

Medical Assistance Advisory Council (MAAC) MEETING MINUTES May 16, 2024

CALL TO ORDER AND ROLL CALL

Angie Doyle-Scar, Division of Public Health and Co-chairperson of the MAAC, called the meeting to order at 1:00 p.m. Scar called the roll, attendance is reflected in the <u>separate</u> roll call sheet¹ and a quorum was achieved.

APPROVAL OF PREVIOUS MEETING MINUTES

The minutes from the February 22, 2024, meeting² were approved by the council.

IOWA HEALTH AND WELLNESS PLAN (IHAWP) PUBLIC NOTICE

Jessica McBride, Iowa Medicaid Project Officer of Compliance, presented on the <u>lowa</u> <u>Health and Wellness Plan (IHAWP) Public Notice</u>³. McBride noted that the Iowa Department of Health and Human Services (HHS) was seeking a five-year extension of the IHAWP, the current authority expires December 31, 2024. She explained that public hearings were being held to inform interested parties about the extension and to gather feedback. Information about the <u>public comment period for the IHAWP extension is</u> <u>available on the HHS website</u>⁴ and at any HHS local office.

The goals of the demonstration are to:

- Improve enrollee health and wellness through the encouragement of healthy behaviors and use of preventive services,
- Increase enrollee engagement and accountability in their health care and to
- Increase enrollee's access to dental care.

¹ <u>https://hhs.iowa.gov/media/14198/download?inline</u>

² <u>https://hhs.iowa.gov/media/14197/download?inline</u>

³ <u>https://hhs.iowa.gov/media/13401/download?inline</u>

⁴ https://hhs.iowa.gov/public-notice/2024-04-17/ihawp-extension



The legislature authorized the IHAWP to provide access to healthcare for uninsured, low-income lowans, using a benefit design intended to improve health outcomes, increase personal responsibility and lower costs. Three parts of this design include Healthy Behaviors, Cost Sharing and Non-Emergency Medical Transportation (NEMT). Healthy Behaviors are premium-free health care that is received by completing health risk assessments and wellness or dental exams. If these assessments and exams are not completed, a premium is charged in the second enrollment year. Cost sharing encourages people to seek care in the appropriate healthcare setting by charging an \$8.00 copay for non-emergency use of the emergency room (ER). A federal waiver requires that IHAWP enrollees are provided with NEMT. This aligns benefits with enabling legislation and is consistent with commercial insurance coverage.

Under the Dental Wellness Plan (DWP), Medicaid enrollees can access dental coverage, except for those covered through PACE, HIPP, presumptive eligibility, emergency-only coverage, the Medicare Savings Program, Medically Needy or periods of retroactive coverage.

The Retroactive Eligibility Waiver provides up to three months of Medicaid coverage retroactively for children, pregnant women and nursing facility residents. For all other Medicaid populations, coverage is effective the first day of the month in which an application is filed.

McBride ended her presentation by highlighting public comment opportunities.

IOWA SOLUTIONS FOR INDEPENDENCE AND LONGEVITY (IA SAIL) SURVEY ANNOUNCEMENT

Emily Eppens, Behavioral Health and Aging & Disability Services Communications Manager, presented on the <u>lowa Solutions for Independence and Longevity (IA SAIL)</u>⁵. IA SAIL is a solution for aging and aging with disabilities in lowa. The first phase of the solution is to gather information and feedback from people living in lowa to draft a plan. The next phases include preparing to launch the plan and monitoring ongoing progress after the plan is live.

The plan that will be drafted at the end of the first phase of this project is called the Multisector Plan on Aging (MPA). The MPA is a cross-sector, state-led strategic

⁵ <u>https://hhs.iowa.gov/media/13426/download?inline</u>



planning solution for aging and aging with disabilities across the lifespan. The MPA will provide guidance and goals to meet over the next 10 years in Iowa.

At the end of her presentation, Eppens requested that meeting participants provide their input by taking the IA SAIL Community Survey. A QR code for the survey, <u>link to the survey</u>⁶ and link to the <u>IA SAIL webpage</u>⁷ on the HHS website were provided on the last slide of Eppens' presentation.

