



Hawki Board Materials
Monday, December 13, 2021

1. December 13, 2021, Meeting Agenda
2. October 25, 2021, Hawki Board Meeting Minutes
3. Hawki Outreach Update



AGENDA
Hawki Board Meeting
Monday, December 13, 2021
Time: 1:30 – 3:30 PM

Virtual Meeting via Zoom

<https://www.zoomgov.com/j/1616428039?pwd=dS9RYWRZeHVVRN3ByU01NYlI5NzdZz09>

Meeting ID: 161 642 8039

Passcode: 392928

- 1:30 PM Roll call – **Mary Nelle Trefz**
- 1:35 PM Approval of minutes – **Mary Nelle Trefz**
- Monday, October 25, 2021 – BOARD ACTION REQUIRED
- 1:40 PM Elect new chair/vice chair
- 1:45 PM Public comments
- 1:50 PM New business
- 1:55 PM Social Determinants of Health (SDOH) dashboard – **Kurt Behrens**
- 2:05 PM Strategic discussion follow-up
- 2:20 PM Updates – **various presenters**
- Director’s update
 - MCO updates
 - Outreach update
 - Communications update
- 3:30 PM Adjourn

For more information, contact John Riemenschneider at jriemen@dhs.state.ia.us or Michael Kitzman at mkitzma@dhs.state.ia.us.

Note: Times listed on agenda for specific items are approximate and may vary depending on the length of discussion for preceding items. Please plan accordingly.



**Hawki Board Meeting
October 25, 2021**

Hawki Board Members	Department of Human Services
Mary Nelle Trefz, Chair – present	Elizabeth Matney, Medicaid Director
Angela Burke Boston – present	Julie Lovelady, IME
Jim Donoghue – present	Paula Motsinger, IME
Mike Stopulos – present	Amela Alibasic, IME
Dr. Bob Russell – present	Kevin Kirkpatrick, IME
Mary Scieszinski – present	Tashina Hornaday, IME
Shawn Garrington – present	Shelley Horak, IME
Senator Nate Boulton –	Kurt Behrens, IME
Senator Mark Costello –	
Representative Shannon Lundgren –	
	Guests
	Gretchen Hageman, DDIA
	John Hedgecoth, Amerigroup
	Lindsay Paulson, MAXIMUS
	Jean Johnson, IDPH
	Alesia Houser, AHFA
	Tara Brown, guest speaker
	Tia Siegworth, Scott Co. Health Dept.

Call to Order and Roll Call

Board Chair Mary Nelle Trefz called the meeting to order at 12:30 PM via Zoom. Chair Trefz conducted a roll call, and attendance is as reflected above. A quorum was established.

Approval of the Hawki Board Meeting Minutes

Chair Trefz called for the Board to review the minutes from the August 16, 2021, meeting. Chair Trefz asked for a motion to approve the minutes and the motion carried.

Business Items

Chair Trefz introduced the topic of electing a new chair and new vice chair. Jim Donoghue suggested that the Board meet with the two new members outside of the Hawki Board meeting to discuss the roles and what they entail. He then recommended that the Board gauge interest in filling these roles and report back at the December meeting. Chair Trefz, Vice Chair Garrington, and new member Mary Scieszinski agreed to this course of action.

Public Comment

Chair Trefz had each Board member give an introduction and talk about their connection to the Hawki program. This was primarily to allow new members Mary Scieszinski and Mike Stopulos to get to know their fellow Board members and understand Board member roles. Chair Trefz also had Board members briefly talk about the organizations they represent and how those organizations work with Hawki.

Chair Trefz then introduced guest speaker Tara Brown. Tara talked about how the Hawki program helped her and her family. She shared her personal story of attending college, finding out she was expecting, and having to put her academic plans on hold. This eventually led to a state of financial insecurity for her and her daughter. Tara found out about Hawki through a co-worker, and she was able to access programs through Hawki that ensured she could afford necessities and get adequate healthcare for her daughter. Tara expressed her gratitude to the Board and said that Hawki kept a roof over her and her daughter's heads when they were at serious risk of becoming unhoused. Tara now works for The Bridge Home, a non-profit organization devoted to bridging the gap between homelessness and housing by providing shelter, support, and inspiring a pathway forward for individuals and families experiencing or on the verge of homelessness.

