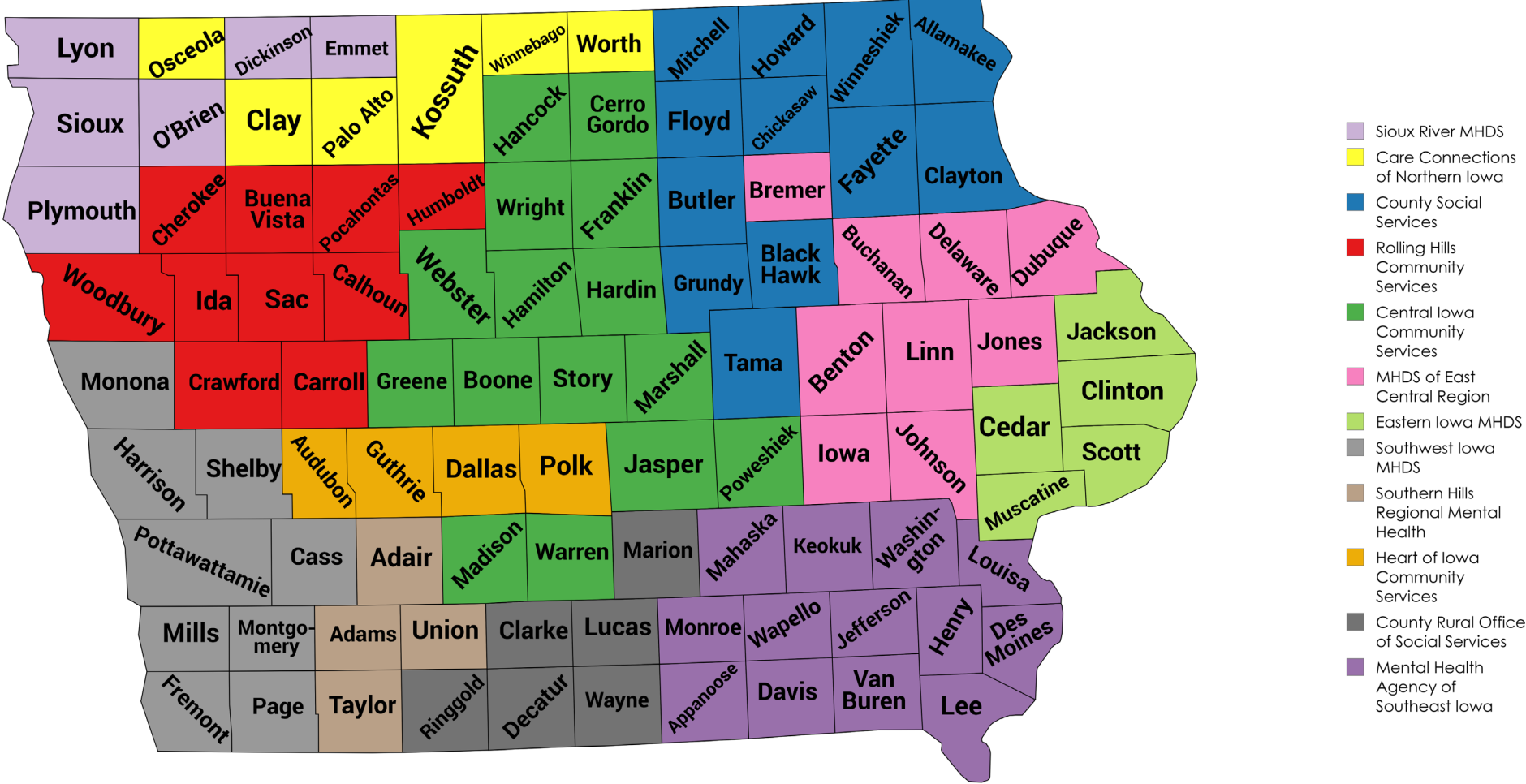
## H.3. State Psychiatric Institutions

Institution	Location	Beds	Average Daily Census (December 2024)
Cherokee Mental Health Institute	Cherokee	36	34
Independence Mental Health Institute	Independence	56	47
<b>Total</b>		<b>92</b>	<b>81</b>

## H.4. Behavioral Health Safety-Net Delivery System

- Iowa provides mental health services for the safety-net population through a delivery system composed of 14 Mental Health and Disabilities Service (MHDS) regions. Unless granted an exemption by the state, a county must join with at least three other contiguous counties to form an MHDS region.
- The MHDS regions are required to ensure that a set of core services are available to adult Iowans with mental illness or an intellectual disability, including:
  - Treatment
  - Basic crisis response
  - Support for community living
  - Recovery services
  - Service coordination
  - Access centers
  - Assertive community treatment (ACT) services
  - Comprehensive facility and community-based crisis services
  - Intensive residential service homes
- After an MHDS region has ensured that core services are available to eligible individuals, the region may provide additional core services including:
  - Justice system involved services
  - Advanced evidence-based treatment
- Funding for mental health services comes from the state general fund and includes an incentive growth factor based on state sales tax revenue.

# H.4. Behavioral Health Safety-Net Delivery System: MHDS Regions



# H.4. Behavioral Health Safety-Net Delivery System: MHDS Regions

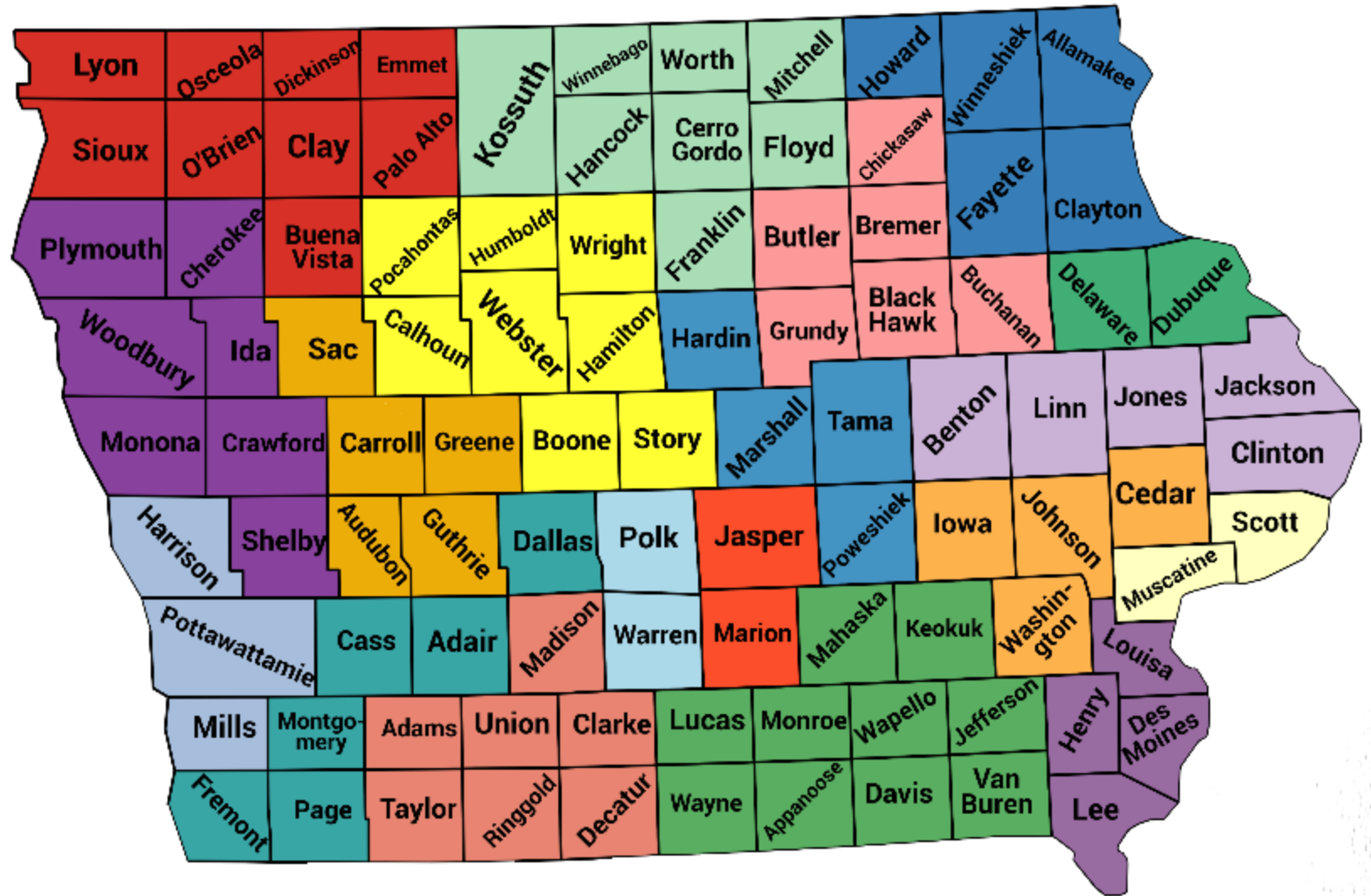
MHDS Region	Counties Served
Central Iowa Community Services	Boone, Franklin, Greene, Hamilton, Hardin, Jasper, Madison, Marshall, Poweshiek, Story, Warren
County Rural Offices of Social Services	Clarke, Decatur, Lucas, Marion, Monroe, Ringgold, Wayne
County Social Services	Allamakee, Black Hawk, Butler, Cerro Gordo, Chickasaw, Clayton, Emmet, Fayette, Floyd, Grundy, Hancock, Howard, Humboldt, Mitchell, Pocahontas, Tama, Webster, Winneshiek, Wright
Eastern Iowa MHDS Region	Cedar, Clinton, Jackson, Muscatine, Scott
Heart of Iowa Region	Audubon, Dallas, Guthrie
MHDS of the East Central Region	Benton, Bremer, Buchanan, Delaware, Dubuque, Iowa, Johnson, Jones, Linn
Northwest Iowa Care Connection	Clay, Kossuth, Osceola, Palo Alto, Winnebago, Worth
Polk County Health Services	Polk
Rolling Hills Community Services Region	Buena Vista, Calhoun, Carroll, Cherokee, Crawford, Ida, Sac, Woodbury
Sioux Rivers MHDS	Dickinson, Lyon, O'Brien, Plymouth, Sioux
South Central Behavioral Health Region	Appanoose, Davis, Mahaska, Wapello
Southeast Iowa Link	Des Moines, Henry, Jefferson, Keokuk, Lee, Louisa, Van Buren, Washington
Southern Hills Regional Mental Health	Adair, Adams, Taylor, Union
Southwest Iowa MHDS Region	Cass, Fremont, Harrison, Mills, Monona, Montgomery, Page, Pottawattamie, Shelby