MAAC Updates

Emma Nutter, Iowa Medicaid Communications Specialist and MAAC Recording Secretary, presented on <u>updates related to the MAAC</u>⁸.

The Consolidation of Hawki and MAAC

According to <u>Senate File 2385</u>⁹, the <u>Hawki (Healthy and Well Kids in Iowa) Board</u>¹⁰ will be consolidated into MAAC, and MAAC will assume the Hawki Board's duties effective July 1, 2024. The bill is a part of Gov. Kim Reynold's initiative to eliminate unnecessary and redundant boards and commissions.

How CMS-2442-F Will Impact MAAC

CMS's New Final Rule (CMS-2442-F) had several mandates that impact MAAC. First, the Final Rule mandated the creation of a Beneficiary Advisory Council (BAC). This council must be made up of current or former Medicaid beneficiaries or those with direct experience supporting Medicaid beneficiaries (e.g., family members, caregivers, etc.). A percentage of this council will need to be on the MAAC:

- 2025-2026 10%
- 2026-2027 20%
- 2027 and after 25%

Additionally, the BAC must meet separately from the MAAC, and only the MAAC will need to produce an annual report.

⁶https://forms.office.com/pages/responsepage.aspx?id=TXssjVoIF0aFNjinbRmw2ruc6CJp90pKsjRLxzSA QPtUQzA0V0k3QjRUT0Ew0FRRNkxJSkQ1Qk5XTi4u&origin=lprLink

⁷ https://hhs.iowa.gov/programs/programs-and-services/aging-services/ia-sail

⁸ https://hhs.iowa.gov/media/13473/download?inline

⁹ https://www.legis.iowa.gov/legislation/BillBook?ba=SF%202385&ga=90

¹⁰ https://hhs.iowa.gov/advisory-groups/hawki-board



The Iowa Medicaid team is completing a review of all the final rule provisions and impacts to the Medicaid and CHIP programs. Implementation for this section of the rules is July 1, 2025, with additional requirements for transition effective July 2027. In the coming months, analysis will be completed on the specific section of the regulation for the new MAC and BAC requirements. Consideration will be given to current State Law and administrative rules for MAAC. Updates will be provided on the analysis and impacts identified at the MAAC at future MAAC meetings.

MAAC Board Updates

Nutter requested that MAAC Board members review the SFY24 MAAC members list, if they had not already.

Nutter announced that the three professional and business entity seats on the MAAC Board were up for re-election. She explained that a voting ballot (Microsoft Form) would be emailed to current representatives of professional and business entities on Friday, May 17, 2024. Representatives will have 30 days – till 11:59 PM on June 16 - to complete and submit the ballot. Nutter said that the election results would be announced via email in June and that the results would be re-announced at the next MAAC meeting. She also emphasized that, when voting, those eligible to vote should only select three boxes on the Microsoft Form.

Nutter also announced that there will be two open public representatives' seats on the MAAC Board on June 30, 2024. She then explained how people can apply for the seat via the Iowa Talent Bank website, and that an update on the status of the open seats would be provided at the next MAAC meeting.

Lastly, Nutter summarized and reviewed the MAAC timeline and provided links to helpful resources.

Jason Haglund, Co-chairperson of the MAAC, encouraged meeting participants to reach out to people they think could be interested in and would be a good fit for the MAAC Board and/or future BAC Board.

Following the presentation, the question of if there are current MAAC members who are either on Medicaid or are the caregiver of someone on Medicaid can serve on the future BAC Board was raised. The question of whether Hawki members would be able to have



any voting and/or special advisory role on the MAAC Board in the future, given the upcoming consolidation of Hawki into MAAC, was also raised. These questions, along with many others, will need to be considered when implementing the changes caused by Hawki consolidating into MAAC and the upcoming BAC Board. Doyle-Scar also noted that there are several Hawki Board members, including herself and Mary Nelle Trefz, who are on the MAAC Board and will be able to help answer the questions raised by the consolidation in particular.

