

INFORMATIONAL LETTER NO. 2691-MC-FFS

DATE: June 13, 2025

TO: Iowa Medicaid Home- and Community-Based Services (HCBS)

providers, Case Managers, and Integrated Health Home (IHH)

Providers

APPLIES TO: Managed Care (MC), Fee-for-Service (FFS)

FROM: Iowa Department of Health and Human Services (HHS), Iowa Medicaid

RE: Completion of the Level of Care Utilization System (LOCUS) Tool

EFFECTIVE: June 1, 2025

The purpose of this Informational Letter is to provide formal guidance regarding the completion and submission of the <u>Comprehensive Assessment and Social History</u> (<u>CASH</u>)¹ to enable the completion of the LOCUS tool for the purposes of determining eligibility and service planning for the HCBS Habilitation services.

The CASH is a comprehensive assessment used to identify the strengths and needs of an individual applying for HCBS Habilitation Services. The CASH is completed by the case manager. The CASH provides a comprehensive assessment of the individuals life skills and functioning and meets the requirements outlined in the Health Home State Plan Amendment (SPA), the HCBS Habilitation SPA, person-centered planning practices, the National Committee on Quality Assurance (NCQA) Long Term Services and Supports (LTSS) Standards, and Iowa Administrative Code. Instructions for completing the CASH can be found https://example.com/here2.

All requests for completion of the LOCUS/CALOCUS includes the CASH being uploaded to IMPA by the MCO, or the FFS case manager. This includes urgent requests. Urgent requests must be based on the individual's need to obtain services.

https://view.office.apps.live.com/op/view.aspx?src+https%Fmedia%2Fdownload%Finline&wdOrigin=BROWSELINK

² https://hhs.iowa.gov/media/11786/download?inline



It is important to note that a second review of a previously reviewed CASH will not occur during the service planning year unless the member's functional or medical status has changed in a way that may affect needs-based eligibility.

The submitted CASH must be completed within 60 days prior to the submission date, The CASH must be complete and accurate, which includes the signed and dated signature page. When a CASH is submitted with incorrect information or has an error, the CSA vendor will return the CASH to the appropriate MCO or case manager and outreach for remediation. The LOCUS assessment will be completed only when the completed CASH has been resubmitted.

If you have questions, please contact Iowa Medicaid Provider Services or the appropriate MCO:

Iowa Medicaid Provider Services:

■ Telephone: 1-800-338-7909

■ Email: <u>imeproviderservices@dhs.state.ia.us</u>

Managed Care Organizations (MCOs):

Iowa Total Care:

Telephone: 1-833-404-1061

Email: <u>providerrelations@iowatotalcare.com</u>

Website: https://www.iowatotalcare.com

Molina Healthcare of Iowa

■ Telephone: 1-844-236-1464

• Email: <u>iaproviderrelations@molinahealthcare.com</u>

Website: https://www.molinahealthcare.com/ia

Provider portal: provider.molinahealthcare.com

Wellpoint Iowa, Inc. (formerly Amerigroup Iowa, Inc.):

Phone: 1-833-731-2143

Email: ProviderSolutionsIA@wellpoint.com

Website: https://www.provider.wellpoint.com/iowa-provider/home