Strategic Planning

Medicaid Director Elizabeth Matney opened this portion of the meeting by discussing how the Hawki Board members can use their expertise and experience to develop long-term goals that will guide the program over the next several years. She specifically mentioned the importance of developing quality control, clinical, and financial goals. Chair Trefz then introduced Shelley Horak, Iowa Medicaid Enterprise (IME), who facilitated the strategic planning discussion. Shelley provided a PowerPoint slide deck with her presentation.

Shelley began by asking the question of what should be defined and/or created by the Board. Chair Trefz suggested that the Board exists to ensure Iowa's pediatric population can easily enroll in and access Hawki programs. Dr. Russell agreed, saying that the Hawki program should be functional, accessible, and effective. Mike Stopulos then suggested that the Board should use the next several meetings to craft a mission statement.

Shelley continued by asking what changes Board members would want to see if given unlimited resources. Angela Burke Boston pointed out that services are not always uniformly available across the MCOs and used speech therapy as an example.

Shelley then asked what changes could be made to improve quality of care for covered children. Jim Donoghue noted that there is little communication between the Hawki Board and the Medical Assistance Advisory Council (MAAC) and proposed that the Hawki Board become engaged with the MAAC in a more meaningful way. Chair Trefz added that the Hawki Board could communicate with the MAAC to determine if the MAAC oversees any portion of Medicaid as it pertains to the pediatric population. Angela then stated that the Board has the opportunity to expand in the areas of diversity, equity, and inclusion. Jim recommended that the Board have some oversight of program expenditures. Dr. Russell proposed that the Board consider data and scientific literature regarding advances in the field of pediatric health and wellness.

Shelley steered the conversation toward the Board's charge as established by Iowa Administrative Code. The charge has five areas: structure, duties, reporting, recommendations, and approvals. Dr. William Jagiello, a Des Moines-based family physician, stated that he facilitates the Hawki clinical advisory council meetings, but they normally do not have anything substantive to discuss at those meetings. Dr. Jagiello said that the clinical advisory council is open to assuming more responsibility in this area. In discussing an advisory committee for children with special health care needs (CSHCN), Mary Nelle suggested the possibility of adding a parent representative to the Board. Shawn Garrington highlighted the need for better communication between the Hawki Board and the clinical advisory council.

In reference to the Board's duties, Angela suggested that the list of duties be updated to reflect the Board's current role, and not its previous role in establishing the Hawki program. Chair Trefz added that the Board ideally will work with both public and private entities. Similarly, in reference to the Board's reporting responsibilities, Jim stated that the Hawki report is considerably shorter than it was 7-10 years ago because the Board is no longer standing up the program. Angela added that there is likely some overlap between the Hawki report and the broader Medicaid report.

Regarding the approvals portion of the Board's responsibilities, Chair Trefz noted that the Board's role in monitoring the capacity of the MCOs to address unique needs of children and children's health delivery is broad in scope and represents the evolution of the Board's role from establishing the program to overseeing the operation of the program. Kurt Behrens, IME, stated that this aspect of the program is covered in MCO quarterly reports and two additional annual reports. Kurt provided links to those reports in the chat.

Shelley then offered a recap of the strategic discussion with highlights of each of the five aspects of the Board's charge. Chair Trefz restated that the Board should be focused on current operations, such as ensuring access and improving quality of care, rather than establishing the program, and language in the Board's charge should change to reflect that. Additionally, Chair Trefz raised the question of whether Board members are willing to take on additional responsibilities outside of the Board's required six meetings per year. Angela added to this, asking if the Board has a charge outside of these six required meetings.

MCO Update

John Hedgecoth from Amerigroup offered a brief update. John stated that Amerigroup is discontinuing the outpatient dental prior authorization originally announced April 2021. He stressed that this is a policy decision and not yet an operational change, and that Amerigroup will provide more information when it becomes available.

