LT. GOVERNOR

Kelly Garcia

DIRECTOR

Council on Health and Human Services Meeting Minutes

NOVEMBER 9, 2023

COUNCIL MEMBERS	HHS STAFF
Rebecca Peterson ✓	Director Kelly Garcia ✓
Dr. Donald Macfarlane ✓	Matt Highland ✓
Sam Wallace ✓	Sarah Reisetter ✓
Jack Willey ✓	Zach Rhein ✓
Monika Jindal ✓	Jean Slaybaugh ✓
Kay Fisk ✓	Sarah Ekstrand ✓
Andrew Allen ✓	Elisabeth Matney 🗸
Sandra McGrath ✓	Cory Turner ✓
Samantha Rozeboom ✓	Erin Drinnin ✓
	Janee Harvey
	Marissa Eyanson ✓
	Robert Kruse ✓

EX-OFFICIO LEGISLATIVE MEMBERS	
Senator Jeff Edler	
Senator Sarah Trone Garriott	
Representative Heather Matson ✓	
Representative Ann Meyer	

CALL TO ORDER

Council Chair, Rebecca Peterson called the Council meeting to order at 10:01 a.m. via zoom teleconference.

ROLL CALL

All Council members were in attendance.

Ex-Officio member Representative Heather Matson was present.

Sam Wallace moved to approve minutes and Andrew Allen seconded this. The council members said "aye" no changes or issues. Minutes were approved.

STATE MEDICAL DIRECTOR'S REPORT

State Medical Director, Dr. Robert Kruse presented on two new initiatives.

Naloxone distribution to secondary distributors

lowa HHS has launched two new community-based naloxone distribution initiatives that
provide free opioid overdose reversal nasal spray to ensure communities are prepared for
timely response to overdose events. The two medications available for distribution are
Kloxxado and NARCAN.

- The first is a Secondary Distribution Initiative for the drug Kloxxado.
- Kloxxado is a prescribed medication and as a result, only the following entities (known as Secondary Distributors) are eligible to distribute this medication as identified by House File 595.
 - o Law Enforcement Agencies
 - Fire Departments
 - School Districts
 - Health Care Providers
 - Licensed Behavioral Health Providers
 - County Health Departments
 - Department of Health and Human Services
- To give you an idea of what this entails, each week our support staff in the Behavioral Health Division complete the following activities:
 - Place orders for Kloxxado (Kloxxado Direct) based on the number of requests received.
 - Unpackage each order (each order comes in a box of 12 kits/cartons)
 - Our team prints and labels each individual kit/carton requested with the information of the requesting entity and our lowa HHS label.
 - We then Package all of the labeled kits in preparation for inspection.
 - We Ship the inspected kits to the requesting entity.
- The second distribution initiative is for NARCAN. Narcan is an over-the-counter medication and as a result, this medication can be distributed by Secondary Distributors that I just discussed, in addition to Community Based Organizations or any agency or business determined by the Iowa Department of Health and Human Services to be a viable distributor of NARCAN based on the unique services they provide.

Tuberculosis Healthcare Provider Alert

- Increase in Tuberculosis (TB) Cases Among Persons from Pacific Island Communities
- We have requested clinicians in Iowa implement routine baseline TB screening and testing for all persons from designated Pacific Island communities.
- The Pacific Island communities include the Republic of the Marshall Islands (RMI),
 Republic of Palau, and the Federated States of Micronesia (FSM).
- Citizens of these communities do not have the benefit of medical screening for communicable diseases, including tuberculosis, upon entry to the United States.
- TB case rates in these regions are amongst the highest in the world.
- In the ten-year time period of 2011-2020, lowa reported a total of 17 cases in this population.
- Since 2021, lowa reported 41 cases to date in the Pacific Islander population.
- We are recommending for healthcare providers to be thinking about TB over pneumonia with this population when patients present with classic symptoms of pneumonia.
- We are collaborating with our local health agencies at the county level to determine specific needs and strategize initiatives to reduce TB disease.