# H.4. Behavioral Health Safety-Net Delivery System: Addiction Treatment Services

- Iowa residents without insurance can receive addiction assessment and treatment services from regional provider organizations funded by the Iowa Department of Health & Human Services.
  - Each provider organization is responsible for services in one or more counties.
  - Uninsured persons with incomes above 200% FPL are charged for services on a sliding scale.
- Persons with an income at or below 200% FPL, who are not otherwise eligible for Medicaid, may enroll in the Medicaid managed care program to receive a limited-benefit package of IDPH services.
  - The treatment is provided using state funding through IDPH.
  - The health plans are required to contract with IDPH addiction treatment provider organizations operating in 20 service areas.
  - The health plans are reimbursed by IDPH for payments made to provider organizations plus an administrative service fee.
  - Provider organizations are at-risk for IDPH services. Each provider organization is paid for the minimum number of clients that it is expected to serve. Monthly prospective payments are made using service projections and case rates. Most organizations exceed their contract minimums.
- IDHHS services include:
  - a. Outpatient and intensive outpatient treatment
  - b. Partial hospitalization
  - c. Residential treatment
  - d. Medically managed inpatient treatment
  - e. Emergency and ambulance services
  - f. Intake, assessment, and diagnosis
  - g. Evaluation, planning, and coordination
  - h. Counseling
  - i. Court-ordered treatment
  - j. Low, medium, and high-intensity residential treatment
- The IDHHS addiction treatment centers also serve the Medicaid population. The Medicaid health plans must contract with these organizations for the provision of section 1915 (b)(3) waiver addiction treatment services.

# H.4. Behavioral Health Safety-Net Delivery System: IDPN Service Area Map

- Service Area 1
- Service Area 2
- Service Area 3
- Service Area 4
- Service Area 5
- Service Area 6
- Service Area 7
- Service Area 8
- Service Area 9
- Service Area 10
- Service Area 11
- Service Area 12
- Service Area 13
- Service Area 14
- Service Area 15
- Service Area 16
- Service Area 17
- Service Area 18
- Service Area 19



# H.4. Behavioral Health Safety-Net Delivery System: IDHHS Service Areas

Service Area	Addiction Treatment Provider Organization	Counties
1	Compass Pointe	Buena Vista, Clay, Dickinson, Emmet, Lyon, O'Brien, Osceola, Palo Alto, Sioux
2	Prairie Ridge Integrated Behavioral Healthcare	Cerro Gordo, Floyd, Franklin, Hancock, Kossuth, Mitchell, Winnebago, Worth
3	Northeast Iowa Mental Health Center	Allamakee, Clayton, Fayette, Howard, Winneshiek
4	Jackson Recovery Centers, Inc.	Cherokee, Crawford, Ida, Monona, Plymouth, Shelby, Woodbury
5	Community Opportunities, dba, New Opportunities	Audubon, Carroll, Greene, Guthrie, Sac
6	Community and Family Resources	Boone, Calhoun, Hamilton, Humboldt, Pocahontas, Story, Webster, Wright
7	Substance Abuse Treatment Unit of Central Iowa	Hardin, Marshall, Poweshiek, Tama
8	Pathways Behavioral Services	Black Hawk, Bremer, Buchanan, Butler, Chickasaw, Grundy
9	Substance Abuse Services Center	Delaware, Dubuque
10	Area Substance Abuse Council, Inc.	Benton, Clinton, Jackson, Jones, Linn

## H.4. Behavioral Health Safety-Net Delivery System: IDHHS Service Areas (cont.)

Service Area	Addiction Treatment Provider Organization	Counties
11	Heartland Family Service	Harrison, Mills, Pottawattamie
12	Zion Recovery Services, Inc.	Adair, Cass, Dallas, Fremont, Montgomery, Page
13	Crossroads Behavioral Health Services	Adams, Clarke, Decatur, Madison, Ringgold, Taylor, Union
14	Broadlawns Medical Center, House of Mercy, Prelude Behavioral Services, United Community Services	Polk, Warren
15	House of Mercy, United Community Services	Jasper, Marion
16	Southern Iowa Economic Development Association	Appanoose, Davis, Jefferson, Keokuk, Lucas, Mahaska, Monroe, Van Buren, Wapello, Wayne
17	Prelude Behavioral Services	Cedar, Iowa, Johnson, Washington
18	Alcohol and Drug Dependency Services	Des Moines, Henry, Lee, Louisa
19	Center for Alcohol & Drug Services, Inc., New Horizons	Muscatine, Scott

# H.5. Behavioral Health System: New Initiatives—Behavioral Health System

- In 2024, Governor Reynolds signed into law a plan to overhaul and combine Iowa's delivery system for mental and behavioral health services.
- The overhaul will combine Iowa's 32 disparate mental health and substance use regions into seven unified behavioral health districts, while placing disability services under the jurisdiction of the Iowa Department of Health and Human Services.
- DHHS announced Iowa Primary Care Association was selected to oversee the new statewide system.
- The new behavioral health services system shall provide equitable statewide access to all services and offer specialized services with a focus on at-risk populations.
- The top three priorities:
  - Prioritize prevention and early intervention
  - Improved system coordination
  - Improved access to behavioral healthcare
- The system will encompass a full continuum of behavioral healthcare (prevention, early intervention, treatment, recovery support, and crisis services.)
- The new behavioral health system is set to launch July 1, 2025.