Next Meeting

Meeting adjourned at 2:21 PM.

The next meeting will be Monday, December 13, 2021.

Submitted by John Riemenschneider

Recording Secretary

jr

Hawki Outreach Success Story

Agency Name	<i>Marion County Public Health</i>
Hawki Outreach Coordinator	<i>Emily DesPlanque</i>
Client (who this happened to)	<i>Family of 4, but Outreach Coordinator worked with Mom</i>
Setting/Location (where and when this took place)	<i>In person at an outreach event (Hispanic Heritage Festival).</i>
Story/Conflict (obstacle, barrier, or problem)	<i>Mom and 2 kids had moved to Iowa recently, Dad had to leave the state for work, so Mom was on her own with the kids while working full time. She needed to get the kids enrolled in insurance because she needed to get the kids in for checkups but didn't know how or when she would apply because she didn't have time off.</i>
Action (what happened)	<i>Outreach Coordinator had a booth and activities set up at a Hispanic Heritage Festival and was able to speak to Mom and show her the income guidelines and explain the application process. I sent information home with her to look over and discuss with her husband and told her I would follow up the following week.</i>
Outcome(s) (measurable or concrete evidence of change)	<i>This mom and I had a hard time connecting but we were able to communicate through voicemail. I explained how she could apply by PE, online, or the paper application I had given her at the festival. We played phone tag a few more times asking and answering questions and Mom elected to apply online. She was approved and the children began receiving benefits the next month. I was also able to assist her with getting in touch with WIC to transfer from her old state and get started with benefits in Iowa, and she has since had her first WIC appointment in our state.</i>
Relevance (how this story helps us demonstrate need or measure success)	<i>This story shows the importance of Hawki Outreach Coordinators appearing at a variety of community events to spread the word about Hawki. This mom was able to learn about Hawki and get her kids enrolled, as well as get started with some other programs because she saw the information at a festival and had someone there to answer questions, rather than having to search it out herself.</i>
Other Info	<i>N/A.</i>
Submitter Name and Data	<i>Emily DesPlanque Marion County Public Health edesplanque@marioncountyiowa.gov</i>

Hawki Outreach Success Story

Agency Name	<i>North Iowa Community Action Org.</i>
Hawki Outreach Coordinator	<i>Erin Krull RN</i>
Client (who this happened to)	<i>Mother and child</i>
Setting/Location (where and when this took place)	<i>Recently, I received a phone call from a mother, inquiring about Hawki benefits. Last year, she had her son and has been paying for a private insurance plan out of pocket, as her husband is a farmer. Her son was born with some medical issues, and spent time in the NICU, and mom states she had a lot of out-of-pocket bills.</i>
Story/Conflict (obstacle, barrier, or problem)	<i>Mom had heard of medical assistance from the state but assumed she wouldn't be eligible. Her son recently turned one, and she found a Hawki brochure with income guidelines at his well child checkup. Mom started the application through the DHS website but was overwhelmed with all the questions and did not know how to proceed. Mom did some research and found the Hawki Outreach Coordinator online.</i>
Action (what happened)	<i>The Hawki Outreach Coordinator discussed Hawki and its benefits, along with income guidelines over the phone. We discussed the application and offered to meet at clinic so we could complete a presumptive eligibility application together. Mom decided that as the best option, and we met the following day.</i>
Outcome(s) (measurable or concrete evidence of change)	<i>Mother and I met at our office, and completed the application, presumptive eligibility was obtained. Mother was informed of follow up process to obtain full Hawki benefits. She was so thankful for our assistance, as applying for benefits on her own was confusing for her.</i>
Relevance (how this story helps us demonstrate need or measure success)	<i>This mother had struggled financially for a while because she assumed she would not be eligible for coverage, but never knew the guidelines. By having brochures with the income guidelines available at her doctor visit, she realized her family would qualify.</i>
Other Info	<i>Mom had a lot of questions regarding the application, and about the process of obtaining benefits, renewal etc. She also had questions regarding coverage, as her son had ongoing health issues. She explained over and over how thankful she was for such a beneficial program, and to have someone guide her through the process.</i>