ASTHO Falls Prevention Community-Clinical Linkages Learning Community

• The Division of Public Health was one of two state Public Health Departments invited to participate in a pilot of the Association of State and Territorial Health Officials (ASTHO's) newly released best practice guide for state health departments on

- Expanding Falls Prevention Through Surveillance, Community-Clinical Linkages, and Strategic Planning and Evaluation Falls Prevention.
- Over the past year, ASTHO, with support from CDC, conducted an environmental scan
 of state falls data and interviewed state health agency members across the nation to
 understand the current state of older adult falls within their jurisdictions. These efforts
 informed our best practice guide that outlines strategies, resources, and tools for state
 health agencies to foster community-clinical linkages to promote falls prevention efforts.
- This best practice guide is intended to be a comprehensive resource for state health
 departments in understanding how to align current falls prevention efforts to support
 community-clinical linkages and offer strategies to assist in implementing new efforts to
 support these linkages.
- Unintentional falls are the leading cause of injury and injury death among older adults in the United States. Each year, about 14 million older adults report falls and 5 million report fall injuries. Older adult falls contribute to more than 900,000 hospitalizations every year. A fall-related hospitalization increases the likelihood of a long-term nursing home admission, creating either a temporary or permanent loss of independence.
- The Public Health Division is collaborating on this work with Director Rhein in the Division of Aging and Disability Services
- We are looking at planning and implementing a falls prevention strategy with local partners that we can integrate into an overall health agenda for the state.
- A total award amount of up to \$50,000 in funding may be used to support costs associated with participation in this project, including personnel, partner sub-awards, supplies, and data collection.
- This learning community will take place from November 2023 July 2024.

Pink Book Training

- The Epidemiology and Prevention of Vaccine Preventable Diseases Pink Book Course was held November 1 and 2, 2023 at Hy-Vee Hall in Des Moines, IA.
- This was a live two-day course that provides a comprehensive review of immunization, vaccine-preventable diseases, and their respective vaccines.
- The course will provide the most up-to-date immunization information from the Advisory Committee on Immunization Practices (ACIP)
- Attendance from five different states and the Virgin Islands

EMS Compact

- lowa is now connected to the National EMS Coordinated Database (NEMSCD) and is EMS Compact Compliant.
- EMS Compact States are provided exclusive access to the NEMSCD.
- The NEMSCD is a secure national EMS personnel database that contains licensure information, investigations, adverse actions, and Privilege to Practice status for EMS personnel licensed by a Compact member state.
- Benefits of becoming an EMS Compact state include:
 - Qualified EMS personnel licensed by lowa are extended a privilege to practice in other Compact member states, under authorized circumstances.
 - Qualified EMS personnel licensed by other Compact member states are extended a privilege to practice in the state of lowa under authorized circumstances. Authorized circumstances may include supplementing daily operations, mutual aid, special events, mission critical augmentation, and response to non-declared disaster events.

- The EMS Compact promotes multistate uniform licensure standards, transparency, and collaboration to ensure the highest level of public protection.
- The EMS Compact provides a unique opportunity to support members of the military by providing a clear and timely pathway for EMS Licensure.

DIRECTOR'S REPORT

Director Kelly Garcia provided a brief update on a couple of items.

Next week HHS expects to launch our new website. This will be a technical lift designed for public usability, with easier navigation. It will also be inclusive of all HHS areas with functionality the top priority.

HHS is on the tail end of system alignment, reviewing the components of all divisions and recommendations that have come in. A plan will be in place soon. She expressed her gratitude to providers and stakeholders.

Facilities have been holding more town halls to get feedback and to make sure the parties we work with have a full understanding of what is being done like shifting the philosophy of treatment for youth in facilities. We just received the findings report on the changes we have made this far and it was very good and are very close to compliance.

HHS is finalizing the sales of farmland at our campus. The land at our Cherokee facility is within the town. We will host a town hall regarding the sale of that property. We know that there isn't enough housing in this area, so we want to be good stewards of this land and the sale so that it can be used to better the community.

Liz Matney has been on the road holding Medicaid hometowns. The council is encouraged to attend these.

UNIFORM REGULATORY ANALYSIS REVIEW

Joe Campos, Compliance Division, Admin Rules Coordinator, gave an overview of what was reviewed Executive Order 10. This included making the language in the rules more accessible, updates to contacts and processes due to alignment, while not taking away from the nature and meaning of the rule. The Compliance division and legislative team did this review.

They are working with the subject matter experts and will present them to the Rules Committee and will share them at the public hearing on November 28, 2023. After the public hearing they will take feedback and make updates. This public feedback will be shared with the HHS Council. They will then be submitted into the RMS System with notice of intended actions.