# I. Appendices

# I.1. OPEN MINDS Estimates For Share Of SMI Consumers Per Payer/Plan

Enrollment Category	Serious Mental Illness (SMI) Prevalence Estimate	Source
<b>Commercial</b>	4.9% of the commercially insured population over age 18	Substance Abuse and Mental Health Services Administration. (2022). Results from the 2023 National Survey on Drug Use and Health: Mental Health detailed Tables. Retrieved December 2024 from <a href="https://www.samhsa.gov/data/sites/default/files/reports/rpt39441/NSDUHDetailedTabs2021/NSDUHDetailedTabs2021/NSDUHDetTabsSect6pe2021.htm#tab6.8a">https://www.samhsa.gov/data/sites/default/files/reports/rpt39441/NSDUHDetailedTabs2021/NSDUHDetailedTabs2021/NSDUHDetTabsSect6pe2021.htm#tab6.8a</a>
<b>Medicaid</b>	8.8% of persons enrolled in traditional Medicaid	Substance Abuse and Mental Health Services Administration. (2022). Results from the 2023 National Survey on Drug Use and Health: Mental Health detailed Tables. Retrieved December 2024 from <a href="https://www.samhsa.gov/data/sites/default/files/reports/rpt39441/NSDUHDetailedTabs2021/NSDUHDetailedTabs2021/NSDUHDetTabsSect6pe2021.htm#tab6.8a">https://www.samhsa.gov/data/sites/default/files/reports/rpt39441/NSDUHDetailedTabs2021/NSDUHDetailedTabs2021/NSDUHDetTabsSect6pe2021.htm#tab6.8a</a>
<b>Medicare</b>	22.7% of persons in the Medicare population, not dually eligible for Medicaid	Figuroa, J. F., Phelan, J., Orav, E. J., Patel, V., & Jha, A. K. (2020). Association of mental health disorders with health care spending in the Medicare population. Retrieved July 2023 from <a href="https://jamanetwork.com/journals/jamanetworkopen/fullarticle/2762948#:~:text=Results%20Of%20a%20358%20975,had%20no%20known%20mental%20illness">https://jamanetwork.com/journals/jamanetworkopen/fullarticle/2762948#:~:text=Results%20Of%20a%20358%20975,had%20no%20known%20mental%20illness</a>

# I.1. OPEN MINDS Estimates For Share Of SMI Consumers Per Payer/Plan

Enrollment Category	Serious Mental Illness (SMI) Prevalence Estimate	Source
Medicare-Medicaid Dual Eligibility	21% of persons in the Medicare population dually eligible for partial Medicaid benefits	ATI Advisory. (2022). A Profile of Medicare-Medicaid Dual Beneficiaries. Retrieved March 2023 from <a href="https://atiadvisory.com/wp-content/uploads/2022/06/A-Profile-of-Medicare-Medicaid-Dual-Beneficiaries.pdf">https://atiadvisory.com/wp-content/uploads/2022/06/A-Profile-of-Medicare-Medicaid-Dual-Beneficiaries.pdf</a>
	16% of persons in the Medicare population dually eligible for full Medicaid benefits	
Other Public	4.5% of persons served by the Veterans Administration health care system or the TRICARE military health system	U.S. Census Bureau (2023). Table HHI-01. Health Insurance Coverage Status and Type of Coverage--All Persons by Sex, Race and Hispanic Origin: 2017 to 2023. Retrieved March 2023 from <a href="https://www.census.gov/data/tables/time-series/demo/health-insurance/historical-series/hic.html">https://www.census.gov/data/tables/time-series/demo/health-insurance/historical-series/hic.html</a>
No Health Care Insurance	6.7% of uninsured persons over age 18	Substance Abuse and Mental Health Services Administration. (2022). Results from the 2023 National Survey on Drug Use and Health: Mental Health detailed Tables. Retrieved December 2024 from <a href="https://www.samhsa.gov/data/sites/default/files/reports/rpt39441/NSDUHDetailedTabs2021/NSDUHDetailedTabs2021/NSDUHDetailedTabsSect6pe2021.htm#tab6.8a">https://www.samhsa.gov/data/sites/default/files/reports/rpt39441/NSDUHDetailedTabs2021/NSDUHDetailedTabs2021/NSDUHDetailedTabsSect6pe2021.htm#tab6.8a</a>

## I.2. Glossary Of Terms

Word	Abbreviation	Definition
<b>Alternative Benefit Plan</b>	ABP	State designed benefit package for the Medicaid expansion population (childless adults with income below 138% of the FPL). The benefit package must include the ten essential benefits as laid out in the PPACA. The Medicaid expansion population deemed medically frail (including those with SMI) are exempt from receiving benefits through the ABP.
<b>Accountable Care Organizations</b>	ACO	ACOs are groups of provider organizations—such as physicians and hospital systems—that form an agreement to coordinate care for a set group of individuals. If the ACO delivers high quality care—measured through performance metrics—and lowers the cost of providing care against a baseline, then the organization receives a portion of the savings generated. ACOs can exist alongside all payment structures (fee-for-service and managed care delivery systems) and payers (Medicare, Medicaid, commercial).
<b>Administrative Services Organization</b>	ASO	An arrangement in which an organization hires a third party to deliver administrative services to the organization, such as claims processing and billing. The ASO is not at-risk.
<b>Capitation</b>		A set amount of money paid per enrollee per month to a health care entity to cover the cost of health care services. Capitation can cover the cost of all health care services or subset of services, such as care coordination or home- and community-based services.
<b>Carve-out</b>		A carve-out is a Medicaid managed care financing model where some portion of Medicaid benefits—dental services, pharmacy services, behavioral health services, etc.—are separately managed and/or financed. Carve-out services can be financed on an at-risk basis by another organization or retained by the state Medicaid agency on a fee-for-service basis.
<b>Certified Community Behavioral Health Clinic</b>	CCBHC	Behavioral health clinics specially certified in a demonstration established by section 223 of the Protecting Access to Medicare Act of 2014. The clinics are designed to provide community-based mental health and addiction treatment services, to advance the integration of behavioral health with physical health care, and to provide care coordination across the full spectrum of health services.

# I.2. Glossary Of Terms

Word	Abbreviation	Definition
<b>Community Mental Health Center</b>	CMHC	An organization that can demonstrate that it is actively providing all services in section 1913(c)(1) of the Public Health Services Act, including a.) Outpatient services, including specialized outpatient services for children, the elderly, individuals who are chronically mentally ill, and residents of the CMHC’s mental health service area who have been discharged from inpatient treatment at a mental health facility; b.) 24 hour-a-day emergency care services; c.) Day treatment, or other partial hospitalization services, or psychosocial rehabilitation services; and d.) Screening for patients being considered for admission to state mental health facilities to determine the appropriateness of such admission. Additionally, the organization must meet the specifications for the state where it provides services.
<b>Dual Eligible</b>		An individual who is eligible for Medicare (Part A and B) and Medicaid. Medicare serves as the individual's primary insurance, and Medicaid acts as a supplement. Dual eligibles are sometimes referred to as Medicare-Medicaid enrollees (MMEs).
<b>Federal Poverty Level</b>	FPL	The U.S. Department of Health and Human Services sets a standard level of income that is used to determine eligibility for services and benefits, including Medicaid. In 2025, the FPL is \$15,060 for an individual and \$31,200 for a family of four.
<b>Fee-For-Service</b>	FFS	A system where the payer, in this case Medicaid, contracts directly with provider organizations and pays for providing care on a unit-by-unit basis. Health plans may also reimburse provider organizations on a FFS basis meaning they pay for each unit of care or test.
<b>Health Home</b>		A “whole person” care coordination model that specifically targets populations with chronic conditions including those with SMI. Health homes provide six essential functions: 1.) Comprehensive care management; 2.) Care coordination and health promotion; 3.) Comprehensive transitional care from inpatient to other settings, including appropriate follow-up; 4.) Individual and family support; 5.) Referral to community and social support services; 6.) Use of health information technology to link services. Health homes were originally developed as a Medicaid program, but have been adopted by other payers. For a state to have an official health home program they must have an approved state plan amendment.

## I.2. Glossary Of Terms

Word	Abbreviation	Definition
<b>Health Insurance Marketplace</b>	HIM	Created by the PPACA, the health insurance marketplace is an online platform where individuals and small businesses can purchase health insurance. The federal government subsidizes coverage purchased on the marketplace through premium tax credits for individuals with income up to 400% of the FPL.
<b>Home- &amp; Community-Based Services</b>	HCBS	Long-term services and supports provided in the home or community in order to avoid institutionalization. Traditionally provided through 1915(c) waivers, HCBS services are usually limited to specific populations and a specific number of people. HCBS services include skilled nursing care, personnel care services, assistance with activities of daily living, and custodial care.
<b>Institutions For Mental Disease</b>	IMD	A hospital, nursing facility, or other institution of more than 16 beds that is primarily engaged in providing diagnosis, treatment, or care of persons with mental diseases, including addiction. Federal financial participation is available for Medicaid IMD services for individuals under the age of 21 and age 65 and over. In recent years, CMS has relaxed the rules prohibiting payments in IMDs for individuals age 21-64. Medicaid health plans may provide up to 15 days of IMD services per month in lieu of state plan services if medically appropriate, cost effective, and consented to by the individual. Additionally, states may be granted a 1115 waiver authority to allow individuals to receive addiction and mental health treatment in IMDs.
<b>Long-Term Services &amp; Supports</b>	LTSS	Services provided in the home, community, or institutional setting to those who experience difficulty living independently and completing activities of daily living as a result of cognitive disabilities, physical impairments, disabling chronic conditions, and/or age.
<b>Managed Care</b>		A health care delivery and financing system designed to manage cost, utilization, and quality. In Medicaid, states generally implement managed care through contracts with health plans, which provide a limited set of benefits to enrollees through a capitated or per person per month (PMPM) rate. The health plans generally assumes full-risk for the cost of treatment, and therefore contracts with a network of provider organizations to provide care at the most efficient rate possible while still maintaining member health.