MANAGED CARE ORGANIZATION (MCO) QUARTERLY REPORT AND AGENCY DASHBOARDS

MCO Quarterly Report and Iowa Medicaid Dashboard

Kurt Behrens, Managed Care Reporting and Oversight (MCRO), reviewed the Managed Care Organization (MCO) Quarterly Report for Quarter 2 State Fiscal Year 2024 (Q2 SFY 24). All information available in the quarterly report will be available in some form in the <u>lowa Medicaid Dashboard</u>¹¹ which can be accessed on the <u>Agency Dashboards</u>¹² webpage.

Q2 SFY 24 covers the period from October 2023 to December 2023. Additionally, this is the second quarter that data on Molina Healthcare (MOL), the newest managed care organization (MCO), has been published.

Behrens explained that the Iowa Medicaid Dashboard, Medicaid & Covid Unwind Dashboard, Social Determinants of Health (SDOH) Dashboard and Nursing Home Facility Dashboard can be found on the <u>Medicaid Performance and Reports webpage</u>¹³ on the HHS website.

Behrens noted how there had been recent news articles about Medicaid enrollment, and how these articles and the <u>Medicaid & Covid Unwind Dashboard</u>¹⁴ lack some of the context the Iowa Medicaid Dashboard provides. The Covid Dashboard, unlike the Iowa Dashboard, combines medical and dental enrollment data and does not allow the user to filter by medical or dental enrollment data. Additionally, in the "PHE Annual Review Outcomes" section on the Covid Dashboard, the final discontinuances shown on the

¹¹<u>https://app.powerbigov.us/view?r=eyJrljoiMmlyMTQxNzltZmlwNS00ZDI2LThhMDAtZGI1MzZhNmNiMmM3liwidCl6ljhkMmM3YjRkLTA4NWEtNDYxNy04NTM2LTM4YTc2ZDE5YjBkYSJ9</u>

¹² https://hhs.iowa.gov/dashboard_welcome

¹³ <u>https://hhs.iowa.gov/about/performance-and-reports/medicaid-reports</u>

¹⁴<u>https://app.powerbigov.us/view?r=eyJrljoiNzU5ZTM3ZWltNTFhOC00MmE2LWJmMDEtYjY3YjljNjJhOD</u> IyliwidCl6ljhkMmM3YjRkLTA4NWEtNDYxNy04NTM2LTM4YTc2ZDE5YjBkYSJ9



chart do not account for things such as a member re-applying to a different Medicaid program, if a member was put into a different program, etc.

The Iowa Dashboard, in comparison, offers far more context because of its filter features. For example, in the "Medical Enrollment by Member Age – MCO & FFS" section, the user can filter the enrollment data by date, health plan type, coverage group type, age group, gender, race and county.

In the "Historical Medical Enrollment – MCO & FFS" section in the Iowa Medicaid Dashboard, Behrens reviewed the enrollment numbers before the start of the COVID pandemic, during the pandemic and post the pandemic (SFY 2020 to SFY 2024). Behrens highlighted how, while historical medical enrollment increased from SFY 2020 to SFY 2023, enrollment has decreased from SFY 2023 to SFY 2024. The number of enrollments in SFY 2024 (718, 750 enrollments) are close to the number of enrollments in SFY 2020 (718, 027 enrollments).

In the "By Coverage Group/County" section of the Iowa Medicaid Dashboard, the user can see the expenditures of each member by age group and program (e.g., Hawki). Behrens references the news articles again, noting how the articles said there were fewer children/Hawki enrollees on Medicaid. Behrens noted that, while the number of Hawki enrollees dropped from 58,000 to 54,000 over four years, the Hawki program is not the only program children can be a part of. In fact, the "Kids (Age 0-18)" coverage group increased from 260,518 enrollees to 267,139 enrollees from March 2020 to December 2023.

Behrens noted that there had been an increase of grievances this quarter, however, that this was attributed to Molina's onboarding and the closing of the 90-day window of time that marked the end of the continuity of care. He said that by the next quarter, the number of grievances should level out.