Rules Being Reviewed:

- Chapter 441-8, Payment of Small Claims
- Chapter 441-11, Collection of Debt
- Chapter 441-13, Program Evaluation
- Chapter 441-122, Fiscal Oversight of the Early Childhood Iowa Initiative
- Chapter 441-200, Adoption Services
- Chapter 441-201, Subsidized Adoptions
- Chapter 441-203, Iowa Adoption Exchange

- Chapter 441-204, Subsidized Guardianship Program
- Chapter 641-1, Reportable Diseases, Poisonings and Conditions, and Quarantine and Isolation
- Chapter 641-2, Hepatitis Programs
- Chapter 641-7, Immunization and Immunization Education: Persons Attending Elementary or Secondary Schools, Licensed Child Care Center or Institutions of Higher Education
- Chapter 641-11, Human Immunodeficiency Virus (HIV) Infection and Acquired Immune Deficiency Syndrome (AIDS)
- Chapter 641-24, Private Well Testing, Reconstruction, and Plugging Grants to Counties
- Chapter 641-153, Smokefree Air
- Chapter 641-154, Medical Cannabidiol Program
- Chapter 641-177, Health Data
- Chapter 641-194, Nonpayment of State Debt
- Chapter 641-196, Emergency Medical Services Military Service, Veteran Reciprocity, and Spouses of Active-Duty Service Member
- Uniform Rules Regulatory Analysis (4)

Each legacy department merged into HHS as part of the government reorganization and maintained their own set of uniform rules. HHS proposes to keep one set of uniform rules for the combined department.

Existing uniform rule chapters:

- 17-2, 11, 13, 17, 18, 19
- 421-1, 2, 3, 4, 5, 6, 7
- 441-1, 3, 4, 5, 7, 9, 16
- 489-5
- 641-170, 171, 172, 173, 174, 175, 178
- 817-1, 2, 3, 5, 6

These rule chapters comprise the HHS uniform rules on agency procedure. HHS seeks to repeal all uniform rules that exist for a department or program merged into the Department as part of the government reorganization and to re-promulgate one set of uniform rules for HHS under agency number 441.

Joe reviewed each. How to move waivers, rescinding old waivers 441-8 moved into 441-9 this update was to reflect that to let them know they are under Public Health.

Proposed Actions:

ARC 7062C, TYPE-O AMENDING 441-1.8 RESCIND AND RESERVE RULE

Notice of Intended Action, Proposing Rulemaking Related to Agency Reorganization and Providing an Opportunity for Public Comment, the following rulemaking action is proposed:

- ITEM I. Rescind and reserve rule 421—1.2(17A,216A).
- ITEM 2. Rescind and reserve rule 421—1.3(17A,216A).
- ITEM 3. Amend rule 421—1.4(17A,216A) as follows:

421—1.4(17A,216A) Mission. The <u>department's mission related to human rights</u> is to ensure basic rights, freedoms, and opportunities for all by empowering underrepresented lowans and eliminating economic, social, and cultural barriers. The department helps individuals attain economic independence by ensuring access to

government services and advancing educational achievement and entrepreneurial success consistent with their aspirations.

ITEM 4. Amend rule 421—1.5(17A,216A) as follows:

421—1.5(17A,216A) Contact information.

Requests for assistance, information, inquiries, submissions, petitions, and other communications may be directed to the department as follows: The office is located at 321 E. 12th Street, Des Moines, Iowa 50319. The main telephone number is (515)242-5655. The fax number is (515)242-6119. Regular office hours are Monday through Friday, 8 a.m.to 4:30 p.m., excluding legal holidays. The department's website is <a href="https://doi.org/10.1001/jhs.com/hs.c

ITEM 5. Amend rule 421—1.6(216A) as follows:

421—1.6(216A) Human rights board. The authority, duties and composition of the human rights board are specified in Iowa Code section 216A.3.

ITEM 6. Rescind and reserve 421—Chapter 2.

ITEM 7. Rescind and reserve 421—Chapter 3.

ITEM 8. Rescind and reserve 421—Chapter 4.

ITEM 9. Rescind and reserve 421—Chapter 5.

ITEM 10. Rescind and reserve 421—Chapter 6.

ITEM 11. Rescind and reserve 421—Chapter 7.

Overview by Sarah R Reisetter: This is about updating language to make it understandable and clear while not changing the nature of the rule. These are legacy.

