

Welcome to the Iowa Total Care Provider Newsletter, where we share news, training opportunities and more with our provider network!

As your partner in health, we want to support YOU in delivering the highest quality of patient care. Together, we will continue to transform the health of the communities we serve, one person at a time.

## Improving the Follow-Up After Hospitalization (FUH) for Mental Illness Measure Rate

The Follow-Up After Hospitalization (FUH) for Mental Illness measure is a National Committee for Quality Assurance (NCQA) Healthcare Effectiveness Data and Information Set® (HEDIS) measure which requires coordination between hospitals, outpatient behavioral health providers, care managers and health plans.

This measure is an essential HEDIS metric that tracks whether members discharged from inpatient psychiatric care receive timely follow-up with a mental health provider within 7 days and 30 days of discharge.<sup>1</sup>

The purpose is to encourage continuity of care and better management after discharge. Iowa Total Care can help support follow-up through care management and community resources.

### Provider Strategies for FUH

Timely follow-up gives providers an opportunity to assess progress, address emerging issues, adjust treatment plans and reinforce care plans after discharge. Because of that, early interventions and proactive management are described as ways that may reduce the risk of readmission and support sustained well-being.

#### Schedule Follow-Up Before Discharge

- Proactively book follow-up appointments within 7 days of discharge.
- Use discharge planning tools to promote continuity of care.

#### Leverage Expanded Visit Types

- Encourage use of peer support, residential treatment and collaborative care options.
- Document visits accurately so they count toward FUH compliance.

#### Improve Documentation

- Maintain clear and accurate coding of mental health diagnoses on the claim.
- Use standardized templates to capture all necessary visit details.

#### Coordinate Across Teams

- Work with case managers, social workers and behavioral health specialists to support transitions.
- Use shared care plans and electronic health record (EHR) alerts to track follow-up needs.

#### Address Barriers To Care

- Offer telehealth options when appropriate (Note: some telehealth visit types may no longer qualify).

#### Educate Members and Families

- Reinforce the importance of follow-up care in preventing relapses and promoting recovery.

For additional information and resources, visit Iowa Total Care's [Follow-Up After Hospitalization Resources webpage](#).

#### Resources

<sup>1</sup> National Committee for Quality Assurance, 2026. Follow-Up After Hospitalization For Mental Illness (FUH). [ncqa.org](https://www.ncqa.org)



### PROVIDER COMMUNICATIONS – Share the News!

Please encourage your staff to sign-up for important Iowa Total Care provider communications from provider alerts to newsletters.

Here's how:

Visit our [Sign Up for Provider Emails page](#), click on the [Provider Email Sign Up Page link](#) and fill out the following information:

- Email address
- First and last name
- Company name



## Healthcare Effectiveness Data and Information Set (HEDIS) MY 2026 Measure Changes/Updates

HEDIS is continuously evolving to represent clinical best practices and support the needs of organizations delivering and coordinating care. For HEDIS Measurement Year 2026, National Committee for Quality Assurance (NCQA) updated the measure format as well as made changes across multiple measures.