On the "Outcomes – MCO & FFS" section of the Iowa Medicaid Dashboard, it was noted that much of the data in this section was pushed for by the Hawki Board. Behrens explained that the goal with the section was to make sure that data from all age groups was collected and made public. The team working on this section is looking at redoing the codes to accommodate the adult population as well.



The Iowa Medicaid Dashboard was launched in the July of 2023, and is now almost a year old. Given this, the dashboard team plans to review the codes.

TRUALTA CAREGIVER SUPPORT PRESENTATION

Kunal Parikh, Implementation Manager at Trualta Inc., presented on the <u>HHS portal for</u> <u>caregivers and case managers</u>¹⁵. Trualta is an interactive eLearning platform to help manage care for individuals at home. Lessons are quick and designed by experts in aging for informal caregivers (i.e., family members, friends, neighbors, etc.).

Trualta has taken steps to be as accessible to informal caregivers as possible. Lessons are private and accessible 24/7. Learning is offered in several formats: audio, video, interactive eLearning modules, some print materials, etc. Lessons are ADA (Americans with Disabilities Act) complaint, targeting a fifth grade reading level.

Key competencies Trualta covers include:

- Responding to behaviors,
- Safety and injury prevention,
- Managing symptoms,
- Navigating healthcare visits,
- Personal care,
- Supporting wellness,
- Future planning and
- Caregiver wellness.

Top conditions Trualta covers include:

- Aging,
- Alzheimer's and Dementia,
- Intellectual and Development Disabilities (IDD),
- Stroke,
- Diabetes,
- Parkinsons,
- Heart Health,
- Lung Health,
- Mental Health and
- Kidney Care.

¹⁵ https://hhs.iowa.gov/media/13402/download?inline



Trualta offers caregiver essential certifications as well. Certifications are structured and targeted learning to provide care effectively with expert tips and tricks to get the job done efficiently.

Competency-Based Trainings are hosted on the Trualta portal along with pre- and post-tests.

Trualta's platform was studied by the University of Florida, the results of this study were published in the *Journal for Alzheimer's & Dementia* in 2021.

For more information about Trualta, please see the <u>Learning Management System</u> (<u>LMS)¹⁶ webpage</u> on the HHS website.

Parikh clarified that Trualta is free to use. He also encouraged people to reach out to him via email – he posted his email address in the Zoom chat - if they had questions.

MEDICAID DIRECTOR'S UPDATE

Elizabeth Matney, Iowa Medicaid Director, provided an update on Medicaid's progress toward the implementation of a waiver redesign for Home and Community-Based Services (HCBS), slated for July 1, 2025. In preparation, Dir. Matney's team is calculating a detailed budget for this redesign, which will be crucial for the upcoming legislative session. Once finalized and vetted, this information will be shared broadly. After years of planning, the implementation phase of the waiver redesign is drawing near.

Concurrently, advancements are being made in the class action implementation plan stemming from a lawsuit regarding the over-institutionalization of children with serious emotional disturbances. This plan, which is nearing finalization, is focused on enhancing case management and developing a robust service package for these children, particularly those enrolled in Medicaid. A final settlement agreement is being negotiated and will engage focus groups over the summer to refine this implementation plan. HHS' efforts will emphasize case management, crisis prevention, quality management and system oversight, incorporating feedback from various stakeholders including child welfare, education and families with lived experience. Updates will be provided through

¹⁶ https://hhs.iowa.gov/programs/welcome-iowa-medicaid/provider-services/provider-trainings/lms



<u>Medicaid's monthly virtual town halls</u>¹⁷. Participation and feedback from the community is encouraged.

Recently, a legislative session concluded in which significant investments were secured from legislative partners. Notably, Medicaid received \$14.6 million for HCBS rate increases, and over \$2 million for mental health and behavioral health services. Additional funds were allocated for Psychiatric Medical Institutions for Children (PMIC) rate increases to reduce out-of-state placements, residential supported community living for children with intellectual or developmental disabilities and rate adjustments for community mental health centers and various therapy services. Dir. Matney highlighted the recent behavioral health redistricting and ADRC build-up bill signed by Gov. Reynolds. This legislation aims to standardize service access and quality across the state and ensure effective oversight of state funds. The goal is to develop a comprehensive, integrated system rather than operating in isolated segments. Continuous improvement and reflection will be crucial as Medicaid moves forward.