## I.2. Glossary Of Terms

Word	Abbreviation	Definition
<b>Medicaid</b>		Medicaid is a joint federal-state program that provides health coverage to economically disadvantaged populations, such as low-income adults, children, and aged, blind, and disabled (ABD) individuals. States establish their own eligibility standards, benefit packages, provider payment policies, and administrative structures under broad federal guidelines. Financing is a shared responsibility of the federal government and the states.
<b>Medicaid Waiver</b>		Granted by CMS, waivers allow states to make temporary changes to their Medicaid program in order to test out new ways to deliver health coverage.
<b>Medicaid Waiver Section 1115</b>	1115 waiver	Known as research and demonstration waivers, states can apply for program flexibility to test new or existing approaches to financing and delivering Medicaid and CHIP.
<b>Medicaid Waiver Section 1915(b)</b>	1915(b) waiver	States can apply for waivers to provide services through managed care delivery systems, or otherwise limit an individual's choice of health plan or provider organization.
<b>Medicaid Waiver Section 1915(c)</b>	1915(c) waiver	States can apply for waivers to provide long-term care services in home- and community-based settings, rather than institutional settings.
<b>Medical Home</b>		A medical home is not a physical place, but a model for care coordination. Medical homes provide primary care services, care coordination, enhanced access to care, and care that is culturally and linguistically appropriate. Medical homes exist across multiple payers.
<b>Medicare</b>		Federal health insurance for individuals over the age of 65, individuals with certain disabilities, and individuals with end stage renal disease. Medicare covers most acute care services (which may include psychiatric care) but does not cover LTSS or non-physician behavioral health services.
<b>Medicare Advantage</b>	MA	Medicare Part C - also known as Medicare Advantage - is a program which allows individuals who are eligible for Medicare Parts A and B to elect a private health plan to provide their Medicare coverage. The federal government pays the plan's premiums up to a set level, and individuals are responsible for the difference.

## I.2. Glossary Of Terms

Word	Abbreviation	Definition
Medicare Advantage Special Needs Plan	SNP	A special type of Medicare Advantage plan that is designed to provide targeted coordinated care to individuals who are a) institutionalized; b) dual eligible; and/or c) meet the severe chronic disabled conditions set forth by CMS. Plans emphasize improved care primarily through continuity of care and care coordination.
Medicare Part A		Hospital Insurance: Covers hospital, skilled nursing care, hospice, and home health care for most eligible individuals at no cost. Financed through payroll tax and deductibles, copayments are only charged if a stay becomes long-term.
Medicare Part B		Supplementary Medical Insurance: Covers most outpatient services, and consumers pay a premium based on income level.
Medicare Part C		Medicare Part C - also known as Medicare Advantage - is a program which allows individuals who are eligible for Medicare Parts A and B to elect a private health plan to provide their Medicare coverage. The federal government pays the plan's premiums up to a set level, and individuals are responsible for the difference.
Medicare Part D		Outpatient Prescription Drug Benefit: Private plans contract with Medicare to provide coverage for prescription drugs. Most consumers pay premiums based on their income.
Metropolitan Statistical Area	MSA	An urbanized area with a population of at least 50,000 plus adjacent territory that has a high degree of social and economic integration as measured by commuting ties.
Patient-Centered Medical Home	PCMH	See Medical Home.
Patient Protection & Affordable Care Act	PPACA or ACA	U.S. health care reform signed into law in 2010. The legislation regulates certain aspects of private and public health insurance programs and authorizes an individual mandate to secure essential health coverage, premium tax credits for the purchase of private health insurance, and increased insurance coverage of preexisting conditions. In 2012 the Supreme Court ruled that state participation is optional for provisions of the law expanding Medicaid coverage to adults ages 18 to 64 with incomes under 138% of the FPL. In 2017, Congress repealed the tax penalties associated with the individual mandate essentially ending the mandate.

# I.2. Glossary Of Terms

Word	Abbreviation	Definition
<b>Primary Care Case Management</b>	PCCM	A health care delivery system model with limited utilization and cost control. Under the PCCM model, Medicaid enrollees choose a primary care physician who acts as a gatekeeper for more intensive services. The primary care physician generally receives a per person per month (PMPM) fee for care coordination and is reimbursed fee-for-service for all medical services provided.
<b>Program Of All Inclusive Care For The Elderly</b>	PACE	PACE serves populations over the age of 55 who are eligible for skilled nursing home care by utilizing a comprehensive delivery system of social, medical, and long-term care services to keep enrollees in the community for as long as possible. PACE is an optional state Medicaid program, and may only be available in certain states, or regions within states.
<b>Serious Mental Illness</b>	SMI	A mental, behavioral, or emotional disorder that lasts for a sufficient duration of time and causes impairment of major life activities. Serious mental illnesses include major depression, schizophrenia, bipolar disorder, obsessive compulsive disorder (OCD), panic disorder, post traumatic stress disorder (PTSD), and borderline personality disorder.
<b>Supported Employment</b>		Provides services and supports to help individuals with disabilities become employed in an integrated or competitive work environment and retain that employment.
<b>Supported Housing</b>		Housing provided for as long as needed at little or no cost to individuals with mental illness, or other vulnerable populations who are homeless or at-risk for homelessness. Mental health and social services are offered to participants but are not a condition for participation in the program. The goal is to allow individuals to live as self-sufficient, independent lives as possible.
<b>Value-Based Reimbursement</b>	VBR	Reimbursement model in which payers financially reward or penalize health care provider organizations for performance on quality and cost of care. VBR payment mechanisms include P4P; capitation; shared savings models; shared risk models; and payments based on clinically-defined episodes, called episodes of care or bundled payments.

# I.3. Sources

## A. Executive Summary

1. Information compiled from sources provided throughout the profile.

## B.1. Population Demographics

1. United States Census Bureau. (2023). 2023 American Community Survey 1-Year Estimates S0101 Population By Age and Sex. Retrieved March 2025 from <https://data.census.gov/cedsci/table?q=S0101>
2. United States Census Bureau. (2023). 2023 Current Population Survey Annual Social and Economic Supplement POV-46 Poverty Status By State. Retrieved March 2025 from <https://data.census.gov/cedsci/table?q=S1701>
3. United States Census Bureau. (2023). 2023 American Community Survey 1-Year Estimates S1901 Median Income In the Past 12 Months. Retrieved March 2025 from <https://data.census.gov/cedsci/table?q=S1901>
4. United States Census Bureau. (2023). 2023 Population Distribution by Race/Ethnicity. Retrieved March 2025 from <https://data.census.gov/cedsci/table?q=DP05&tid=ACSDP5Y2020.DP05>

## B.2. Population Centers

1. U.S. Census Bureau. (2021). 2021 TIGER/Line® Shapefiles: Core Based Statistical Areas. Retrieved March 2025 from <https://www.census.gov/cgi-bin/geo/shapefiles/index.php?year=2021&layergroup=Core+Based+Statistical+Areas>
2. U.S. Census Bureau. (2020). 2019 TIGER/Line® Shapefiles: States (and equivalent). Retrieved March 2025 from <https://www.census.gov/cgi-bin/geo/shapefiles/index.php?year=2019&layergroup=States+%28and+equivalent%29>
3. Federal Reserve Bank of St Louis. (2024, March) US Regional Data, MSAs. Retrieved January 2023 from <https://fred.stlouisfed.org>
4. United States Census Bureau. (2020). 2019 Annual Estimates of Residential Population-Metropolitan and Micropolitan Statistical Area GCT-PEPANNRES. Retrieved March 2025 from <https://www.census.gov/data/tables/time-series/demo/popest/2010s-total-metro-and-micro-statistical-areas.html>

## B.3. Population Distribution By Payer: National vs. State

1. OPEN MINDS. (2025). Serious Mental Illness Prevalence Estimates.

## B.3. SMI Population Distribution By Payer: National vs. State

1. OPEN MINDS. (2025). Serious Mental Illness Prevalence Estimates.

# I.3. Sources

## B.4. Largest State Health Plans By Enrollment

1. OPEN MINDS. (2025, January). Health Plans Database.
2. TRICARE. (2023, December). Beneficiaries by Location. Retrieved March 2025 from <https://health.mil/Military-Health-Topics/Access-Cost-Quality-and-Safety/Health-Care-Program-Evaluation/Annual-Evaluation-of-the-TRICARE-Program>
3. Health Plans USA. (2025). Subscription Database. [www.markfarrah.com](http://www.markfarrah.com)