### HEDIS MY 2026 Measure Changes/Updates

Category	Measure & Identifier	Description / Notes
<b>New Measures</b>	Acute Hospitalizations Following Outpatient Orthopedic Surgery (HFO)	Risk-adjusted measure for age 65+ post-outpatient orthopedic surgery
	Acute Hospitalizations Following Outpatient General Surgery (HFG)	Risk-adjusted measure for age 65+ after outpatient general surgery
	Acute Hospitalizations Following Outpatient Colonoscopy (HFC)	Risk-adjusted measure for age 65+ after outpatient colonoscopy procedure
	Acute Hospitalizations Following Outpatient Urologic Surgery (HFU)	Risk-adjusted measure for age 65+ after outpatient urologic surgery
	Disability Description of Membership (DDM)	Descriptive measure: % of members enrolled with disability status, by source
	Follow-Up After Acute and Urgent Care Visits for Asthma (AAF-E)	ECDS measure for persons 5–64 with follow-up within 30 days
	Tobacco Use Screening and Cessation Intervention (TSC-E)	ECDS measure for persons 12+ screened for tobacco use and received intervention
<b>Updated Measures</b>	Statin Therapy for Patients With Cardiovascular Disease (SPC-E)	Age/sex bands updated, exclusions removed, ASCVD identification updated
	Statin Therapy for Patients With Diabetes (SPD-E)	Age/sex bands updated, exclusions removed, ASCVD identification updated
	Social Need Screening and Intervention (SNS-E)	Added HCPCS/ICD-10 Z codes, updated exclusions for all ages
	Adult Immunization Status (AIS-E)	Added COVID-19 vaccine indicator for persons age 65+
	Follow-Up After High-Intensity Care for SUD (FUI)	Updated to allow SUD diagnoses in any claim position, includes peer support services
<b>Electronic Clinical Data Systems (ECDS)-Only Measures</b>	Lead Screening in Children (LSC-E)	ECDS-only reporting; administrative/hybrid retired
	Statin Therapy for Patients With Cardiovascular Disease (SPC)	ECDS-only reporting; administrative/hybrid retired
	Statin Therapy for Patients With Diabetes (SPD)	ECDS-only reporting; administrative/hybrid retired
<b>Retired Measures</b>	Asthma Medication Ratio (AMR)	Retired; no longer aligns with current guidelines
	Medical Assistance With Smoking and Tobacco Use Cessation (MSC)	Retired; replaced by TSC-E

**Note:** Measure specifications and reporting requirements are subject to change based on NCQA updates. Providers should refer to the official [NCQA website](#) for the most current information.



### Demographic Change Online Form

Need to update your demographic information to Iowa Total Care? You can self-report your race, ethnicity, language preferences and completed health equity trainings with our [Demographic Change online form](#) for your convenience. This online form supports our collective efforts to advance health equity and ensure we better reflect and serve the diverse needs of our member population. We encourage you to take a few moments to update your information. Providers who prefer to update demographic information by fax or email can use the Provider Change form on our [Contracting & Credentialing Forms webpage](#).

For questions or concerns, reach out via email to [NetworkManagement@IowaTotalCare.com](mailto:NetworkManagement@IowaTotalCare.com).

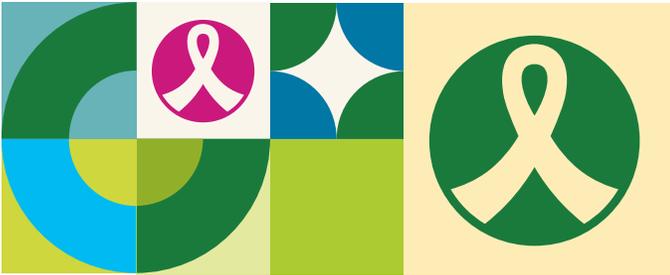


### Coming Soon: Changes to Prior Authorization Criteria

Effective June 1, 2026, Iowa Medicaid will have changes to prior authorization criteria for Dupilumab (Dupixent), Finerenone (Kerendia), Janus Kinase (JAK) Inhibitors and Tezepelumab-ekko (Tezspire).

There is new criteria for Remibrutinib (Rhapsido). Please consult Iowa Medicaid's [Prior Authorization Criteria webpage](#) for the most current updates.

For additional information, visit Iowa Medicaid's [Preferred Drug Lists \(PDL\) webpage](#). The PDL is a great resource when prescribing for a Medicaid member.



### Focus on Cancer Prevention

Iowa has one of the highest cancer rates in the nation. Please remind Iowa Total Care members that we cover benefits designed to help them stay healthy and avoid getting cancer, such as:

- Smoking cessation therapies
- Substance use disorder treatment, including alcohol use disorder treatment
- Vaccinations, such as human papilloma virus (HPV) and Hepatitis



### Generic Maintenance Medications

Certain oral, generic maintenance medications must now be filled in 90-day supplies. This change is intended to help members stay adherent to ensure they have medication on hand. As best practice, prescribers should indicate a 90-day supply when submitting maintenance medication prescriptions to the pharmacy.



