



Meeting Agenda

Division	Iowa Medicaid Quality Improvement Organization (QIO)		
Meeting Title	Clinical Advisory Committee (CAC)		
CAC Chair	Bill Jagiello, DO		
Facilitator	Heidi Weaver		
Date	January 16, 2026	TIME	1:00pm - 4:00pm
Location	<p><u>Virtual: Via Zoom:</u> https://telligen.zoom.us/meeting/register/_9baOMgVRhm6tyLZ9s8sZA</p> <p><u>In-Person:</u> Lucas Building Capitol Complex, 321 E 12th St, Des Moines, Conference Room L221</p>		

Meeting Objectives

The purpose of the CAC is to increase the efficiency, quality, and effectiveness of the Medicaid healthcare system. The CAC provides a process for physician and other healthcare provider contributions to promote quality care, member safety, cost effectiveness, and positive physician and provider relations through discussion about Medicaid benefits and healthcare services.

The CAC is charged with recommending clinically appropriate healthcare utilization management and coverage decisions to the Department of Health and Human Services (HHS) for the Iowa Medicaid program.

HIPAA Reminder: As a reminder to all members of the public who are presenting during the CAC meeting: Do not provide any personal health information (PHI) regarding a member covered by Iowa Medicaid Insurance that would constitute a violation of Federal HIPAA standards.

Meeting Participants

Iowa Medicaid	<input type="checkbox"/> Michael Line, MD, HHS Chief Medical Officer <input type="checkbox"/> Rebecca Curtiss, HHS Deputy Director of Operations <input type="checkbox"/> Jenny Erdman, HHS Quality, Innovation & Medical Policy Bureau Chief <input type="checkbox"/> Andrea Maher, HHS LTSS Bureau Chief <input checked="" type="checkbox"/> Tami Lichtenberg, QIO Director <input checked="" type="checkbox"/> Bill Jagiello, DO, QIO <input checked="" type="checkbox"/> Else Umbreit, PharmD, QIO <input checked="" type="checkbox"/> Cindy Palmer, QIO Behavioral Health & Waiver Manager
Committee Members	<input type="checkbox"/> Dana Danley, MD, Family Practice <input checked="" type="checkbox"/> Diana Smith, ARNP-Family Practice <input checked="" type="checkbox"/> Chitra Reddy, MD, Endocrinology <input checked="" type="checkbox"/> Geetanjali Sahu, MD, Child and Adolescent Psychiatrist <input checked="" type="checkbox"/> Wendy Sanders, ARNP-Family Practice <input checked="" type="checkbox"/> Dawn Schwartz, ARNP- Neonatology/Pediatrics <input checked="" type="checkbox"/> Kelli Roenfanz, DO, Family Medicine, OB/Gyn <input checked="" type="checkbox"/> Kaaren Olesen, DO, OB/Gyn
Managed Care Organizations	<input type="checkbox"/> Dr. Paul Mulhausen, Iowa Total Care



- Dr. Timothy Gutshall, Molina Healthcare of Iowa
- Dr. Jason Kessler, Wellpoint
- Dr. James Elliot, Managed Care of North America
- Dr. Jeff Chaffin, Delta Dental of Iowa

Agenda Topic

Public Comment Period

- A maximum of 5 minutes will be allotted to each public guest who has submitted a completed [Conflict of Interest Disclosure](#). Submissions must be received no later than one week prior to the meeting date.
- To be respectful of the meeting time if you find your topic will exceed the maximum 5-minute allotment we welcome you to submit your detailed information to CAC@hhs.iowa.gov prior to and/or post meeting.