A motion was made by Jack Willey to approve and seconded by Dr. Monica Jindal MOTION UNANIMOUSLY CARRIED

- ARC 7063C, Notice of Intended Action, Proposing Rulemaking Related to Agency Reorganization and Providing an Opportunity for Public Comment, the following rulemaking action is proposed:
 - ITEM I. Rescind and reserve rule 421—1.2(17A,216A).
 - ITEM 2. Rescind and reserve rule 421—1.3(17A,216A).
 - ITEM 3. Amend rule 421—1.4(17A,216A) as follows:
 - 421—I.4(17A,216A) Mission. The <u>department's mission related to human rights</u> is to ensure basic rights, freedoms, and opportunities for all by empowering underrepresented lowans and eliminating economic, social, and cultural barriers. The department helps individuals attain economic independence by ensuring access to government services and advancing educational achievement and entrepreneurial success consistent with their aspirations.
 - ITEM 4. Amend rule 421—1.5(17A,216A) as follows:
 - 421—1.5(17A,216A) Contact information.

Requests for assistance, information, inquiries, submissions, petitions, and other communications <u>related to human rights</u> may be directed to the department as follows: The office is located at 321 E. 12th Street, Des Moines, Iowa 50319. The main telephone number is (515)242-5655. The fax number is (515)242-6119. Regular office hours are Monday through Friday, 8 a.m.to 4:30 p.m., excluding legal holidays. The department's website is <a href="https://historycommons.org/historycommons

ITEM 5. Amend rule 421—1.6(216A) as follows:

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ITEM 7. Rescind and reserve 421—Chapter 3.
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- ITEM 8. Rescind and reserve 421—Chapter 4.
- ITEM 9. Rescind and reserve 421—Chapter 5.
- ITEM 10. Rescind and reserve 421—Chapter 6.
- ITEM 11. Rescind and reserve 421—Chapter 7.

Overview by Sarah R Reisetter: Updating mission language, contact for the department, duties of Human Rights Boards, decision of other things that were already in code. Taking out redundancy. Reflecting any changes of duties due to alignment and the Human Rights Board.

A motion was made by Samantha Rozeboom to approve and seconded by Sandra McGrath MOTION UNANIMOUSLY CARRIED

 Arc 7064C, Notice of Intended Action, Proposing Rulemaking Related to Agency Reorganization and Providing an Opportunity for Public Comment, the following rulemaking action is proposed:

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ITEM I. Rescind and reserve 641—Chapter 170.
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- ITEM 2. Rescind and reserve 641—Chapter 171.
- ITEM 3. Rescind and reserve 641—Chapter 172.
- ITEM 4. Rescind and reserve 641—Chapter 173.
- ITEM 5. Rescind and reserve 641—Chapter 174.
- ITEM 6. Rescind and reserve 641—Chapter 175.
- ITEM 7. Rescind and reserve rule 641—176.1(135,17A).
- ITEM 8. Rescind and reserve rule 641—176.2(135,17A).
- ITEM 9. Rescind and reserve rule 641—176.3(135,17A).
- ITEM 10. Rescind and reserve rule 641—176.4(135,17A).
- ITEM 11. Rescind and reserve rule 641—176.5(135,17A).
- ITEM 12. Rescind and reserve rule 641—176.8(135,17A).

Overview by Sarah R Reisetter: Legacy public health rules. They are all covered in other places, we are taking out the redundancies.

A motion was made by Samantha Rozeboom to approve and seconded by Sandra McGrath MOTION UNANIMOUSLY CARRIED

 Arc 7065C, Notice of Intended Action, Proposing Rulemaking Related to Agency Reorganization and Providing an Opportunity for Public Comment, the following rulemaking action is proposed:

ITEM I. Amend subrule I.I(I) as follows:

- **I.I(I)** *Location.* The child advocacy board is located in the Lucas State Office Building, 321 East 12th Street, Des Moines, Iowa 50319-0083; telephone (866)448-4608. Office hours are 8 a.m. to 4:30 p.m., Monday through Friday, except on state holidays. The child advocacy board is created within the department of <u>health</u> and human services.
- ITEM 2. Amend subrule **I.I(2)**, definitions of "Department" and "Person or court responsible for the child," as follows:
 - "Department" means the department of health and human services.

"Person or court responsible for the child" means the department, including but not limited to the department of <u>health and</u> human services, agency, or individual who is the guardian of a child by court order issued by the juvenile or district court and has the responsibility of the care of the child, or the court having jurisdiction over the

child.

