Hello. Interesting contrasts in this newsletter. New initiatives like Medication-Assisted Treatment side-by-side with not-so-new things like Program Licensure Standards!

Let’s do a deeper dive on one of the new things — Medicaid Modernization (see page 3.) The Iowa High Quality Healthcare Initiative will manage medical care and Long Term Services and Supports, in addition to the mental health and substance abuse services that have been in the Iowa Plan for Behavioral Health managed care program for the past 20 years. It exponentially expands cross-system care delivery coordination and accountability statewide, as well as opportunities for quality improvement.

While Medicaid Modernization is about Medicaid funding and populations, IDPH is a critical partner to DHS in this effort. An example: IDPH funding for substance use disorder treatment for the un-/under-insured is included in the RFP, just as it’s been for 20 years. And even though many Iowans are becoming insured for the first time through the Iowa Health and Wellness Plan and Marketplace plans, gaps in covered services and co-pay, co-insurance, and deductible requirements still create barriers to treatment.

As Iowa’s designated substance abuse authority, IDPH is responsible for setting policy for the State. In addition, IDPH supports a broad array of health-related services for Iowans through a varied network of local, community-based “safety-net” provider contractors — HIV/STD clinics, local public health services, maternal/child health, and tobacco cessation. Go to Medicaid Managed Care RFP - IDPH Resources to learn more.
IDPH Staff to Participate on CDC Expert Panel

*Maggie Ferguson, IDPH Brain Injury and Disability program manager,* was one of 15 individuals invited to participate in the 2015 Disability and Health Branch expert panel meeting being held by the Centers for Disease Control and Prevention’s National Center on Birth Defects and Developmental Disabilities and Division of Human Development and Disability. The expert panel will review the successes and growth the Disability and Health Branch has achieved over the last ten years and will identify opportunities and gaps facing the Branch in the next decade.

The objectives for the expert panel process are to:

- Review the background, organization, and outcomes of current programs, research, and surveillance activities from the Disability and Health Branch;
- Define strategies and outcomes of Branch research, programs, communication, partnerships, and support;
- Identify priority topics and concepts for inclusion in a national disability and health agenda; and
- Determine ways to integrate recommendations into the Disability and Health Branch portfolio.

For more information, please contact Maggie Ferguson at maggie.ferguson@idph.iowa.gov.

Block Grant Update

IDPH is starting work on the 2015 - 2016 Substance Abuse Prevention and Treatment Block Grant application. Virtual meetings and local listening posts are being planned for late spring and early summer to solicit input on policy and funding priorities. Watch for more information in future newsletters.

Feel free to direct comments or suggestions to Michele Tilotta at michele.tilotta@idph.iowa.gov.

IDPH Welcomes New Staff

*Monica Wilke-Brown* has joined IDPH as the *Screening, Brief Intervention and Referral to Treatment (SBIRT) project director*. Monica has 15 years of experience in the human services field. She comes to IDPH from Employee and Family Resources (EFR) in Des Moines where she was the Director of Community Services Advancement since 2006. Monica replaces Michele Tilotta on the SBIRT Project. Welcome Monica!

You can reach Monica at monica.wilke-brown@idph.iowa.gov.

Advancing Medication Assisted Treatment in Iowa

In September, IDPH staff attended a Medication Assisted Treatment (MAT) Summit hosted by the Mid-America Addiction Technology Transfer Center (ATTC) in Kansas City. The summit focused on MAT education, policy and strategy development. Following the summit, IDPH began working with the ATTC on strategic planning around MAT expansion in Iowa that included surveying treatment programs on their knowledge and use of MAT and planning an *Iowa MAT Summit, scheduled for May 7* in Des Moines.

While summit planning still continues, featured speakers include Dr. R. Cory Waller and Ned Presnall, both nationally recognized for their work in advancing MAT as a treatment tool. Also featured will be Iowa MAT professionals and a panel of individuals who have included MAT in their recovery plans.

The summit is intended to promote MAT as one more tool for recovery in Iowa. It is designed to be of interest to treatment program leadership and counselors, boards of directors, physicians and other prescribers, drug court and corrections personnel, and others interested in learning more about Medication-Assisted Treatment.

For more information, contact Becky Swift at rebecca.swift@idph.iowa.gov.

National Problem Gambling Awareness Month

Governor Branstad signed a proclamation declaring March as Problem Gambling Awareness Month.

For many people, gambling is a way to have fun. For others, gambling can lead to personal and financial problems. Almost 1.8 million adult Iowans gambled during the past 12 months. Of that number, up to 43,000 could have a gambling disorder.