Announcements

- **Welcome:**
 - Michael Line, MD, Iowa Medicaid Chief Medical Officer
 - Kaaren Olesen, DO, CAC member
- **Recognition of Service:**
 - Kartik Anand, MD

Approval of October 17, 2025, Meeting Minutes

New Business

Consent Agenda

Dental (2):

1. Orthodontic Procedures *Archive*
2. Periodontic Procedures *Archive*

Durable Medical Equipment (6):

3. Ceiling Track Lifts and/or Electric Patient Lifts
4. Continuous Glucose Monitoring
5. Cranial Orthotics
6. Insulin Pumps
7. Power Wheelchair Attendant Controls
8. RELiZORB®

Lab (2):

9. Chromosomal Microarray Analysis
10. Whole Exome Sequencing

Level of Care (1):

11. Intermediate Care Facility/Intellectual Disability Level of Care

Ophthalmology (1):

12. Visual Aids and Vision Therapy

Surgical Procedures (4):

13. Ablative Laser Treatment of Burns and Traumatic Scars
14. Artificial Disc Replacement Surgery
15. Fecal Microbiota Transplantation
16. Nipple Tattooing



Therapy-Counseling (1):

17. Repetitive Transcranial Magnetic Stimulation

Waiver Prior Authorization (2):

18. Environmental Modification and Adaptive Devices
19. Home and Vehicle Modification

Physician Administered Medications (9):

20. Adstiladrin (nadofaragene firadenovec-vncg)
21. Imjudo (tremelimumab-actl)
22. Injectafer (ferric carboxymaltose)
23. Kimmtrak (tebentafusp-tebn)
24. Lutathera (lutetium Lu 177 dotatate)
25. Orphan Drugs (Rare Diseases) (criteria includes Brineura, Cablivi, and Givlaari)
26. Vitamin, Mineral, Amino Acid Supplements
27. Vyepti (eptinezumab-jjmr)
28. Zulresso (brexanolone) *Archive (FDA withdrawal of approval effective April 14, 2025)*

Criteria Review

Durable Medical Equipment (1):

1. Mobility Related Device Purchase

Therapy-Counseling (2):

2. Family Functional Therapy
3. Multi-Systemic Therapy

Physician Administered Medications - Review (3):

4. Pluvicto (lutetium Lu 177 vipivotide tetraxetan)
5. Tecartus (brexucabtagene autoleucel)
6. Trodelvy (sacituzumab govitecan-hziy)

Upcoming Meetings

- Friday, April 17, 2026
 - Virtual Meeting Link: <https://telligen.zoom.us/meeting/register/s6lQqY7ITTuEoR92nF2rIA>
- Friday, July 17, 2026
 - Virtual Meeting Link: https://telligen.zoom.us/meeting/register/Zy-MrAZjRc-j_qcidl_J6w

Adjournment



Additional Information

- **Iowa Medicaid CAC contact:** CAC@hhs.iowa.gov
- **Iowa Medicaid CAC webpage:** <https://hhs.iowa.gov/about/advisory-groups/clinical-advisory-committee-cac>
- **Iowa Medicaid Fee Schedules webpage:** <https://hhs.iowa.gov/programs/welcome-iowa-medicaid/policies-rules-and-regulations/covered-services-rates-and-payments/fee-schedules>
- **Guests wanting to speak during the public comment period must complete a [CAC Disclosure Form](#) and email it to CAC@hhs.iowa.gov.** Submissions must be received no later than one week prior to the meeting date.

Meeting Minutes (Q1 2026)

Opening: Heidi Weaver, Iowa Medicaid QIO, welcomed everyone to the quarterly Iowa Medicaid Clinical Advisory Committee (CAC) Meeting for 2025, and provided an overview of the house rules.

Verbal Roll Call of the Committee Members: Quorum was confirmed with 7 of 8 members.

Introduction: Heidi introduced Committee Chairman, Dr. Jagiello, who is the Medical Director for Iowa Medicaid, QIO. Heidi presented the Meeting Objectives and the instructions for the Public Comment period presentations, with the use of a visible timer for each Public Guest Speaker and allotment of 5 minutes to present.