ITEM 3. Amend subrule 2.1(1) as follows:

2.1(1) Membership and terms. The child advocacy board is created within the department of health and human services. The state board consists of nine members appointed by the governor, subject to confirmation by the senate and directly responsible to the governor. One member shall be an active court appointed special advocate volunteer, one member shall be an active member of a local citizen foster care review board, and one member shall be a judicial branch employee or judicial officer appointed from nominees submitted by the judicial branch. The appointment is for a term of four years that begins and ends as provided in Iowa Code section 69.19. Vacancies on the state board shall be filled in the same manner as original appointments are made. An employee of the department of health and human services, an employee of a child-placing agency, an employee of an agency with which the department of health and human services contracts for services for children under foster care, a foster parent providing foster care, or an employee of the district court is not eligible to serve on the state board. However, the judicial branch employee or judicial officer appointed from nominees submitted by the judicial branch in accordance with Iowa Code section 237.16(1) shall be eligible to serve on the state board.

ITEM 4. Amend subrule 2.2(1) as follows:

2.2(I) The <u>director</u> appoints an administrator for the child advocacy board. The administrator is responsible for the ongoing administration of the state and local boards' activities and of the court appointed special advocate program.

ITEM 5. Amend subrule 3.2(2) as follows:

3.2(2) A person employed by the department of <u>health and</u> human services or the judicial department, an employee of an agency with which the department of <u>health and</u> human services contracts for services for children under foster care, a foster parent providing foster care, or a child-placing agency shall not serve on a local board. ITEM 6. Amend subrule 4.1(1), definition of "Administrator," as follows:

"Administrator" means the person selected by the <u>director</u> to lead, direct and manage the staff and programs established by the board.

ITEM 7. Amend paragraph 4.2(3)"g" as follows:

g. Not be a person employed by the state board, the department of <u>health and</u> human services, the district court, or an agency with which the department of <u>health</u> and human services contracts for services for children.

ITEM 8. Rescind and reserve 489—Chapter 5.

Overview by Sarah R Reisetter: Clean-up for Child Advocacy Board, to make uniform rules, and update of department names and who is reporting structure.

A motion was made by Dr. McFarlane to approve and seconded by Sandra McGrath MOTION UNANIMOUSLY CARRIED

Rebecca Peterson asked that public comments on the Rules be shared with the Council in the future.

MCO QUARTER 4 REPORT

Kurt Behrens, Management Analyst, Medicaid

• Kurt demonstrated the dashboard (https://hhs.iowa.gov/lowa-Medicaid-dashboard), how it is used and the new quarter 4 data.

- Molina is not included here. That will start in January.
- You can see the COVID Unwind enrollment, there is a drop. They will be adding an MCO filter so that you can see the data by timeframe.
- You can see enrollment, coverage group, and many other factors.
- Kurt walked through facilities waiver data. The data is in sync with the past month, but you can click to get the historical data. With a warning that when using the filters, if the data goes below 20, it will be suppressed.
- Quality Scores, we tie in with the national scores that are not out yet, so we do not have that updated right now.

BUDGET BILL REWRITE

Jess Benson, Finance

- Presentation attached.
- HHS is restructuring the budget bill. This includes mapping cost using "cost center numbers" to division in the agency as well as reviewing and updating language.
- In the presentation, the accounting system pyramid will help track and report funds used in the future. The appropriations bill is very large and often added on to. It needs to be cleaned up and aligned to our new structure. Some of the ways they will do this are:
- I. Combine administrative funds (4 to 1)
- 2. Combine Facilities funds (7 to 1) they can then be moved between facilities as needed. There will be full transparency.
- 3. This effort will remove the 'notwithstanding' language, make it more straightforward.
- 4. It will include transfer language, putting the funding where it is actually going, rather than using transfer authority as often. This will make it much more clear how funds are used.
- 5. There is working being done around rate cleanup. If a group hasn't received a rate increase, currently the group is not listed in the bill. This doesn't reflect all the providers this actually coverd. This will be cleaned up.

The timeline: HHS will submit this on November 30, 2023, and revise throughout December, January, and February during session. This will not be voted on by the council. This is presentation is to keep Council updated.

COUNCIL UPDATES

Rebecca opened it up to all. They felt this was a lot of information to take in in one meeting. The Council appreciates everyone's efforts. Jack Willey stated that he appreciates Dr. Monica lindal's questions and insights.

ADJOURNMENT

A motion was made by Jack Willey and seconded by Dr. Monica Jindal to adjourn the meeting. Meeting adjourned at 11:49 a.m.

Respectfully Submitted by: Laura Myers Council Secretary

ACTION ITEMS:

Sarah Reisetter, Chief of Compliance, said she will send a timeline of the whole process to the council for clarity. This will come later next week.

Public feedback on the Rules updates will be shared with the HHS Council.

The subcommittee will give a quick update at the start of each upcoming Council meeting.