### Spread the Word

If Iowa Total Care members are pregnant or thinking about becoming pregnant, they should follow these steps:

- Go before they show! Encourage members to go to their doctor as soon as they think they are pregnant. Early and routine care will help and protect them and their baby.
- Complete an Iowa Total Care Notification of Pregnancy (NOP) form online in [our member portal](#).
- Join our [Start Smart for Your Baby](#)® program for care and support throughout pregnancy.
- Keep healthy lifestyle habits! This includes exercising, eating healthy meals and resting for 8-10 hours each night.

Iowa Total Care members can earn up to **\$60 in My Health Pays**® rewards by going to the doctor and completing an NOP form in the first 12 weeks of pregnancy.



Iowa Total Care is excited to offer behavioral health, physical health and long-term services and supports trainings for all Iowa providers – at no cost!



## Home- and Community-Based Services (HCBS) Monthly Training

Join Iowa Total Care for our monthly training series on HCBS services! These training courses will provide participants with an overview of HCBS services, how these services can benefit your organization and members and how to begin providing these services to your communities.

Iowa Total Care will offer the HCBS services training every **fourth** Wednesday of each month at 11 a.m. CT.

After registering, you will receive a confirmation email with details on how to join the webinar.

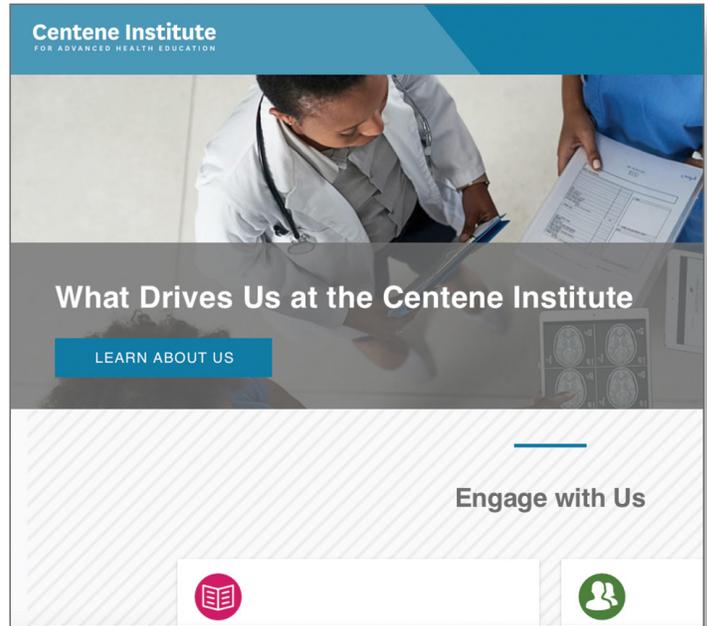
[Register now](#) for the upcoming session and save the date!

### Upcoming Sessions:

April 22, 2026 | 11 a.m. CT

May 27, 2026 | 11 a.m. CT

June 24, 2026 | 11 a.m. CT



## Empowering Care Through Education

Iowa Total Care, in partnership with its parent company Centene Corporation, offers a robust catalog of no-cost, industry informed, evidence based training for providers and community stakeholders across Iowa.

Learning opportunities cover areas such as behavioral health, long-term services and supports, culturally appropriate care and integrated care, with many courses approved for clinical and continuing education credit.

Trainings are designed to deepen knowledge, strengthen practical care strategies and connect participants to meaningful resources supporting the diverse needs of those we serve.

**Beginning in late March**, all our instructor-led and on-demand clinical and specialty training will begin to be housed on a new website. This centralized platform will allow providers to access all educational opportunities in one place, view their training transcripts, and download certificates for completed courses at any time.

To explore current offerings, visit our [Provider Trainings & Webinars](#) page — and be sure to check back in late March to experience the new corporate training website.