Di Findley, Iowa CareGivers, inquired about the impact of recent appropriations and rate increases on direct care and support worker wages. Dir. Matney intends for these rate increases to directly benefit care workers, who are crucial to Medicaid service provision. Medicaid has successfully increased wages in recent years and plans to continue this trend. There are a series of federal rule updates from late 2023 and early 2024, including streamlined Medicaid eligibility and requirements from the Consolidated Appropriations Act, which mandates continuous Medicaid coverage for children in detention. Additionally, new Department of Labor rules impact overtime pay thresholds, CMS access and managed care rules, which stipulate that a significant portion of payments must be passed to direct care workers. Some providers already meet these requirements, but others may need additional support. Dir. Matney is committed to implementing these rules effectively while minimizing administrative burdens for providers and aligning with HHS' continuous improvement efforts.

Dr. Dave Beeman, Iowa Psychological Association, voiced concerns about the inequities in school-based services and Medicaid reimbursement, particularly regarding paraprofessional support across different districts. He observed significant disparities in support levels, especially affecting larger districts with a high proportion of students of color and smaller, struggling districts. This inconsistency is compounded by the complexities of school budgets and Medicaid regulations. Dir. Matney recognized these issues and will work with the Department of Education and school districts to address them. Also under consideration is the expansion of Medicaid coverage to include

¹⁷ https://hhs.iowa.gov/programs/welcome-iowa-medicaid/public-meetings/medicaid-town-halls



services for students with 504 plans, not just those with Individual Education Programs (IEPs), to enhance equity in school-based services. Dr. Beeman's feedback will be considered as Medicaid continues to evaluate and improve.

MANAGED CARE PLAN (MCP) UPDATE lowa Total Care (ITC)

Stacie Maass, Vice President of legislative government affairs ITC, provided a brief update on ITC's recent activities. First, Maass commented on the busy legislative session, and congratulated the Department on getting many of its priorities passed, such as the Behavioral Health Alignment Bill. She also thanked the Department and all of ITC's collaborators who are all working to improve the Medicaid program and member care. Maass encouraged stakeholders to reach out to ITC if they had questions or things they wanted to discuss.

Maass touched upon the April 26, 2024, tornado disaster. Following the disaster, Gov. Reynolds issued a disaster proclamation for nine Iowa counties. In response to the disaster, ITC's Long-Term Services and Supports (LTSS) team began member outreach, including evacuating members in affected areas to safe locations. ITC's pharmacy director contacted pharmacies in Potawatomi County to inform them of flexibilities, such as allowing for early refills due to the disruption. Lastly, ITC's call center was prepared to handle increased requests and concerns from members in the impacted areas.

ITC's transportation pilot launched on March 1, 2024. The goal of the pilot is to improve NEMT services by addressing issues like driver shortages and last-minute service requests (e.g., urgent care visits, hospital discharges, etc.). From March 1 to May 10, 2024, 165 trips were provided to 89 members, helping to fulfill trips that might otherwise have been missed.

Central lowa Shelters and Services recognized ITC as a key community supporter at its Heroes for Homeless Gala. ITC contributed \$2.55 million to create housing command centers in Des Moines, Grinnell and Ottumwa, Iowa, and to develop a mobile app for addressing SDOH. The app is still in the testing phase; however, the plan is for the app to launch by the next MAC meeting in August.

Last September, ITC held a provider summit in Ottumwa, Iowa. ITC plans to hold four more provider summits:



- June 26, 2024 Waverly, Iowa
- July 23, 2024 Perry, Iowa
- August 8, 2024 Sioux City, Iowa
- September 11, 2024 Atlantic, Iowa

To address SDOH, ITC is focusing on ensuring that referrals for SDOH services are completed and tracked. ITC uses Find Help (a vendor) to connect members with resources but are working on better tracking to confirm that members receive the services. Additionally, ITC is educating providers and community organizations about the functionality of Find Help and using QR codes for easier access to resources.