## B.4. Largest State Health Plans By Estimated SMI Enrollment

1. OPEN MINDS. (2025, January). Health Plans Database.
2. TRICARE. (2023, December). Beneficiaries by Location. Retrieved March 2025 from <https://health.mil/Military-Health-Topics/Access-Cost-Quality-and-Safety/Health-Care-Program-Evaluation/Annual-Evaluation-of-the-TRICARE-Program>
3. Health Plans USA. (2025). Subscription Database. [www.markfarrah.com](http://www.markfarrah.com)

## B.5. Health Insurance Marketplace

1. United States Department of Health and Human Services. (2024, October 21). PY2025 Individual Medical Landscape. Retrieved March 2025 from <https://data.healthcare.gov/dataset/735facd9-1df8-400e-b650-da881c728a2b>
2. United States Department of Health and Human Services. (2024, October 21). QHP Landscape PY2025 SHOP Market Medical. Retrieved March 2025 from <https://data.healthcare.gov/dataset/2ffb5a20-8b08-48cb-b0ba-115de4381ca1>
3. Health Insurance. (2024, December). Iowa Health Insurance Marketplace: History and News of the State's Exchange. Retrieved March 2025 from <https://www.healthinsurance.org/iowa-state-health-insurance-exchange/>

## B.6. ACOs

1. OPEN MINDS. (2023). ACO Database.
2. Centers for Medicare & Medicaid Services. (2025, January) Accountable Care Organization Participants. Retrieved January 2025 from <https://data.cms.gov/medicare-shared-savings-program/accountable-care-organization-participants>

## C.1. Medicaid Governance: Organizational Chart

1. Iowa Department of Health & Human Services. (2025, March). Iowa Department of Health and Human Services Table of Organization. Retrieved March 2025 from <https://hhs.iowa.gov/media/140/download?inline=>
2. Iowa Department of Health & Human Services. (2024, March). Division of Medicaid Organizational Chart. Retrieved March 2025 from <https://hhs.iowa.gov/media/3384/download?inline=>

# I.3. Sources

## C.1. Medicaid Governance: Key Leadership

1. Iowa Department of Health & Human Services. (2024, March). Division of Medicaid Organizational Chart. Retrieved March 2025 from <https://hhs.iowa.gov/media/3384/download?inline=>

## C.2. Medicaid Program Spending By Eligibility Group

1. Centers for Medicare and Medicaid Services. (2024, December). MACStats: Medicaid and CHIP Data Book. Retrieved March 2025 from <https://www.macpac.gov/macstats/>

## C.2. Medicaid Program Spending: Budget

1. United States Government Printing Office. (2024, November 28). Federal Medical Assistance Percentages FY 2025. Retrieved March 2025 from <https://www.federalregister.gov/documents/2018/11/28/2018-25944/federal-financial-participation-in-state-assistance-expenditures-federal-matching-shares-for>
2. Centers for Medicare and Medicaid Services. (2024, December). MACStats: Medicaid and CHIP Data Book. Retrieved March 2025 from <https://www.macpac.gov/macstats/>
3. Centers for Medicare and Medicaid Services. (2013, March 29). Increased Federal Medical Assistance Percentage Through the Affordable Care Act of 2010. Retrieved March 2025 from <https://www.cms.gov/Newsroom/MediaReleaseDatabase/Fact-sheets/2013-Fact-sheets-items/2013-03-29.html>

## C.2. Medicaid Program Spending: Change Over Time

1. Centers for Medicare and Medicaid Services. (2024, December). MACStats: Medicaid and CHIP Data Book. Retrieved March 2025 from <https://www.macpac.gov/macstats>
2. Centers for Medicare and Medicaid Services. (2023, December). MACStats: Medicaid and CHIP Data Book. Retrieved March 2025 from <https://www.macpac.gov/macstats/>
3. Centers for Medicare and Medicaid Services. (2022, December). MACStats: Medicaid and CHIP Data Book. Retrieved March 2025 from <https://www.macpac.gov/macstats/>
4. Medicaid and CHIP Payment and Access Commission. (2021, December). MACStats: Medicaid and CHIP Data Book. Retrieved March 2025 from <https://www.macpac.gov/wp-content/uploads/2018/12/December-2018-MACStats-Data-Book.pdf>
5. Medicaid and CHIP Payment and Access Commission. (2010, December). MACStats: Medicaid and CHIP Data Book. Retrieved March 2025 from <https://www.macpac.gov/publication/macstats-archive/>
6. Medicaid and CHIP Payment and Access Commission. (2019, December). MACStats: Medicaid and CHIP Data Book. Retrieved March 2025 from <https://www.macpac.gov/publication/macstats-archive/>
7. Medicaid and CHIP Payment and Access Commission. (2017, March). MACStats: Medicaid and CHIP Program Statistics. Retrieved March 2025 from <https://www.macpac.gov/publication/macstats-archive/>

# I.3. Sources

## C.3. Medicaid Expansion Status

1. Centers for Medicare and Medicaid Services. (2024, December). MACStats: Medicaid and CHIP Data Book. Retrieved March 2025 from <https://www.macpac.gov/macstats/>
2. Centers for Medicare and Medicaid Services. (2025, January). Medicaid Enrollment Data Collected Through MBES. Retrieved March 2025 from <https://www.medicaid.gov/medicaid/program-information/medicaid-and-chip-enrollment-data/enrollment-mbes/index.html>
3. Centers for Medicare and Medicaid Services. (2020, October). Medicaid, Children's Health Insurance Program & Basic Health Program Eligibility Levels. Retrieved March 2025 from <https://www.medicaid.gov/medicaid/program-information/medicaid-and-chip-eligibility-levels/index.html>
4. US Government Publishing Office. (2011, October 1). Code of Federal Regulations Title 42. Retrieved March 2025 from <https://www.gpo.gov/fdsys/granule/CFR-2011-title42-vol4/CFR-2011-title42-vol4-sec440-315>

## C.4. Medicaid Program Benefits

1. Medicaid and CHIP Payment and Access Commission. Mandatory and Optional Benefits. Retrieved March 2025 from <https://www.macpac.gov/subtopic/mandatory-and-optional-benefits/>
2. Centers for Medicare & Medicaid Services. (2019). State Plan Amendment (SPA) #: 19-0014. Retrieved March 2025 from <https://www.medicaid.gov/sites/default/files/State-resource-center/Medicaid-State-Plan-Amendments/Downloads/IA/IA-19-0014.pdf>

## D.1. Medicaid Financing & Service Delivery System

1. Iowa Department of Health & Human Services. (2025). Medicaid Dashboard. Retrieved March 2025 from <https://app.powerbigov.us/view?r=eyJrIjoiMmlyMTQxNzItZmIwNS00ZDI2LThhMDAtZGI1MzZhNmNiMmM3IiwidCI6IjkhMmM3YjRkLTA4NWEtNDYxNy04NTM2LTM4YTc2ZDE5YjBkYSJ9>

## D.1. Medicaid Service Delivery System Enrollment By Eligibility Group

1. Iowa Department of Health & Human Services. (2023). IA Health Link Member Handbook. Retrieved March 2025 from <https://hhs.iowa.gov/media/6606/download>
2. Iowa Department of Health & Human Services. (2021). Who Receives Medicaid. Retrieved March 2025 from <https://hhs.iowa.gov/programs/welcome-iowa-medicaid>
3. Iowa Department of Health & Human Services. (2022). Your Guide to Medicaid Fee-for-Service. Retrieved March 2025 from <https://hhs.iowa.gov/media/6414/download>
4. Iowa Department of Health & Human Services. (2021). Medicaid Fee-for-Service Programs. Retrieved March 2025 from <https://hhs.iowa.gov/programs/welcome-iowa-medicaid/fee-service>
5. Iowa Department of Health & Human Services. (2020). What is the IA Health Link Program? Retrieved March 2025 from <https://hhs.iowa.gov/programs/welcome-iowa-medicaid/iowa-health-link>

# I.3. Sources

## D.2. Medicaid FFS Program: Overview

1. Iowa Department of Health & Human Services. (2025). Medicaid Dashboard. Retrieved March 2025 from <https://app.powerbigov.us/view?r=eyJrIjoiMmlyMTQxNzItZmlwNS00ZDI2LThhMDAtZGI1MzZhNmNiMmM3IiwidCI6IjhhMmM3YjRkLTA4NWEtNDYxNy04NTM2LTM4YTc2ZDE5YjBkYSJ9>

