



Michael Randol, Medicaid Director

**Hawki Clinical Advisory Committee (CAC)**

**AGENDA  
Hawki CAC**

Thursday, July 16, 2020

Time: 7:30 – 8:30 a.m.

Teleconference

**Dial:** 1-866-685-1580

**Code:** 000 999 0230

**Meeting Objective**

To engage clinicians to provide the best care and services for the pediatric population covered by the Hawki Program.

Roll Call	Diane Morrill
Opening	Dr. Jagiello
Approval of October Minutes	Dr. Jagiello
Hawki Board Meeting Update	Dr. Jagiello
Amerigroup Pharmacy Benefit Manager – IngenioRx	Dr. Jagiello
Open Discussion	Dr. Jagiello
Closing	Dr. Jagiello

**Next meetings:**

October 15, 2020

January 21, 2021

April 15, 2021

July 15, 2021

## Hawki Board Meeting – June 15, 2020

Hemophilia drug expenditures for CY2019

<b>Program</b>	<b>Member Counts</b>	<b>Expenditures</b>
Hawki	5	\$740,920
Non-Hawki	70	\$7,806,839
<b>Total</b>	<b>75</b>	<b>\$8,547,759</b>

Total number of Medicaid and Hawki members who have tested positive for COVID-19 to date (March 1, 2020 through June 16, 2020)

<b>MCO</b>	<b>Positive Cases</b>	<b>Recovered</b>	<b>Deaths</b>	<b>Remain Hospitalized</b>
Amerigroup	309	242	34	33
Iowa Total Care	845	782	63	0
<b>Total</b>	<b>1,154</b>	<b>1,024</b>	<b>97</b>	<b>33</b>



Hawki Clinical Advisory Committee  
Minutes of Meeting October 17, 2019

CAC Members Present:

William Howard, MD  
Stephanie Sinclair, NP  
Deb Bixler, DO

Hawki and contract staff present:

Bill Jagiello, DO, Hawki CAC Chair  
Diane Morrill, IME  
Anna Ruggle, Hawki Policy  
Gretchen Hageman, Delta Dental

CAC Members Absent:

Teri Wahlig, MD

Roll call of CAC members, staff from Hawki Policy, IME, and Dental plans. A quorum was met. Meeting was opened at 7:30 a.m. Dr. Jagiello opened the meeting introducing himself as the new Medicaid Medical Director and chair for the Hawki CAC. Dr. Jagiello urged the CAC members to contact him via email ([WJagiell@dhs.state.ia.us](mailto:WJagiell@dhs.state.ia.us)) with any concerns or ideas regarding the Hawki and/or Medicaid programs.

Minutes from the April 18, 2019, meeting were approved as written. Discussion opened regarding the Hawki Program and what the CAC members thought were important aspects of the program. Dr. Bixler observed that the program does fill the financial void for families who do not meet Medicaid financial guidelines but cannot afford commercial insurance. She also mentioned that it seems that Hawki has been folded in to Medicaid more currently than in the past and that her Hawki patient load is lower than in the past.

Dr. Howard indicated that he is not as aware of the type of insurance for his patients. Gretchen Hageman indicated that dental coverage for Hawki members is working well; 66 percent of Hawki members had a dental encounter the past year. She also indicated that Delta Dental contracts with 69 of 71 pediatric dentists available within the state.

Common problems encountered with Hawki/Medicaid are related to the prior authorization (PA) processes. Specifically the CAC members feel that they spend entirely too much of their time trying to get a PA approved that should not need to go through the PA process. Some examples include the quantity of Miralax prescribed (more than one capful per day), Periactin (an antihistamine) prescribed for migraine prophylaxis, EES (erythromycin ethylsuccinate [antibacterial]) used off-label for bowel mobility.

Discussion included observations that the Hawki Program is for children; however, the CAC members did not feel that pediatric guidelines were being used for clinical decisions. Dr. Jagiello interjected that one-offs are to be expected, but that the process should not be as cumbersome for the providers who are prescribing and treating pediatric patients. The inefficiencies in the PA process will be discussed with the IME Pharmacy Director.

Anna Ruggle interjected that the preferred drug list (PDL) is the same for Hawki, Medicaid, and the managed care organizations.

The PA process for durable medical equipment was also discussed as a problem area. Providers are experiencing similar problems with the PA process when prescribing wheelchairs and other DME items for pediatric rehabilitation. Providers feel that the PA process is second-guessing the provider's clinical decisions on what care is best for their patient's and are using incorrect criteria in their PA decisions.

Dr. Jagiello discussed his role in another committee that is looking to align the PA processes for Hawki, Medicaid, and the managed care organizations. This is a long-term committee that will attempt to make changes over the next 12-18 months.

The Hawki CAC meeting was discussed. The members still feel that the teleconference beginning at 7:30 AM is a good time; this allows CAC members to complete this task prior to beginning their patient care day. The content for future meetings was discussed. Understanding what the Hawki Board expects from this committee and what the specific function of this committee should be would better help the CAC members with the committee focus. Dr. Jagiello will be attending the next Hawki Board meeting and will attempt to get answers to these questions.

The objective of the committee was discussed. Overall, the members felt that the objective was to provide the best care for Hawki members. Going forward, the objective will be: To engage clinicians to provide the best care and services for the pediatric population covered by the Hawki Program.

An update on the DME PA process will be presented at the next scheduled meeting. The IME Pharmacy Director will be invited to this meeting to facilitate PA questions. Dr. Jagiello will also report on the October 21 Hawki Board meeting.

As there were no other agenda items or topics to discuss, the meeting was closed at 8:30 a.m.