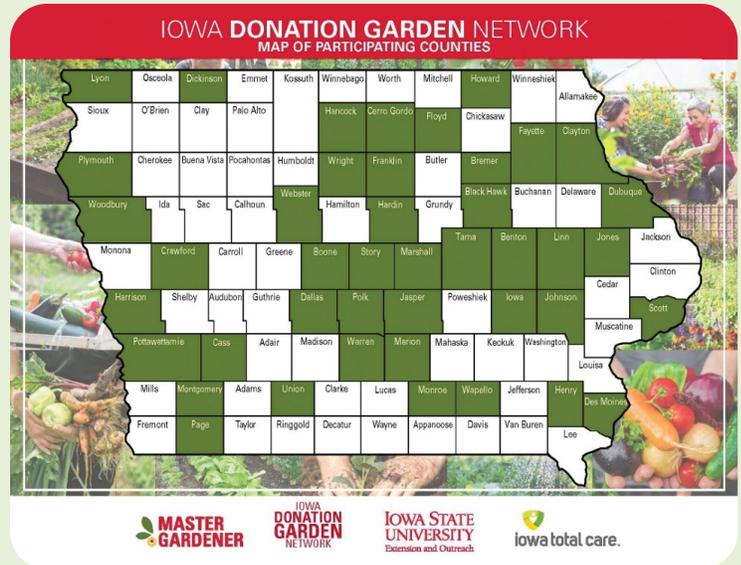
## It's Here! 2025 Community Impact Report Now Available to Read

Our [2025 Community Impact Report](#) is now available for you to read! This report summarizes some of our greatest accomplishments for 2025.

In this report, we talk about:

- How we are working together with local communities to help those struggling with homelessness,
- Our new literacy partnership with the 4-H Clover Kids Club,
- Our latest behavioral health resources,
- Our work with Ambetter and Wellcare,
- And so much more!

Want to read more? All of our past and latest Community Impact Reports are available to read on our [Community Impact webpage](#).



## Partnering with the Iowa Donation Garden Network

This year we are partnering with the [Iowa Donation Garden Network](#), a program coordinated by Iowa State University Extension and Outreach, to provide free memberships to anyone looking to join the Iowa Donation Garden Network in 2026.

Members of the Iowa Donation Garden Network have the chance to grow nutritious food and serve fresh produce to Iowa communities. Donation gardens span 43 counties, and the food from the gardens will support more than 105 food pantries across Iowa.



## Iowa Total Care is a 4-star NCQA plan!

Iowa Total Care was named a 4-star NCQA health plan. The overall rating is the weighted average of a plan's HEDIS® and CAHPS® measure ratings. This award is thanks to you, our provider partners, to Iowa Total Care staff and a collective commitment to transforming the health of the communities we serve, one person at a time.



# New/Ongoing Initiatives



## Partnering with Care Management for Better Member Outcomes

Iowa Total Care is committed to supporting you in delivering high-quality, person-centered care. Our care management team works alongside providers to ensure members receive coordinated services tailored to their needs.

### What Care Management Can Do

- Conduct health risk screenings and assessments.
- Develop person-centered care plans.
- Coordinate transitions of care and long-term services and supports (LTSS).
- Coordinate care and access to member records between treating providers.

### How We Collaborate with You

#### Notifications

- You'll receive alerts when members enroll in care management.

#### Shared Plans

- You'll receive copies of member care plans and updates while the member is enrolled in care management.

#### Direct Support

- Care managers are available for input on treatment plans and complex cases.

### Educational Resources

For easy access to resources, visit the following Iowa Total Care webpages:

- [Manuals, Forms and Resources](#)
- [For Providers](#)
  - Easy access to portal, quick links and provider alerts.
- [Provider Trainings & Webinars](#)
  - Free clinical training sessions on behavioral health, LTSS and integrated care.

### Your Role

- Share treatment plans and assessments with care managers.
- Participate in member-centered meetings for complex cases.
- Use our digital tools to stay informed and engaged.

**Together, we can improve outcomes and enhance the member experience.**

To connect with a care manager, call 1-833-404-1061 and ask to speak with Care Management or email:

[Care\\_Management@IowaTotalCare.com](mailto:Care_Management@IowaTotalCare.com).



## 2026 CAHPS® Survey Coming Soon: How Members Evaluate the Care They Receive

Each spring, a random sample of Iowa Total Care members receive the Consumer Assessment of Healthcare Providers and Systems (CAHPS) survey by mail. By completing the survey, members can evaluate the aspects of care delivery that matter most to them.