After holding four events last year, ITC will host ten community health fairs in 2024. ITC will also collaborate with community organizations, libraries, health centers and Hy-Vee (which donates fresh produce) to host these fairs. So far,...

- Three events have been held
 - Two in Des Moines, Iowa
 - One in Fort Dodge, Iowa
- Over 1,400 people attended the events
- Food was distributed
 - Over 27,000 pieces of produce
 - Over 90 pounds of jalapeños
 - Over 750 pounds of brown rice

ITC has also distributed over 800 non-perishable children's meals and bags as well as distributed donation items for children like wipes, diaper creams, baby shampoos and hand-crocheted baby hats from ITC's crochet club.

Wellpoint (WP) (formerly known as Amerigroup)¹⁸

John McCalley, Health Equity Director WP, provided a brief update on <u>WP's recent</u> <u>activities in many lowa communities</u>¹⁹. Some of these activities include:

- Des Moines, Iowa: WP awarded Ellipsis a grant that supports short-term respite for caregivers of individuals with lived experiences
- Iowa City, Iowa: WP provided a grant to support job training for youth aged 16 to 21 at Jabez Café, a café which supports immigrants with special needs

¹⁸ Note: During the meeting, Wellpoint's presentation was following the MCO Quarterly Report and Agency Dashboards presentation and before the Medicaid Director's Update. This is because the meeting was running ahead of schedule. For the sake of organization and clarity, the notes from Wellpoint's presentation will remain in the MCP Update section.

¹⁹ <u>https://hhs.iowa.gov/media/13574/download?inline</u>



- Durant, Iowa: In the Muscatine County area, WP worked with the local library and community center to create a food pantry to address food insecurity
- Oskaloosa, Iowa: WP contributed to Healthy Kids Day
- Council Bluffs, Iowa: WP volunteers served at holiday and summer drives

Additionally, WP has supported over 200 food pantries across 55 counties.

WP has spent thousands of dollars to sponsor the vital work of Iowa associations. Some of these sponsorships include:

- The Iowa Association of Community Providers Conference,
- The Iowa Primary Care Association Conference,
- The Governor's Conference on Substance Use and
- The Iowa Mental Health Counselors Association Conference.

WP will also be sponsoring the upcoming Iowa Community Action Association Conference and Association of People Supporting Employment First Iowa Conference.

Molina Healthcare (MOL)

Nafissa Egbuonye, Associate Vice President of Growth and Community Engagement MOL, provided a brief update on MOL's recent activities.

First, Egbuonye highlighted the LTSS Stakeholder Advisory meeting that was held on May 15, 2024, at the Cedar Rapids at the Cedar Rapids African American Museum.The meeting addressed community activities to reduce isolation for individuals with disabilities.

Next, a few of MOL's key partnerships were highlighted. MOL has partnered with...:

- The lowa Jobs for America's Graduates (IJAG) to promote youth workforce advancement
- The Deltas in Des Moines to host a Black Women's Health Summit
- The lowa Caregivers Association to support caregivers through retreats and education about MOL's value-added benefits
- The Iowa Head Start Association to launch events in six counties to provide shoes, health education and care gap identification for families
- Amani and All In Grocers to address food insecurity in Black Hawk County, Iowa, initiatives include providing food boxes and culturally relevant nutrition education, especially for women of color and domestic abuse survivors



- Des Moines Public Schools to engage bilingual family liaisons to improve understanding of Medicaid services and collaborate on community events
- Bureau of Refugee Services to launch a video featuring a refugee member's experience with Medicaid
- EveryStep to work on improving interpretation services and culturally responsive home visits for maternal health programs

MOL has and will support many community events. MOL supported both the Heroes for the Homeless Gala and the ChildServe Gala. On June 14, 2024, MOL will host a dance for members with disabilities at the Muscatine YMCA. In Keokuk, Iowa, MOL will sponsor a "Magical Prom Night" for those in the community with special needs.