Announcements: Dr. Jagiello announced that in December, Iowa Medicaid hired a new Chief Medical Officer, Dr. Michael Line. Dr. Line was unable to attend today's meeting, but Dr Jagiello hoped to introduce him in a future meeting.

Dr Jagiello welcomed Dr. Kaaren Olesen as a new Committee member and announced that Dr. Kartik Anand was unable to fulfill the meeting requirements for the Clinical Advisory Committee and has elected to step down. Dr. Jagiello expressed thanks to Dr. Anand and wished him well.

Approval of the October 17, 2025, Minutes: Dr. Jagiello opened the vote to approve the minutes with no requests for any changes or corrections from the Committee.

Dr. Jagiello asked for motion to approve from the Committee.

- First motion to approve by Dawn Schwartz
- Second motion to approve by Dr. Chitra Reddy

Committee Member by roll call vote for approval:

- Dr. Dana Danley-Family Practice
- Diana Smith, ARNP-Family Practice
- Dr. Chitra Reddy-Endocrinology
- Dr. Geetanjali Sahu-Child and Adolescent Psychiatrist
- Wendy Sanders, ARNP-Family Practice
- Dawn Schwartz, ARNP- Neonatology/Pediatrics
- Dr. Kelli Roenfanz, Family Medicine, OB/Gyn
- Dr. Kaaren Olesen, DO OB/Gyn (**abstained from voting – new member**)

Consent Agenda:

Heidi Weaver provided the purpose of the Consent Agenda and explained the procedure for archiving criteria. Archival of criteria means that the prior authorization requirements for these test or procedures are not going away, rather the criteria are being replaced by the MCG Guidelines.

Dr. Jagiello asked the committee if there were any comments or questions about an item on the consent agenda, adding that a committee member may, at their request, take an item off the



consent agenda and open it up for discussion. With no comments or questions heard, Dr. Jagiello asked for a motion to approve the consent agenda as presented.

Dr. Jagiello asked for motion to approve from the Committee.

- First motion to approve by Diana Smith (thru chat)
- Second motion to approve by Dr. Geetanjali Sahu.

Committee Member by roll call vote for approval:

- Dr. Dana Danley-Family Practice
- Diana Smith, ARNP-Family Practice (thru chat)
- Dr. Chitra Reddy-Endocrinology
- Dr. Geetanjali Sahu-Child and Adolescent Psychiatrist
- Wendy Sanders, ARNP-Family Practice
- Dawn Schwartz, ARNP- Neonatology/Pediatrics
- Dr. Kelli Roenfanz, Family Medicine, OB/Gyn
- Dr. Kaaren Olesen, DO OB/Gyn

Criteria Review:

1. Mobility Related Device Purchase:

Dr. Jagiello explained the changes in the criteria for mobility related device purchases. There was a clarification of the language regarding Medicaid's position to repair or replace an item is based in part by the cost of the repair.

Dr. Jagiello asked the committee if they had any questions or comments about the revised policy or criteria.

Hearing none he asked for a motion and a second to approve the revised criteria.

- First motion to approve by Dr. Geetanjali Sahu
- Second motion to approve by Diana Smith (thru chat)

Committee Member by roll call vote for approval:

- Dr. Dana Danley-Family Practice
- Diana Smith, ARNP-Family Practice (thru chat)
- Dr. Chitra Reddy-Endocrinology
- Dr. Geetanjali Sahu-Child and Adolescent Psychiatrist
- Wendy Sanders, ARNP-Family Practice
- Dawn Schwartz, ARNP- Neonatology/Pediatrics
- Dr. Kelli Roenfanz, Family Medicine, OB/Gyn
- Dr. Kaaren Olesen, DO OB/Gyn

2. Functional Family Therapy

Presented by Cindy Palmer from the Quality Improvement Organization. The criteria changed when the State Plan Amendment was changed that will allow a practitioner with a bachelor's degree to provide the service, whereas before it was a master's degree and above. The bachelor's level providers will be serving in an interventionist role and will be supervised by a higher-level practitioner and must meet the qualifications that are outlined in the provider service manual.

