



**Hawki Board Meeting Minutes
February 28, 2022**

Hawki Board Members	Iowa Medicaid
Mary Nelle Trefz, Chair – present	Elizabeth Matney, Director
Angela Burke Boston – present	Julie Lovelady
Jim Donoghue – present	Paula Motsinger
Mike Stopulos – present	Amela Alibasic
Angela Doyle Scar – present	Jennifer Steenblock
Mary Scieszinski – present	Heather Miller
Shawn Garrington – present	Tashina Hornaday
Senator Nate Boulton –	Katie McBurney
Senator Mark Costello –	Kurt Behrens
Representative Shannon Lundgren –	Dr. William Jagiello
	Shelley Horak
	Carrie Malone
	Anna Casteel
	Allison Scott
	Guests
	Gretchen Hageman, DDIA
	John Hedgecoth, Amerigroup
	Jean Johnson, IDPH
	Sarah Smith, WCPH
	Jennifer Findlay, ITC
	Sandi Hurtado-Peters, Dept. of Management
	Tia Siegwarth, SCPH

Call to Order and Roll Call

Board Chair Mary Nelle Trefz called the meeting to order at 12:00 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 a motion to approve the minutes from the December 13, 2021, meeting. The motion carried and the minutes were approved.

Public Comment

There were no public comments.

New Business

Jim Donoghue noted that at the recent Medical Assistance Advisory Council (MAAC) meeting, Eric Kohlsdorf was still listed as the designee from the Hawki Board, and that the Board should designate someone to be the new Hawki Board representative to the MAAC. Chair Trefz suggested that the discussion about the relationship between MAAC and the Hawki Board be added to the Board's strategic planning discussion.

Chair Trefz asked that Iowa Medicaid provide an update on the disenrollment freeze at the April Board meeting. Julie Lovelady said that Iowa Medicaid would have that update ready and would present it at the April meeting.

Five-Year Iowa Administrative Rule Review Process

Jennifer Steenblock provided an update. She began by explaining that state law requires every state agency conduct a comprehensive review of all administrative rules every five years. Reviews were conducted in 2012 and 2017, and another must be conducted in 2022. The goal of this review is to identify and eliminate any rules that are determined to be outdated, redundant, or inconsistent with current statutes or other rules and regulations, including new legislation and/or laws, rules, or regulations at the federal level. As an example, Jennifer said that there are three chapters of Iowa Medicaid administrative rules that have been repealed within Iowa Code, and therefore must be removed. All changes must be identified by mid-April and submitted to the departments and the Bureau of Policy Coordination by July 31, 2022. Angie Doyle Scar asked if the Hawki Board is responsible for reviewing Hawki administrative rules. Chair Trefz and Jennifer said that, yes, the Board reviews Hawki rules, but they don't foresee any changes to those rules.

Action Plan Discussion

Shelley Horak led this portion of the meeting. She began with a review of the Hawki Board's strategic planning discussion from the October 2021, Board meeting. She discussed defining the Board's vision, reviewing the Board's charges, and identifying opportunities for change. Shelley presented three key questions the Board had discussed at the October meeting: 1) What should be created or defined by the Board? 2) How should the Board change or support the conditions experienced by covered children? and 3) How should the Board's current strategies change or grow? This discussion allowed the Board to develop next steps: Define a shared vision for the future; identify opportunities to increase engagement with the Clinical Advisory Committee (CAC), MAAC, contracts, and benchmarks; develop an educational platform; and supply recommendations for consideration by stakeholders. Shelley then discussed the process of reviewing the Board's charges, including how the Board can identify charges from administrative code and how those charges change over time. She also touched on reporting, the Board's role in making recommendations to the governor, and approvals. Shelley then presented the model for strategic planning. Chair Trefz asked how the Hawki Board's next steps might tie in with the five-year administrative rule review, and Jennifer made a point of distinguishing between administrative rules and Iowa Code, noting that Iowa Code must be changed through legislation. The rule review is more of a technical cleanup, rather than a way to address potential changes to policy.

Shelley concluded her presentation and transitioned to a discussion about the Board's vision and mission. She explained that the mission is the who, what, why, and for whom;

while the vision represents the group's guide, or "north star." Shelley had Board members think of where they see the Hawki Board 1-2 years from now, including the ideal state of the Board, what the Board looks like, what the Board has accomplished, and how the Board works together. Jim noted that the Board has benefitted from public input in the past, whether from providers or parents, and recommended that the Board encourage further public input through Director Matney's town hall events. Shawn Garrington recommended that the Board clearly define metrics for success, so that they can more accurately determine what a success story is and what is not; or, if something is a success story, or simply an organization attempting to improve their statistics. Mike Stopulos suggested that the Board engage the Managed Care Organizations (MCOs) and providers regarding mental health, so that MCOs and providers understand the big picture; and the Board, MCOs, and providers can establish a shared vision. Angie Doyle Scar proposed using social determinants of health (SDOH) as a framework for action, allowing the Board to have a greater impact on health outcomes. Mary Scieszinski said she would like to see the Board focus more on mental health and take a more holistic approach to members' health and assessing health outcomes. Angela Burke Boston said that, as an insurance regulator, she would like to see a scenario where the Hawki program is not necessary, explaining that insurance companies aren't willing to take on the risk of insuring children, which makes the Hawki program necessary. Chair Trefz added that the Board should keep in mind the scope of the Hawki program as it develops its mission and vision.

