



COUNCIL ON HEALTH AND HUMAN SERVICES
MEETING MINUTES
MARCH 14, 2024

Table with 2 columns: COUNCIL MEMBERS and HHS STAFF. Lists names of council members and HHS staff with checkmarks indicating attendance.

Table with 1 column: EX-OFFICIO LEGISLATIVE MEMBERS. Lists names of legislative members.

Call To Order

Council Chair, Rebecca Peterson called the Council meeting to order at 10:00 a.m. via zoom teleconference.

Roll Call

All council members, apart from Andrew Allen, were in attendance. No Ex-Officio members were present.

Sam Wallace moved to approve the February minutes and Dr. Monika Jindal seconded this. The council members said "aye" no changes or issues.

HHS Council Subcommittee Report: Substance Use and Problem Gambling Licensure

Sandra McGrath reported that they have approved 2, two-year licensures, 2 deemed status, and handled 2 Complaint investigations with no further action needed.

State Medical Director's Report: Dr. Robert Kruse

Measles Update

- As of March 7, 2024, a total of 45 measles cases were reported by 17 jurisdictions: Arizona, California, Florida, Georgia, Illinois, Indiana, Louisiana, Maryland, Michigan, Minnesota, Missouri, New Jersey, New York City, Ohio, Pennsylvania, Virginia, and Washington.

- Measles is a highly contagious viral disease characterized by symptoms such as fever, cough, conjunctivitis, and a characteristic rash.
- Due to its airborne transmission and high infectivity, measles poses a significant public health risk, particularly among unvaccinated populations.
- About 1 in 5 unvaccinated people in the U.S. who get measles are hospitalized.
- The last time Iowa had a measles case was in 2019.
- For prevention, we recommend routine childhood vaccination with the first dose of MMR vaccine given on or after the child's first birthday with the recommended age range from 12–15 months.
- The second dose is usually given when the child is 4–6 years old, or around school entry age.
- The Public Health team is planning to provide further information and education to our external partners as we continue to monitor the situation in surrounding states.

Community Medicine Rotation

- We have recently established rotation experiences for Broadlawns Family Medicine Residency as part of their community medicine rotation and starting to discuss rotations with the Internal Medicine program at Iowa Methodist Medical Center.
- Prior to the pandemic we had a more formal rotation with medical residency programs, and we plan to establish a broader experience as a rotation when we return back to the Lucas State Office Building.
- Currently part of the rotation experience includes sitting in on our joint Center for Acute Disease Epidemiology and State Hygienic Labs call to discuss current reportable diseases and outbreak investigations.
- The other rotation experience is a day with the Medical Examiner's Office where they observe an autopsy and learn how cause and manner of death are determined.
- Traditionally we have had rotations for medical residents in the Division of Public Health, but we are considering rotation experiences with other Divisions and with students in other education disciplines.

Maternal Health Data Sense Making Day

- On Friday March 1, HHS held a daylong meeting to review Maternal Health strategy areas of focus were, data and cross divisional collaboration.
- Maternal health needs an ever-evolving response - and requires us to build a comprehensive team.
- This was a large environmental scan of the existing data associated with maternal health outcomes.

Council Discussion

Regarding the Measles outbreak, there is no issue of vaccine failure. Children of school age are required to have the 2nd vaccination before attending school. Should we have a message that goes out to let parents know that they should get the 2nd vaccine at age 4 so they are prepared for school.



With the first shot they are 92% effectively immunized and it goes up to 97% with the 2nd shot.

Presentation: Maternal Health Update State Medical Director, Dr. Robert Kruse and Erin Drinnin, Division Director of Community Access

Alliance for Innovation (AIM) Program:

- We are partnering with UIHC. The work of AIM is focused on reducing preventable maternal deaths and severe maternal Morbidity (SMM) cardiac arrest heart failure eclampsia, patient safety bundles. Coaching, training, and on the ground technical assistance.
- This includes 8 safety bundles, based around major issues that effect maternal health.
- The first bundle was a big success. Cesarean (C-sections) birth rates dropped (comparing 2020 with 2022,) and has also significantly reduced the number of “near miss events.”