Dr. Jagiello asked the committee if they had any questions or comments about the revised policy or criteria.

Hearing none he asked for a motion and a second to approve the revised criteria.

- First motion to approve by Dawn Schwartz
- Second motion to approve by Dr. Geetanjali Sahu

Committee Member by roll call vote for approval:

- Dr. Dana Danley-Family Practice
- Diana Smith, ARNP-Family Practice (thru chat)
- Dr. Chitra Reddy-Endocrinology
- Dr. Geetanjali Sahu-Child and Adolescent Psychiatrist
- Wendy Sanders, ARNP-Family Practice
- Dawn Schwartz, ARNP- Neonatology/Pediatrics
- Dr. Kelli Roenfan, Family Medicine, OB/Gyn
- Dr. Kaaren Olesen, DO OB/Gyn

3. Multi-Systemic Therapy

Presented by Cindy Palmer from the Quality Improvement Organization. This criterion also changed when the State Plan Amendment was changed that will allow a practitioner with a bachelor's degree to provide the service, whereas before it was a master's degree and above. The bachelor's level providers will be serving in an interventionist role and will be supervised by a higher-level practitioner and must meet the qualifications that are outlined in the provider service manual.

Dr. Jagiello asked the committee if they had any questions or comments about the revised policy or criteria.

Hearing none he asked for a motion and a second to approve the revised criteria.

- First motion to approve by Wendy Sanders
- Second motion to approve by Dr. Kaaren Olesen

Committee Member by roll call vote for approval:

- Dr. Dana Danley-Family Practice
- Diana Smith, ARNP-Family Practice (thru chat)
- Dr. Chitra Reddy-Endocrinology



- Dr. Geetanjali Sahu-Child and Adolescent Psychiatrist
- Wendy Sanders, ARNP-Family Practice
- Dawn Schwartz, ARNP- Neonatology/Pediatrics
- Dr. Kelli Roenfanz, Family Medicine, OB/Gyn
- Dr. Kaaren Olesen, DO OB/Gyn

Heidi Weaver introduced Dr. Umbreit with the Iowa Medicaid Quality Improvement Organization to present Physician Administered Medications.

Dr. Umbreit explained that there were 3 medications on the Criteria Review to review.

4. **Pluvicto (lutetium Lu 177 vipivotide tetraxetan)**

On March 28, 2025, the U.S. Food and Drug Administration (FDA) revised the indication and patient selection criteria for Pluvicto. Criteria 2 was amended to read “Disease is prostate-specific membrane antigen (PSMA)-positive, as confirmed by a PSMA positron emission tomography (PET) product based on PSMA expression in tumors.”

Criteria 4 (requirement for previous treatment with at least 1, but no more than 2, previous taxane regimens) was removed to align with revised indication.

Criteria 5 was added, stating member must be considered appropriate to delay taxane-based chemotherapy, or has received prior taxane-based chemotherapy.

Dr. Jagiello thanked Dr. Umbreit and asked the committee if they had any questions or comments about the revised policy or criteria.

Hearing none he asked for a motion and a second to approve the revised criteria.

- First motion to approve by Dawn Schwartz
- Second motion to approve by Dr. Chitra Reddy

Committee Member by roll call vote for approval:

- Dr. Dana Danley-Family Practice
- Diana Smith, ARNP-Family Practice (thru chat)
- Dr. Chitra Reddy-Endocrinology
- Dr. Geetanjali Sahu-Child and Adolescent Psychiatrist
- Wendy Sanders, ARNP-Family Practice
- Dawn Schwartz, ARNP- Neonatology/Pediatrics
- Dr. Kelli Roenfanz, Family Medicine, OB/Gyn
- Dr. Kaaren Olesen, DO OB/Gyn

5. Tecartus (brexucabtagene autoleucel)

Dr. Umbreit indicated that Tecartus is a CAR-T therapy. As explained in the previous meeting, when CAR-T therapies first came out, there were many side effects to become familiar with, new treatment strategies, and additional care that could be needed based on the side effects. These drugs were placed in a Risk Evaluation Mitigation Strategy (REMS) program. This required that the providers were certified with the company. It required them to go through specific training to verify that they had appropriate facility and treatment options available on hand for the patient, and it enforced additional monitoring requirements.