Interested in learning more about the annual CAHPS survey? For insight to how our members are evaluating the care they receive, review Iowa Total Care's Provider [CAHPS Resource Guide \(PDF\)](#) and additional resources on our [CAHPS® Corner webpage](#).

# Clinical Practice Guidelines

Iowa Total Care clinical and quality programs are based on evidence-based preventive and clinical practice guidelines. Whenever possible, Iowa Total Care adopts guidelines that are published by nationally recognized organizations or government institutions, as well as state-wide collaborative and/or a consensus of healthcare professionals in the applicable field.

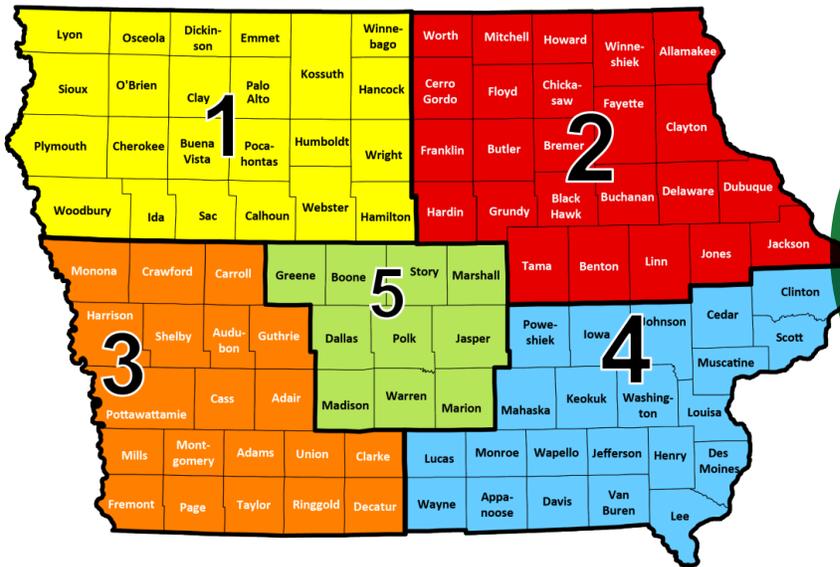
[Clinical Practice & Preventative Health Guidelines \(PDF\)](#) provides the most current version of the guidelines adopted by Iowa Total Care. A paper copy of the practice guidelines can be requested by calling Provider Services: 1-833-404-1061 (TTY: 711).

## Policy Review

### New, Revised, Retired: Clinical, Payment & Pharmacy Policies

Iowa Total Care continually reviews and updates our payment and utilization policies to ensure they are designed to comply with industry standards while delivering the best patient experience to our members. As a part of that review, some policies were revised or changed. For more detailed information about these policies, please refer to the [Clinical, Payment & Pharmacy Policies page](#) on our website.

## Provider Relations Territory Map



View the [Provider Relations Territory Map](#) to find the provider engagement account managers assigned to each region.

Iowa Total Care’s provider relations department uses the provider engagement model approach, aligning staff skillsets to support our diverse providers. We believe the provider engagement model will better serve our providers end to end.

Provider onboarding, training and education will align with the appropriate subject matter experts (SMEs) within the health plan. That way, Iowa Total Care can better assist providers and improve their experience once onboarded. This will also allow staff to broaden their knowledge of provider types and offer more comprehensive, in-depth support to our valued provider partners across the state.

### Stay Connected

Visit our [provider website!](#)  
Want to hear how Iowa Total Care is making a difference in the community? [Sign up for our Community Outreach Newsletter.](#)

### Contact Us

Provider Services is available by phone at **1-833-404-1061 (TTY: 711)** Monday through Friday from 7:30 a.m. – 6 p.m.

### Join Iowa Total Care on LinkedIn!

Iowa Total Care invites you to join us on [LinkedIn!](#) We would love to connect and share our community impact efforts with you. Follow us to see our most recent outreach efforts, volunteer events and more!

Ambetter provides market-leading, affordable health insurance in the marketplace. Ambetter delivers high quality, locally based healthcare services to its members, with our providers benefiting from enhanced collaboration, and strategic care coordination programs.