The past few months had and the next few months will have many days, weeks and months of holidays and observances, many of which MOL did and will recognize. For Nursing Home Week, MOL held events to uplift nursing home residents, such as a tiedye T-shirt event. MOL will participate in Pride Month events across lowa, and they will also participate in World Refugee Day and Juneteenth events across lowa. To strengthen relationships with and further support Indigenous populations, MOL will attend an upcoming powwow.

Lastly, MOL is working with the University of Iowa Health Care Center, HHS, and others on the Echo Project. The goal of the project is to provide education to direct care professionals with a bi-directional learning approach.

PREPAID AMBULATORY HEALTH PLAN (PAHP) UPDATE Delta Dental (DD)

Nicole Miller, Government Programs Manager DD, provided a brief update on DD's recent activities. Miller began by reviewing DD's recent community outreach, DD...:

- Distributed oral health supplies at events, including an Iowa Head Start Project event,
- Sponsored and attended the Baby Boom event at Valley West Mall,
- Participated in the Iowa Dental Association Conference and
- Attended a Senior Health Fair in Grinnell, Iowa.

In 2023, DD contributed \$4.1 million to 261 organizations to address oral and overall health needs. Additionally, DD donated 316,000 toothbrushes to Iowa schools, clinics, etc.



DD is working with the three MCOs to track and address dental conditions presenting in ERs. The goal of this project is to ensure timely dental care and prevent recurring ER visits.

Lastly, DD is co-hosting a webinar on May 21, 2024. The webinar will be about preventive dental care, particularly for Medicaid patients, and promoting fluoride varnish applications throughout Iowa.

MCNA Dental

Nicole Cusick, Provider Relations Manager MCNA Dental, provided a brief update on MCNA's recent activities. MCNA's new contract will be effective July 1, 2024. MCNA is preparing by reviewing expectations and planning accordingly.

MCNA's provider relations and network development teams recently attended the Iowa Dental Association and Iowa Dental Hygienist Association Annual seminars, where MCNA made connections with providers, added new ones to their network and addressed difficulties practices might be experiencing. MCNA also provided direct contact information to office staff for easier communication and support.

Lastly, MCNA has revamped their website to improve usability, including new features for electronic communication that direct inquiries to the appropriate department.

OPEN DISCUSSION

Senate File 2251

Dr. David Carlyle, Iowa Academy of Family Physicians, provided the MAAC with information on Senate File 2251, which was signed into law on May 8, 2024. The bill extended postpartum coverage from 60 days to 12 months for people who've had a child. While Carlyle praised this aspect of the bill, he explained that the income eligibility threshold for infants and pregnant women was changed from 375% to 215%. Newly discovered pregnant women in this coverage gap cannot immediately access Medicaid and are not eligible for market-based insurance outside open enrollment, even though they might meet the 400% eligibility for the market exchange. This coverage gap affects approximately 1,260 pregnant women and their unborn children.

Three potential solutions that were discussed to address this problem were:

Changing federal regulations to make pregnancy a qualifying life event (QLE),



- Supporting a federal bill (i.e., the "Healthy Moms Bill") which designates pregnancy as a QLE or
- Raising the Medicaid eligibility threshold from 215% to 300% of the federal poverty limit (FPL) to reduce the number of women falling through the coverage gap.

Dr. Beeman raised the question about whether Medicaid is considered health insurance coverage, especially in the context of losing coverage. It was clarified by Marcie Strouse, Public MAAC member, that Medicaid is indeed considered qualifying insurance coverage, unlike short-term plans or indemnity plans which are not. Before the Affordable Care Act (ACA), there were different options like high-risk pools for those denied coverage, but now there are gaps in coverage due to new rules.

By the end of the meeting, the following action items were identified:

- Evaluating the impact of Medicaid eligibility changes and the gaps they create,
- Considering recommendations for addressing these gaps in future meetings,
- Brining MAAC recommendations to HHS and
- Transitioning the Hawki Board's duties to MAAC following the consolidation.

ADJOURNMENT

Meeting adjourned at 3:46 p.m.

Submitted by, Emma Nutter and Nell Bennett Recording Secretaries en