Family obstetrics fellowship program:

- Senate File 561 State-funded family medicine fellowship fund. This program requires physicians to complete medical residency, a one-year obstetrics fellowship, and engage in full-time family medicine obstetrics practice for five years in rural or underserved areas of Iowa.
- This effort helps to recruit physicians, reimburse hospitals, and provides woman in rural areas access to medical assistance. 40% of Iowans live in rural areas.
- Grinnell regional medical center will be the first to participate. Then St. Anthony Regional Hospital and Cass Health.
- It will expand access to maternal health care, increase access to perinatal care and OB outreach clinics, postpartum and lactation support, and home visiting programs.
- The benefits to Iowa: It will expand access and reduce barriers to care.

More Options for Maternal Support (MOMS) Program:

- Janee Harvey, Director of Family Wellbeing and Protection, is the lead on this.
- A Provider Request for Proposal (RFP) was released. There were 9 responses, and 4 providers were selected. Work is underway to build those contracts out now.
- There are 11 services including wrap around supports.
- Early intervention and support are key, getting upstream, connecting with families and hopefully preventing future need for foster care and avoid the difficulties families have that may get them into a bad situation.
- Preparing the OB units on assessing risk factors.
- Pregnant woman who previously have had a C-section should be counseled on the statistics for having a successful vaginal birth.

- Factors such as gestational diabetes, which causes larger babies that are difficult to naturally birth.
- Work with providers to know how to counsel their patients.

Council Discussion

- Should Medicaid continue automatically for a month or two after pregnancy?
- What about those who do not have a SS#?
- Responses: All people should be given medical assistance when needed. However, they are not eligible for Medicaid. They may be asked to pay out of pocket. The Affordable Healthcare Act is an option for them.
- California and (maybe) New York have pseudo-Medicaid systems, they use for undocumented individuals (this is required to come from state not federal funds.)
- Even those who are insured may not get the proper care due to inadequate insurance or premiums they can't afford.

Regulatory Analysis Review: Cassie Tracy, Compliance Division, Admin Rules Coordinator

Foster care placement, establish foster parents bill of rights.

It will be published in March and will come back to the council in May.

General changes:

- To notify individuals of training the licensee could use.
- New duties for foster parents.
- Requiring a check in with the child within 2 weeks of placement and at least once a month for the duration of the placement.
- Provide opportunities for children to participate in appropriate to age activities.

[Iowa Medicaid Dashboard](#) and [Nursing Home Facility Dashboard](#) Update and overviews of the HHS Website > [Medicaid Performance and Reports webpage](#) and [Social Determinants of Health \(SDOH\) Dashboard](#): Kurt Behrens and Joanne Bush, Managed Care Reporting & Oversight (MCRO)

Reviewing changes to the HHS website.

- Medicaid performance and reports page with links to all dashboards (Including archives.)
- Agency Dashboards / Medicaid performance and report page.
- Nursing home facility dashboard, showing Medicaid and Medicare facilities, with hard numbers, ratings, and occupancy. This shows, by county, the quality and number of beds.
- The Social determinates of Health (SDOH) Dashboard has been cleaned up.
 - 300,000 surveys have been done targeting populations that show need.
 - Facilities historical information is included.
 - Critical incidents are now listed.
 - Outcomes and or quality scores (national average vs state.)
 - You can look up vaccination activity.



Council Updates

Items requested for review at the next Iowa HHS Council Meeting.

- Mental Health Redesign overview by Director Garcia.
- Summary overview of coverage in other programs at HHS, that are serving pregnant moms (like prenatal insurance coverage.)
- Measles update (investigate and dispelling the belief that undocumented people are causing the uptick in Measles cases)
- Share what support is available for undocumented patients.
- The big package of rules (discussed at the November 2023 meeting) will be on the agenda for adoption in April. This package will be sent to the board as soon as possible, for review.

Adjournment

A motion was made by Jack Willey and seconded by Dr. Monika Jindel to adjourn the meeting. Meeting adjourned at 11:48a.m.

Respectfully Submitted by:
Laura Myers
Council Secretary