## D.2. Medicaid FFS Program: Behavioral Health Benefits

1. Iowa Department of Health & Human Services. Limitations on Amount Duration and Scope. Retrieved March 2025 from <https://www.legis.iowa.gov/docs/ga/79ga/interim/2002/comminfo/progelim/handouts/PhysSvcs.pdf>
2. Iowa Department of Inspections and Appeals. (2020). Psychiatric Medical Institutions for Children. Retrieved March 2025 from <https://hhs.iowa.gov/media/4341/download>

## D.2. Medicaid FFS Program: SMI Population

1. Iowa Department of Health & Human Services. (2025). Medicaid Dashboard. Retrieved March 2025 from <https://app.powerbigov.us/view?r=eyJrIjoiMmlyMTQxNzItZmlwNS00ZDI2LThhMDAtZGI1MzZhNmNiMmM3IiwidCI6IjhhMmM3YjRkLTA4NWEtNDYxNy04NTM2LTM4YTc2ZDE5YjBkYSJ9>

## D.2. Medicaid FFS Program: Pharmacy Benefits

1. Iowa Department of Health & Human Services. (2021). Iowa Medicaid Care Management Programs. Retrieved March 2025 from <https://hhs.iowa.gov/programs/welcome-iowa-medicaid/iowa-medicaid-programs/tcm>
2. Iowa Department of Health & Human Services. (2024). Medicaid Pharmacy. Retrieved March 2025 from <https://hhs.iowa.gov/programs/welcome-iowa-medicaid/provider-services/medicaid-pharmacy>
3. Iowa Department of Health & Human Services. (2024). Medications for Addiction Treatment. Retrieved March 2025 from <https://hhs.iowa.gov/programs/mental-health/substance-use-disorder/medications-addiction-treatment>
4. Iowa Department of Health & Human Services. (2023). Iowa Medicaid Program Preferred Drug List. Retrieved March 2025 from <https://hhs.iowa.gov/programs/welcome-iowa-medicaid/provider-services/medicaid-pharmacy>

## D.3. Medicaid Managed Care Program: Overview

1. Iowa Department of Health & Human Services. (2021). Iowa Medicaid Managed Care Quality Assurance System. Retrieved March 2025 from [http://publications.iowa.gov/38789/1/2021\\_Iowa\\_Managed\\_Care\\_Quality\\_Plan.pdf](http://publications.iowa.gov/38789/1/2021_Iowa_Managed_Care_Quality_Plan.pdf)
2. Iowa Department of Health & Human Services. (2023). IA Health Link Member Handbook. Retrieved March 2025 from <https://hhs.iowa.gov/media/6606/download>
3. Iowa Department of Health & Human Services. Improve Iowan's Health Status. Retrieved March 2025 from <https://hhs.iowa.gov/media/7294/download?inline=>

# I.3. Sources

## D.3. Medicaid Managed Care Program: Iowa Wellness Program

1. Centers for Medicare & Medicaid Services. (2016, December 22). Iowa Wellness Plan Section 1115 Demonstration Fact Sheet. Retrieved March 2025 from <https://www.medicaid.gov/Medicaid-CHIP-Program-Information/By-Topics/Waivers/1115/downloads/ia/ia-wellness-plan-fs.pdf>
2. Center for Medicare & Medicaid Services. (2019, November 15). Iowa Wellness Plan Section 1115 Demonstration. Retrieved March 2025 from <https://www.medicaid.gov/medicaid/section-1115-demo/demonstration-and-waiver-list/81706>
3. Iowa Department of Health & Human Services. (2023). IA Health Link Member Handbook. Retrieved March 2025 from <https://hhs.iowa.gov/media/6606/download>

## D.3. Medicaid Managed Care Program: Health Plan Characteristics

1. Iowa Department of Health & Human Services. (2018). Seventh Amendment to the Iowa Health Link Contract MED-16-020. Retrieved March 2025 from <https://hhs.iowa.gov/media/3334/download?inline=>
2. Amerigroup Iowa. (2023). Provider Manual. Retrieved March 2025 from [https://providers.amerigroup.com/ProviderDocuments/IAIA\\_ProviderManual.pdf](https://providers.amerigroup.com/ProviderDocuments/IAIA_ProviderManual.pdf)
3. Iowa Total Care. (2023). Provider Manual. Retrieved March 2025 from <https://www.iowatotalcare.com/providers/resources/forms-resources.html>
4. Molina Healthcare. (2024) Provider Manual. Retrieved March 2025 from <https://hhs.iowa.gov/media/7605/download?inline=>

## D.3. Medicaid Managed Care Program: Behavioral Health Overview

1. Iowa Department of Health & Human Services. (2018). Seventh Amendment to the Iowa Health Link Contract MED-16-020. Retrieved March 2025 from <https://hhs.iowa.gov/media/3334/download?inline=>
2. Amerigroup Iowa. (2023). Provider Manual. Retrieved March 2025 from [https://providers.amerigroup.com/ProviderDocuments/IAIA\\_ProviderManual.pdf](https://providers.amerigroup.com/ProviderDocuments/IAIA_ProviderManual.pdf)
3. Iowa Total Care. (2023). Provider Manual. Retrieved March 2025 from <https://www.iowatotalcare.com/providers/resources/forms-resources.html>
4. Molina Healthcare. (2024) Provider Manual. Retrieved March 2025 from <https://hhs.iowa.gov/media/7605/download?inline=>

## D.3. Medicaid Managed Care Program: Behavioral Health Benefits

1. Iowa Department of Health & Human Services. (2023, February). Comparison of the State of Iowa Medicaid Enterprise Basic Benefits Based on Eligibility Determination. Retrieved March 2025 from <https://hhs.iowa.gov/media/7528/download?inline=>
2. Iowa Department of Health & Human Services. (2019). IA Health Link Managed Care Quick Reference Guide. Retrieved March 2025 from <https://hhs.iowa.gov/media/6705/download?040620211416=>
3. Amerigroup Insurance. (2024). IA Health Link and hawk-i Provider Manual. Retrieved March 2025 from [https://providers.amerigroup.com/ProviderDocuments/IAIA\\_ProviderManual.pdf](https://providers.amerigroup.com/ProviderDocuments/IAIA_ProviderManual.pdf)
4. Iowa Department of Health & Human Services. (2024). Medicaid Provider Billing Manual. Retrieved March 2025 from <https://hhs.iowa.gov/about/policy-manuals/medicaid-provider&sa=U&ved=2ahUKEwijsJe-9leFAxV7NmIAHfGoAm8QFnoECAUQAQ&usq=AOvVaw27UZBjdZ3MNYSnqt-y6Xo-\>

# I.3. Sources

## D.3. Medicaid Managed Care Program: SMI Population

1. Iowa Department of Health & Human Services. (2025). Medicaid Dashboard. Retrieved March 2025 from <https://app.powerbigov.us/view?r=eyJrIjoiMmlyMTQxNzltZmlwNS00ZDI2LThhMDAtZGI1MzZhNmNiMmM3IiwidCI6IjhhMmM3YjRkLTA4NWEtNDYxNy04NTM2LTM4YTc2ZDE5YjBkYSJ9>

## D.3. Medicaid Managed Care Program: Pharmacy Benefits

1. Iowa Department of Health & Human Services. (2018). Seventh Amendment to the Iowa Health Link Contract MED-16-020. Retrieved March 2025 from <https://hhs.iowa.gov/media/3334/download?inline=>
2. Amerigroup Iowa. (2023). Provider Manual. Retrieved March 2025 from [https://providers.amerigroup.com/ProviderDocuments/IAIA\\_ProviderManual.pdf](https://providers.amerigroup.com/ProviderDocuments/IAIA_ProviderManual.pdf)
3. Iowa Total Care. (2023). Provider Manual. Retrieved March 2025 from <https://www.iowatotalcare.com/providers/resources/forms-resources.html>
4. Molina Healthcare. (2024) Provider Manual. Retrieved March 2025 from <https://hhs.iowa.gov/media/7605/download?inline=>

## D.4. Medicaid Program: Care Coordination Initiatives

1. Iowa Department of Health & Human Services. (2023). Accountable Care Organizations and the Value Index Score. Retrieved March 2025 from <https://hhs.iowa.gov/media/5856/download>
2. Iowa Department of Health & Human Services. Chronic Condition Health Home Executive Summary. Retrieved March 2025 from <https://hhs.iowa.gov/programs/welcome-iowa-medicare/provider-services/chronic-condition-health-home>
3. Centers for Medicare & Medicaid Services. (2022). State-by-State Home State Plan Amendment Matrix. Retrieved March 2025 from <https://www.medicare.gov/state-resource-center/medicaid-state-technical-assistance/health-home-information-resource-center/downloads/state-hh-spa-at-a-glance-matrix.pdf>