Iowans are encouraged to have a conversation about gambling with those they care about. “We know the majority of Iowans who gamble do so because it’s fun and they don’t have any problems as a result,” said Eric Preuss, manager of IDPH’s Iowa Gambling Treatment Program. “But studies show 16 percent of adult Iowans are classified as ‘at risk’ gamblers – meaning they may have one or more symptoms of a gambling disorder.”

 Symptoms of problem gambling include:

- thinking a lot about gambling,
- needing to wager/play more,
- inability to cut down or stop,
- feeling restless/irritable when not gambling,
- trying to win back losses,
- lying to others about gambling,
- loss of relationships or a job, or
- relying on others to fix a financial problem caused by gambling.

IDPH funds a range of problem gambling education, prevention, treatment and recovery services. If you or someone you know has a gambling problem, call 1-800-BETS OFF or go to [www.1800BETSOFF.org](http://www.1800BETSOFF.org).
March Declared TBI Awareness Month

Governor Branstad signed a proclamation declaring March as Traumatic Brain Injury Awareness month.

More than 17,000 Iowans have been hospitalized or seen in emergency rooms due to a Traumatic Brain Injury (TBI), a number that does not include thousands of Iowans who experience brain injury but don’t seek care.

Falls, motor vehicle crashes, and sports injuries are leading causes of TBI, often called the ‘silent epidemic’ because the resulting injuries are not always apparent. “More than 95,000 Iowans are living with long-term disability because of a brain injury,” said IDPH Brain Injury and Disability program manager Maggie Ferguson. “These individuals and their families face physical and emotional challenges. They must overcome misconceptions about their conditions and take on the work of long-term recovery.”

A TBI is caused by a bump, blow or jolt to the head or a penetrating head injury that disrupts the normal function of the brain. Not all such injuries result in a TBI, and the severity of a TBI may range from ‘mild’ — a brief change in mental status or consciousness — to ‘severe’ — such as an extended period of unconsciousness or amnesia.

IDPH works with the CDC and the Iowa Advisory Council on Brain Injuries to prevent accidents that can lead to brain injury and to support TBI survivors and their families. For more information, contact Maggie Ferguson at maggie.ferguson@idph.iowa.gov.

Medicaid Modernization

The Iowa Department of Human Services (DHS) has released a Request for Proposals (RFP) for Governor Branstad’s Medicaid Modernization.

The Iowa High Quality Healthcare Initiative aims to improve the coordination and quality of care statewide while providing predictability and sustainability in Medicaid spending. DHS proposes to enroll Medicaid, Healthy and Well Kids in Iowa (hawk-i) and Iowa Health and Wellness Plan enrollees in managed care organizations (MCOs). DHS will contract with two to four MCOs to provide comprehensive health care services including:

- physical health,
- behavioral health — mental health and substance use disorders, and
- long-term services and supports (LTSS).

The initiative also includes IDPH funding for substance use disorder treatment for un-/under-insured Iowa residents.

Additional information is available at Access the fact sheet here and Medicaid Modernization web page.

Program Licensure Update

On January 6, an Iowa Administrative Rules Committee hearing was held to review proposed updates to the IAC 641—Chapter 155 substance use disorder and problem gambling program licensure standards. No concerns or suggested edits were expressed by legislators or other attendees.

A public hearing was held on January 27, the deadline for submission of public comments. Comments were received from four individuals.

The final version of the rules, incorporating comments received, was proposed at the March 11 State Board of Health meeting. Publication of the final rules is scheduled for the first of April, with the revised program licensure standards becoming effective May 6, 2015.

Fast Facts from the Consortium

Problem gambling is a significant health concern in the United States. However, youth gambling prevention is understudied and in need of further exploration. Youth problem gambling is associated with family influences (Arndt & Palmer, 2013) and gambling awareness (Taylor & Hillyard, 2008; Todirita & Lupu, 2013). Developing a proven method of problem gambling reduction should first include a solid understanding of the population’s gambling features and behaviors, then an understanding of the subpopulation that demonstrate problem gambling behaviors. For the current study, problem gambling behaviors under evaluation include: winning or losing over $25 in a day, gambling frequency, and having arguments with family or friends about gambling.

In 2012, most gambling was done by males and increased with older grades. Some minority groups (i.e., African American, American Indian) were more likely to have gambled. Students’ living arrangements and parental military involvement also affect the likelihood of student gambling. In addition, card games and sports were most common types of gambling. We also found a county’s rate of gambling behavior among students was not related to having a casino present in the county. Levels of gambling behavior were associated with the student’s thoughts of suicide, alcohol use, binge drinking, tobacco use, and drug use.

Currently, the Consortium is in the process of analyzing the 2014 IYS data and with it, further analyses of youth problem gambling.