The FDA has now decided that the REMS requirement is no longer necessary to ensure the safe use of these therapies, as both physicians and hospitals are well-versed in the potential risks of these therapies and how to manage these risks should they occur. In place of the requirement for the REMS program, the FDA has amended the prescribing information to implement additional post-infusion monitoring requirements. Patients must be monitored daily for at least 7 days following an infusion for signs and symptoms of cytokine release syndrome or other neurological toxicities. They must remain within proximity of a healthcare facility for at least 2 weeks following the infusion and are advised to avoid driving for at least 2 weeks following the infusion.

Dr. Jagiello asked the committee if they had any questions or comments about the revised policy or criteria.

Hearing none he asked for a motion and a second to approve the revised criteria.

- First motion to approve by Dr. Kaaren Olesen
- Second motion to approve by Dr. Chitra Reddy

Committee Member by roll call vote for approval:

- Dr. Dana Danley-Family Practice
- Diana Smith, ARNP-Family Practice (thru chat)
- Dr. Chitra Reddy-Endocrinology
- Dr. Geetanjali Sahu-Child and Adolescent Psychiatrist
- Wendy Sanders, ARNP-Family Practice
- Dawn Schwartz, ARNP- Neonatology/Pediatrics
- Dr. Kelli Roenfanz, Family Medicine, OB/Gyn
- Dr. Kaaren Olesen, DO OB/Gyn

6. Trodelvy (sacituzumab govitecan-hziy)

Dr. Umbreit presented Trodelvy, approved for the treatment of unresectable locally advanced or metastatic triple-negative breast cancer, and for unresectable locally advanced or metastatic hormone receptor (HR)-positive, HER2-negative breast cancer.

Trodelvy was previously also approved for the treatment of locally advanced or metastatic urothelial cancer. However, the FDA removed that indication effective



November 22, 2024, and the policy was updated to remove criteria and other references to this indication.

The Boxed Warning was updated to align with current prescribing information (previous reference to G-CSF for secondary prophylaxis of febrile neutropenia; now primary prophylaxis with G-CSF is recommended for all patients at increased risk of febrile neutropenia).

Dr. Jagiello asked the committee if they had any questions or comments about the revised policy or criteria.

Hearing none he asked for a motion and a second to approve the revised criteria.

- First motion to approve by Dawn Schwartz
- Second motion to approve by Dr. Geetanjali Sahu

Committee Member by roll call vote for approval:

- Dr. Dana Danley-Family Practice
- Diana Smith, ARNP-Family Practice (thru chat)
- Dr. Chitra Reddy-Endocrinology
- Dr. Geetanjali Sahu-Child and Adolescent Psychiatrist
- Wendy Sanders, ARNP-Family Practice
- Dawn Schwartz, ARNP- Neonatology/Pediatrics
- Dr. Kelli Roenfan, Family Medicine, OB/Gyn
- Dr. Kaaren Olesen, DO OB/Gyn

Heidi Weaver thanked the everyone for joining and welcomed everyone to join the upcoming Quarter 2 CAC meeting on April 17, 2026.

Dr Jagiello thanked the committee for their involvement and engagement. Dr Jagiello explained that the committee was actively recruiting a new member, specifically an oncologist practicing in Iowa and participating in the Iowa Medicaid program and encouraged anyone with an expressed interest to visit the CAC webpage and fill out the required information.

Dr, Jagiello asked if there were any questions, hearing none asked motion to adjourn.

- First motion to adjourn by Diana Smith
- Second motion to adjourn by Wendy Sanders.