## D.4. Medicaid Program Care Coordination Initiatives: SMI Health Homes

1. Iowa Department of Health & Human Services. (2023). Integrated Health Home (IHH) Provider List. Retrieved March 2025 from <https://hhs.iowa.gov/media/10118/download?inline=>
2. Iowa Department of Health & Human Services. (2014). State Plan Amendment. Retrieved March 2025 from <https://www.medicare.gov/sites/default/files/State-resource-center/Medicaid-State-Plan-Amendments/Downloads/IA/IA-14-009.pdf>
3. Iowa Department of Health & Human Services. (2022, January 1). Integrated Health Home PMPM Billing Guide. Retrieved March 2025 from <https://hhs.iowa.gov/media/9518/download?inline=>
4. Centers for Medicare and Medicaid Services. (2020, December). Medicaid Health Homes: An Overview. Retrieved March 2025 from <https://www.medicare.gov/state-resource-center/medicaid-state-technical-assistance/health-home-information-resource-center/downloads/hh-overview-fact-sheet.pdf>

# I.3. Sources

## D.4. Medicaid Program Care Coordination Initiatives: Chronic Conditions Health Homes

1. Iowa Department of Health & Human Services. (2023). Chronic Condition Health Home. Retrieved March 2025 from <https://hhs.iowa.gov/programs/welcome-iowa-medicaid/provider-services/chronic-condition-health-home>
2. Iowa Department of Health & Human Services. (2014). State Plan Amendment. Retrieved March 2025 from <https://www.medicaid.gov/sites/default/files/State-resource-center/Medicaid-State-Plan-Amendments/Downloads/IA/IA-14-009.pdf>
3. Iowa Department of Health Services. Chronic Condition Health Home PMPM Fee Schedule. Retrieved March 2025 from <https://hhs.iowa.gov/media/9516/download?inline>
4. Centers for Medicare and Medicaid Services. (2020, December). Medicaid Health Homes: An Overview. Retrieved March 2025 from <https://www.medicaid.gov/state-resource-center/medicaid-state-technical-assistance/health-home-information-resource-center/downloads/hh-overview-fact-sheet.pdf>

## D.5. Medicaid Program Care Management and Demonstration Waivers

1. Centers for Medicare and Medicaid Services. Demonstrations and Waivers. Retrieved March 2025 from [https://www.medicaid.gov/medicaid-chip-program-information/by-topics/waivers/waivers\\_faceted.html](https://www.medicaid.gov/medicaid-chip-program-information/by-topics/waivers/waivers_faceted.html)

## D.5. Medicaid Program Section 1915 (c) HCBS Waivers

1. Centers for Medicare and Medicaid Services. Demonstrations and Waivers. Retrieved March 2025 from [https://www.medicaid.gov/medicaid-chip-program-information/by-topics/waivers/waivers\\_faceted.html](https://www.medicaid.gov/medicaid-chip-program-information/by-topics/waivers/waivers_faceted.html)

## D.6. Medicaid Program: New Initiatives- Postpartum Coverage

1. Iowa Department of Health & Human Services. (2025). Postpartum Medicaid Coverage. Retrieved March 2025 from <https://hhs.iowa.gov/postpartum-coverage>
2. Des Moines Register. (2024, May 8). Reynolds Signs Law Extending Medicaid Coverage For New Moms, While Cutting Off Hundreds. Retrieved March 2025 from <https://www.desmoinesregister.com/story/news/politics/2024/05/08/iowa-gov-kim-reynolds-signs-postpartum-medicaid-extension-for-moms-that-lowers-income-threshold/73615238007/>

## E.1 Medicare Financing & Service Delivery System

1. OPEN MINDS. (2025, January). Health Plans Database.
2. OPEN MINDS. (2025). SMI Estimates.
3. Centers for Medicare & Medicaid Services. (2024, August) Medicare Monthly Enrollment. Retrieved December 2023 from <https://data.cms.gov/summary-statistics-on-beneficiary-enrollment/medicare-and-medicaid-reports/medicare-monthly-enrollment>

# I.3. Sources

## E.2. Medicare System Overview

1. OPEN MINDS. (2025, January). Health Plans Database.
2. OPEN MINDS. (2025). SMI Estimates.
3. Centers for Medicare & Medicaid Services. (2024, August) Medicare Monthly Enrollment. Retrieved December 2023 from <https://data.cms.gov/summary-statistics-on-beneficiary-enrollment/medicare-and-medicaid-reports/medicare-monthly-enrollment>

## E.2. Medicare System Overview

1. Healthinsurance.org (2024, December) Medicare in Iowa. Retrieved December 2023 from <https://www.healthinsurance.org/medicare/iowa>

## E.3. Medicare ACOs

1. OPEN MINDS. (2023). ACO Database.
2. Centers for Medicare & Medicaid Services. (2025, January) Accountable Care Organization Participants. Retrieved January 2025 from <https://data.cms.gov/medicare-shared-savings-program/accountable-care-organization-participants>

## E.4. Medicare System: New Initiatives

1. Centers for Medicare & Medicaid Services. (2023, June 8). CMS Announces Multi-State Initiative to Strengthen Primary Care. Retrieved from <https://www.cms.gov/newsroom/press-releases/cms-announces-multi-state-initiative-strengthen-primary-care>

## F.1. Dual Eligible Medicaid Financing & Service Delivery System

1. Centers for Medicare and Medicaid Services. (2024, December). Plan Directory for MA, Cost, PACE, and Demo Organizations. Retrieved March 2025 from <https://www.cms.gov/Research-Statistics-Data-and-Systems/Statistics-Trends-and-Reports/MCRAdvPartDEnrolData/MA-Plan-Directory.html>
2. Centers for Medicare and Medicaid Services. (2024, December). Special Needs Plan (SNP) Data. Retrieved March 2025 from <https://www.cms.gov/Research-Statistics-Data-and-Systems/Statistics-Trends-and-Reports/MCRAdvPartDEnrolData/Special-Needs-Plan-SNP-Data.html>

## F.2. Largest Dual Eligible Health Plans By Estimated SMI Enrollment

1. Centers for Medicare and Medicaid Services. (2024, December). Plan Directory for MA, Cost, PACE, and Demo Organizations. Retrieved March 2025 from <https://www.cms.gov/Research-Statistics-Data-and-Systems/Statistics-Trends-and-Reports/MCRAdvPartDEnrolData/MA-Plan-Directory.html>
2. Centers for Medicare and Medicaid Services. (2024, December). Special Needs Plan (SNP) Data. Retrieved March 2025 from <https://www.cms.gov/Research-Statistics-Data-and-Systems/Statistics-Trends-and-Reports/MCRAdvPartDEnrolData/Special-Needs-Plan-SNP-Data.html>

# I.3. Sources

## F.3. Dual Eligible Medicaid Financing & Delivery System: Overview

1. Centers for Medicare and Medicaid Services. (2024, March). Medicare-Medicaid Enrollee State and County Enrollment Snapshots. Retrieved March 2025 from <https://www.cms.gov/Medicare-Medicaid-Coordination/Medicare-and-Medicaid-Coordination/Medicare-Medicaid-Coordination-Office/Analytics.html>

## F.4. Dual Eligible Medicaid Financing & Delivery System: New Initiatives

1. Derived from information throughout the profile.

## G.1. LTSS Financing & Service Delivery

1. Iowa Medicaid Enterprise. (2022, December). IA Health Link Managed Care Organization Report: SFY 2023, Quarter 1 Performance Data. Retrieved March 2025 from <https://hhs.iowa.gov/media/2816/download?inline=>
2. Iowa Medicaid Enterprise. (2020, December). IA Health Link Managed Care Organization Report: SFY 2021, Quarter 1 Performance Data. Retrieved March 2025 from <https://www.legis.iowa.gov/docs/publications/DF/1208176.pdf>
3. Iowa Department of Health & Human Services. (2021). Iowa Medicaid Managed Care Quality Assurance System. Retrieved March 2025 from [http://publications.iowa.gov/38789/1/2021\\_Iowa\\_Managed\\_Care\\_Quality\\_Plan.pdf](http://publications.iowa.gov/38789/1/2021_Iowa_Managed_Care_Quality_Plan.pdf)
4. Iowa Department of Health & Human Services. (2019, June). IA Health Link Member Handbook. Retrieved March 2025 from <https://hhs.iowa.gov/media/6606/download>
5. Iowa Department of Health & Human Services. Improve Iowan's Health Status. Retrieved March 2025 from <https://hhs.iowa.gov/media/7294/download?inline=>