## Protect Your Marketplace Claims: Understanding Eligibility Status and the Grace Period

Checking Ambetter Health (Marketplace) eligibility before and after a visit is one of the most effective ways to prevent delayed payments and denied claims. We encourage front office staff to routinely review **member eligibility status, premium paid-through date**, and **claims paid-through date** in Avality Essentials or the secure portal to understand whether claims are likely to be paid, pending or denied.

### What Eligibility Status Tells You

A member's eligibility status provides insight into whether premiums are current and whether claims are likely to be paid:

- **Active** members are in good standing, with premiums paid in full.

- **Active – pending investigation**, delinquent or suspended statuses indicate the member is behind on premium payments and may be in a grace period.
- **Inactive** means coverage has ended and claims will be denied.

Understanding these distinctions helps you anticipate potential claim delays or denials.

### Premium Paid-Through Date vs. Claims Paid-Through Date

The **premium paid-through date** reflects the last date premiums have been paid. The **claims paid-through date** indicates the last date of service for which claims will be paid or considered for payment. Claims for services rendered after this date may pend or be denied – if the member does not return to good standing (pay premiums) before the grace period ends.

### How the Grace Period Works

Grace periods vary based on whether a member receives an advance premium tax credit (APTC):

- Members **with APTC** have a 90-day grace period. Claims are paid during the first 30 days, but may pend during days 60 to 90.
- Members **without APTC** have a 60 day grace period, during which claims may pend until premiums are paid.

If premiums are not paid by the end of the grace period, coverage is terminated retroactively, and pending claims are denied.

### What This Means for Providers

When a member is not in good standing, providers may collect full charges at the time of service. If the member later pays outstanding premiums and the claim is paid, the provider must reimburse the member.

By consistently checking eligibility and understanding the grace period, providers can reduce claim risk, set appropriate financial expectations and continue delivering uninterrupted care to members.

For more than 20 years, Wellcare has offered comprehensive plans featuring affordable coverage and innovative benefits beyond original Medicare..

- Local management with national expertise.
- Full continuum of Medicare products including:
  - HMO
  - CSNP
  - PSP
  - PDP
  - DSNP
  - MMP
  - EGWP

## Supporting the Whole Patient: Understanding SSBCI and the Wellcare Spendables® Card

In 2026, all Iowa Wellcare Medicare Advantage and Dual Eligible Special Needs (DSNP) plans include the Wellcare Spendables® card. The Wellcare Spendables® card provides members with preloaded monthly funds that expire at the end of the plan year. Allowance amounts vary by plan and can be used towards over-the-counter items as well as dental, vision and hearing out-of-pocket expenses.

For members with complex, chronic conditions, Special Supplemental Benefits for the Chronically Ill (SSBCI) expand the benefits of the Wellcare Spendables® card even further. SSBCI eligible members can use card funds on key social drivers of health, such as food insecurity, housing instability, transportation challenges and home safety.

### Who Qualifies for SSBCI?

Members must meet all **three** Centers for Medicare and Medicaid Services (CMS) criteria:

- Require intensive care management, often due to complex medical needs.
- Be at high risk for unplanned hospitalization.
- Have an active, qualifying chronic condition that significantly limits health or function.

These criteria ensure benefits are targeted to members who need enhanced support and care coordination.

### Determining Eligibility

Eligibility is identified through two pathways:

- **Automatic identification**, using claims and clinical data reviewed weekly.
- **Manual eligibility – provider attestation**, primarily for new members when sufficient data is not yet available. In this case, providers play a key role by attesting to a member’s eligibility.

### The Provider’s Role

Providers can support member access by completing a brief electronic attestation, which involves:

- Evaluating the member against SSBCI criteria.
- Submitting an attestation at [ssbc1.rrd.com](https://ssbc1.rrd.com).
- Billing the related office visit with appropriate diagnosis codes.

Members typically receive a determination within 10 business days.

### Approval

Approved members receive a notification letter with details on how to access SSBCI benefits. Benefits may include healthy food, rent or utility assistance, gas purchased using pay-at-the-pump, home safety items and pest control items and services.

For more information, visit our [Wellcare Provider webpage](#).