Watch for more “fast facts” from the Iowa Consortium for Substance Abuse Research and Evaluation.
2014 Iowa Youth Survey

The 2014 Iowa Youth Survey (IYS) State Report has been released! Participation in the 2014 IYS was up from the 2012 survey by about 7,000 youth, to 77,139 students representing 85 percent of public school districts. The 2014 IYS is the 15th in a series of surveys that have been completed every two or three years since 1975. The survey is conducted with students in grades 6, 8, and 11 at Iowa public and private schools. The IYS includes questions about students’ behaviors, attitudes and beliefs, as well as their perceptions of peer, family, school, neighborhood, and community environments. IYS reports are generated by the Iowa Consortium for Substance Abuse Research and Evaluation.

According to the survey, substance use by Iowa middle and high school students has remained stable or decreased from the 2012 survey. Figure 1. below shows a sharp decrease in the binge drinking rate from the 1999 to the 2014 surveys, especially for older youth.

![Figure 1: Binge Drinking Post 30 Days](image)

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## 2014 Iowa Youth Survey

### A Matter of Substance

**The Iowa Youth Survey gives us a glimpse into the lives of our young people,** said **IDPH IYS coordinator Pat McGovern.** "While the answers represent a moment in time and do not give a complete view of the pre-teen and teenage mindset, they do give us a glimpse into their actions and beliefs. This enables us to tailor our programming and services in the most effective ways."

**Several new questions were added for the 2014 survey, including one that asked about the use of e-cigarettes during the past 30 days. The reported usage rates of e-cigarettes were 3 percent of 6th graders, 4 percent of 8th graders, and 11 percent of 11th graders. These rates were higher than reported past 30-day use of cigarettes or marijuana and suggest that additional data about e-cigarette use is needed.**

To view reports and other information about the IYS, visit [www.iowayouthsurvey.iowa.gov](http://www.iowayouthsurvey.iowa.gov) or contact Pat McGovern at [pat.mcgovern@idph.iowa.gov](mailto:pat.mcgovern@idph.iowa.gov).

### OWI Information

In Iowa, more arrests are made for Operating While Intoxicated (OWI) than for any other single criminal offense. In 2012, 21.9% (80) of all Iowa fatalities were alcohol-related Iowa Drug Control Strategy – 2014). OWI offenders in Iowa face both criminal and civil penalties. The court determines what criminal penalties to impose on the offender, which can include, but are not limited to, jail time, fines, education, substance abuse evaluation, community service, and restitution to victims.

Iowa law requires individuals who offend in Iowa or Iowa drivers who offend in another state to complete a course for drinking drivers. In Iowa, that means the Prime for Life (PRI) 12-hour curriculum.

The Iowa Department of Education Drinking Driver Program provides oversight of PRI certified instructors and mandated alcohol education classes. IDPH assists the Department of Education in verification of substance abuse evaluations and evaluating programs.

More information about Iowa’s OWI requirements can be found at the Iowa DOT OWI web page.

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**For more information about the Division of Behavioral Health, visit [www.idph.state.ia.us/bh](http://www.idph.state.ia.us/bh)**

For questions related to “A Matter of Substance,” contact the editors:

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Julie Hibben ([julie.hibben@idph.iowa.gov](mailto:julie.hibben@idph.iowa.gov))

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### TRAININGS AND EVENTS

#### 38th Annual Governor’s Conference on Substance Abuse — Pre-Conference Sessions

**March 30. Des Moines**

Veteran’s Memorial - Community Choice Credit Union Convention Center
- Ethics
- Group Counseling Skills and Techniques

For more information, go to [www.trainingresources.org](http://www.trainingresources.org).

#### *38th Annual Governor’s Conference on Substance Abuse*

**March 31 - April 1. Des Moines**

Veterans Memorial - Community Choice Credit Union Convention Center

For more information, go to [www.trainingresources.org](http://www.trainingresources.org).

#### A Closer Look at Alcohol

**April 9, Cedar Rapids**

ASAC Prevention Office

For more information, call 319-390-1884.

#### Protecting Families Spring Conference

**April 17. Sioux City**

For more information, call 712-279-2507.

#### Advancing MAT in Iowa

**May 7. Des Moines**

Watch for more information on the Training Resources website at [www.trainingresources.org](http://www.trainingresources.org).

#### Iowa Preventing Abuse Conference

**May 8-9. Mount Pleasant**

For more information, go to [www.preventingabuse.org](http://www.preventingabuse.org).

#### Dual Diagnosis and Correctional Supervision

**May 21. Cedar Rapids**

ASAC Prevention Office

For more information, call 319-390-1884.

#### 31st Annual National Rural Institute on Alcohol and Drug Abuse

**June 14-17. Menomonie, WI**

For more information, go to [http://www.uwstout.edu/profed/nri/reg.cfm](http://www.uwstout.edu/profed/nri/reg.cfm)