## G.1. LTSS Service Delivery System Enrollment By Eligibility Group

1. Iowa Department of Health & Human Services. (2023). IA Health Link Member Handbook. Retrieved March 2025 from <https://hhs.iowa.gov/media/6606/download>
2. Iowa Department of Health & Human Services. (2021). Who Receives Medicaid. Retrieved March 2025 from <https://hhs.iowa.gov/programs/welcome-iowa-medicaid>
3. Iowa Department of Health & Human Services. (2022). Your Guide to Medicaid Fee-for-Service. Retrieved March 2025 from <https://hhs.iowa.gov/media/6414/download>
4. Iowa Department of Health & Human Services. (2021). Medicaid Fee-for-Service Programs. Retrieved March 2025 from <https://hhs.iowa.gov/programs/welcome-iowa-medicaid/fee-service>
5. Iowa Department of Health & Human Services. (2020). What is the IA Health Link Program? Retrieved March 2025 from <https://hhs.iowa.gov/programs/welcome-iowa-medicaid/iowa-health-link>

# I.3. Sources

## G.2. LTSS Financing & Service Delivery System: Overview

1. Iowa Department of Health & Human Services. (2021). Long Term Support Services. Retrieved March 2025 from <https://hhs.iowa.gov/programs/welcome-iowa-medicaid/iowa-medicaid-programs/ltss>

## G.3. LTSS Health Plan Characteristics

1. Iowa Department of Health & Human Services. (2018). Seventh Amendment to the Iowa Health Link Contract MED-16-020. Retrieved March 2025 from <https://hhs.iowa.gov/media/3334/download?inline=>
2. Amerigroup Iowa. (2023). Provider Manual. Retrieved March 2025 [https://provider.amerigroup.com/docs/gpp/IA\\_CAID\\_PF\\_ProviderManual.pdf](https://provider.amerigroup.com/docs/gpp/IA_CAID_PF_ProviderManual.pdf)
3. Iowa Total Care. (2024). Provider Manual. Retrieved March 2025 from <https://www.iowatotalcare.com/providers/resources/forms-resources.html>
4. Molina Healthcare. (2024) Provider Manual. Retrieved March 2025 from <https://hhs.iowa.gov/media/7605/download?inline=>

## G.3. LTSS Program: Health Benefits

1. Iowa Department of Health & Human Services. (2018). Seventh Amendment to the Iowa Health Link Contract MED-16-020. Retrieved March 2025 from <https://hhs.iowa.gov/media/3334/download?inline=>
2. Amerigroup Iowa. (2023). Provider Manual. Retrieved March 2025 [https://provider.amerigroup.com/docs/gpp/IA\\_CAID\\_PF\\_ProviderManual.pdf](https://provider.amerigroup.com/docs/gpp/IA_CAID_PF_ProviderManual.pdf)
3. Iowa Total Care. (2024). Provider Manual. Retrieved March 2025 from <https://www.iowatotalcare.com/providers/resources/forms-resources.html>
4. Molina Healthcare. (2024) Provider Manual. Retrieved March 2025 from <https://hhs.iowa.gov/media/7605/download?inline=>

## G.4. LTSS Program: New Initiatives

1. Derived from information within this profile.

## H.1. Public Behavioral Health System Governance: Behavioral Health & Disability Organization Chart

1. Iowa Department of Health & Human Services. (2025, March). Iowa Department of Health & Human Services Table of Organization. Retrieved March 2025 from <https://hhs.iowa.gov/media/140/download?inline=>

# I.3. Sources

## H.2. Department of Health & Human Services Budget

1. Iowa Department of Management. (2025). Individual Department Budget Reports. Retrieved March 2025 from <https://dom.iowa.gov/state-government/state-budget#state-budget-recommendations>

## H.2. Department of Health & Human Services: Spending Over Time

1. Iowa Department of Management. (2025). Individual Department Budget Reports. Retrieved March 2025 from <https://dom.iowa.gov/state-government/state-budget#state-budget-recommendations>
2. Iowa Department of Management. (2023, January). Department of Health & Human Services Budgets 2024. Retrieved March 2025 from <https://dom.iowa.gov/sites/default/files/2023-01/DHHS-Budget-FY2024.pdf>
3. Iowa Department of Health & Human Services Budgets (2022, January) Retrieved March 2025 from <https://dom.iowa.gov/sites/default/files/documents/2022/01/FY2023%20Department%20of%20Human%20Services%20Budgets.pdf>
4. Iowa Department of Public Health. (2021). Iowa Department of Public Health Budget 2022-2023. Retrieved March 2025 from <https://dom.iowa.gov/resource/state-agency-budget-reports/department-human-services-budget-fy-2022-2023>
5. Iowa Department of Management. (2020) Iowa Department of Health & Human Services Budget 2020-2021. Retrieved March 2025 from [https://dom.iowa.gov/sites/default/files/fy2020-2021\\_human\\_services\\_budget.pdf](https://dom.iowa.gov/sites/default/files/fy2020-2021_human_services_budget.pdf)

## H.3. State Psychiatric Institutions

1. American Hospital Directory. (2021) Cherokee Mental Health Institute. Retrieved March 2025 from [https://www.ahd.com/free\\_profile/164002/Cherokee\\_Mental\\_Health\\_Institute/Cherokee/Iowa/](https://www.ahd.com/free_profile/164002/Cherokee_Mental_Health_Institute/Cherokee/Iowa/)
2. American Hospital Directory. (2021). Independence Mental Health Institute. Retrieved March 2025 from [https://www.ahd.com/free\\_profile.php?hcfa\\_id=f060060fd55e4b53ae584bf8fa72f9cb&ek=cd8a85f930fc9eac8e4b275b5d3b7dcb](https://www.ahd.com/free_profile.php?hcfa_id=f060060fd55e4b53ae584bf8fa72f9cb&ek=cd8a85f930fc9eac8e4b275b5d3b7dcb)
3. Iowa Department of Health and Human Services. (2023, December) State Operated Facilities Appendix. Retrieved March 2025 from <https://www.legis.iowa.gov/docs/publications/SD/1445300.pdf>

# I.3. Sources

## H.4. State Behavioral Health Safety-Net Delivery System

1. The Iowa Legislature. (2020, November). County Home Rule Implementation. Retrieved March 2025 from <https://www.legis.iowa.gov/docs/ico/chapter/331.pdf>
2. Iowa Department of Health & Human Services. (2023, June). MHDS Regional CEO Contacts. Retrieved March 2025 from <https://hhs.iowa.gov/media/8967/download?inline=>
3. Iowa Department of Health & Human Services. (2019). Promote Iowan's Behavioral and Disabilities Health Status. Retrieved March 2025 from <https://www.legis.iowa.gov/docs/publications/SD/16002.pdf>
4. Justia US Law. 2016 Iowa Code: County Home Rule Implementation Mental Health and Disability Service Regions. Retrieved March 2025 from <https://law.justia.com/codes/iowa/2016/title-ix/chapter-331/section-331.389/>
5. Iowa Department of Public Health. (2024). Disability & Health Program. Retrieved March 2025 from <https://hhs.iowa.gov/programs/programs-and-services/disability-services/disability-health>

## H.4. Behavioral Health Safety-Net Delivery System: MHDS Regions

1. Iowa Department of Health & Human Services. (2023, July). MHDS Regions. Retrieved March 2025 from <https://hhs.iowa.gov/media/8966/download?inline=>

## H.4. Behavioral Health Safety-Net Delivery System: Addiction Treatment Services

1. Iowa Department of Public Health. (2019, January). Office of Problem Gambling Treatment Financial Eligibility. Retrieved March 2025 from <https://hhs.iowa.gov/programs/mental-health/office-problem-gambling>
2. Iowa Department of Public Health. (2018, December). Individual Mental Health Therapy Provider / Substance Use Disorder Rate Updates. Retrieved March 2025 from <https://hhs.iowa.gov/media/551/download?inline=>
3. Iowa Department of Public Health. (2021). Mental and Behavioral Health. Retrieved March 2025 from <https://hhs.iowa.gov/programs/mental-health/substance-use-disorder>

## H.4. State Behavioral Health Safety-Net Delivery System: IDPH Service Areas

1. Iowa Department of Public Health. (2023, June). Integrated Provider Network Service Areas and Contractor. Retrieved March 2025 from <https://hhs.iowa.gov/programs/mental-health/provider-resources/integrated-provider-network>

## H.5. Behavioral Health System: New Initiatives- Behavioral Health System

1. Iowa Department of Health and Human Services. (2025). Iowa's Behavioral Health Service System. Retrieved March 2025 from <https://hhs.iowa.gov/initiatives/system-alignment/behavioral-health-service-system>
2. The Gazette. (2024, December). Iowa picks health care association to manage new behavioral health system. Retrieved March 2025 from <https://www.thegazette.com/state-government/iowa-picks-health-care-association-to-manage-new-behavioral-health-system/>