Shelley then asked Board members to focus on what specifically the Hawki Board will do 1-2 years from now. Chair Trefz said the Board will ensure children who are eligible for the program are able to access the services that they need to grow up and be healthy. Angela Burke Boston said that the Board will be accountable and accessible to the public. Angie Doyle Scar agreed, saying that the Board should be transparent and accountable to the public, stakeholders, and other programs. Mary Scieszinski suggested the Board look into their role in reviewing contracts, and Angie Doyle Scar added that the Board should focus on outcomes to ensure the Hawki program is serving members' needs. Shawn Garrington agreed that the Board should focus on outcomes and be able to translate those outcomes into recommendations for change.

Shelley asked who the Hawki Board should target, and Chair Trefz said that, while the Board makes recommendations to the governor and legislature, the Board should target children who qualify for Hawki benefits, as well as their families and caregivers. Shawn and Angie added that the Board should target lowans and the general public.

Shelley then asked Board members why they want to serve on the Hawki Board. Shawn said he wants to make a difference in children's lives; Mary said she wants to ensure that families are aware of the programs available to children; Angie said that she is a public servant, and she wants to be of service to lowans; Jim said he has a general interest in public sector healthcare.

Shelley asked how the Board would accomplish these tasks. Chair Trefz suggested restructuring Hawki Board meetings. Jim recommended that the Board continue to monitor MCO and Iowa Medicaid initiatives. Mary and Shawn emphasized the importance of collaboration with stakeholders and other agencies. Shelley concluded by saying that she would take her discussion notes back and produce a vision and mission for the next Board meeting.

Director's Update

Director Matney began her update by discussing the current legislative session. She mentioned the public assistance oversight bill package, which consists of several bills broken off from a larger bill. Iowa Medicaid has worked with legislators on some of the points of those bills to find workable solutions for all parties, with the goal being to create a reliable and more automated system. She noted a bill that will address behavioral health issues, including long emergency department stays for members as they wait for inpatient bed placement, and a maternal health bill that would extend postpartum coverage up to 12 months.

Director Matney encouraged Board members to attend the monthly Iowa Medicaid town halls. She also offered a brief recap of the topic-specific listening sessions held over the previous two months, noting that the topics of those listening sessions were determined based on feedback from the town halls. Director Matney said that Iowa Medicaid will likely hold these listening sessions again.

Director Matney stated that the public health emergency (PHE) will likely end in July 2022, and Iowa Medicaid will begin the redetermination process again. The process will take place over the course of several months, and Iowa Medicaid will ensure a warm handoff for members who no longer qualify for the program. A timeline for restarting the redetermination process is forthcoming. Director Matney concluded by saying that Iowa Medicaid will re-evaluate its PHE-specific programs once the PHE has been lifted to determine which elements should be phased out and which should remain in place.

MCO Updates

John Hedgecoth, Amerigroup Iowa, Inc. (Amerigroup), offered an update. Amerigroup is offering a \$100 Amazon voucher for health and wellness products as a self-care transition benefit for members ages 17 to 21 who are exiting foster care. Amerigroup is also offering caregiver tool kits to licensed caregivers in the child welfare system. John mentioned the health equity population health plan, which includes a focus on access to and coordination of pre- and postpartum care. He added that Amerigroup has partnered with the Iowa Department of Public Health (IDPH) on an initiative aimed at training black doulas. Amerigroup has also partnered with ChildServe to develop Spanish language behavioral health services.

Jennifer Findlay, Iowa Total Care (ITC), offered an update. Jennifer said that ITC has an internal SDOH dashboard which they use to target specific members and connect them with medical, employment, and housing services. They also use SDOH to determine broader trends, where to focus outreach and resource awareness campaigns, and the relationship between SDOH and chronic conditions. Jennifer mentioned that ITC is using SDOH to allocate funds for transportation, education, childcare, food, and clothing programs. She concluded by saying that ITC has shared data with providers to begin tracking a small cohort of members and determine how these interventions have affected member outcomes.

Gretchen Hageman, Delta Dental of Iowa (DDIA), provided an update. She noted that DDIA is focusing their Hawki outreach on Cavity Free Iowa, a program for children ages 0 to 3. They have also been reaching out to pregnant women to promote home visiting programs, and adolescents who have not received dental care within the past 12 months. Gretchen added

that the Delta Dental Foundation has provided the Eastern Iowa Health Center with \$500K to expand dental operations.

Outreach Update

Jean Johnson, IDPH, provided an update on outreach efforts. Jean stated that they are preparing new brochures that will address Hawki eligibility and the new federal poverty guidelines that will go into effect April 1, 2022. Additionally, Hawki outreach coordinators continue to work with school nurses and local providers to focus on special populations. Jean also noted that outreach coordinators have been working with Afghan refugees to educate them about and enroll them in Medicaid programs.

Next Meeting

Meeting adjourned at 1:56 PM.

The next meeting will be Monday, April 18, 2022.

Submitted by John Riemenschneider

Recording Secretary

jr