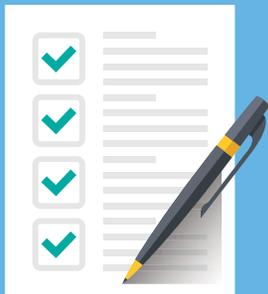




# The Check-Up

Updates on the progress of health care transformation initiatives



*The Check-Up is a health care transformation newsletter designed to keep interested Iowans up-to-date on the progress of emerging health care initiatives and issues. The Check-Up features updates on activities of the Iowa Department of Public Health's (IDPH) Office of Health Care Transformation (OHCT) and partners. The OHCT is a key point of contact for health care transformation initiatives within IDPH and emerging health care issues and policies. The OHCT monitors federal and state health care issues and disseminates the key information, opportunities and impacts to the public, and IDPH's internal and external partners.*

## Patient-Centered Health Advisory Council

The Iowa Department of Public Health's (IDPH) [Patient-Centered Health Advisory Council](#) serves as a key resource for feedback and recommendations to IDPH, the Legislature, and other stakeholders on issues related to health care transformation initiatives in Iowa. The council encourages partnerships and synergy between community health care partners in Iowa who are working on new system-level models to provide better health care at lower costs by focusing on shifting from volume to value-based health care. Additionally, the council aims to reduce silos of the health care system by convening stakeholders and leaders in Iowa, building relationships, and streamlining efforts.

The council meets quarterly and focuses their meetings on targeted topics that impact the health of Iowans. These topics are member chosen or legislatively charged. These meetings raise awareness and attention around these important issues. Key subject matter experts attend the meetings and educate council members and interested stakeholders about the topic, including the main issues, barriers and successes, particularly related to social determinants of health. The meetings provide a venue for the key stakeholders working on these issues to connect and learn from one another about current initiatives and efforts related to the topic.



## 2018 Final Report

The Patient-Centered Health Advisory Council 2018 Final Report summarizes the meetings that took place throughout 2018 and includes position statements for each meeting topic, which include:

- ✓ Brain Health - [Agenda & Minutes](#)
- ✓ Childhood Obesity - [Agenda & Minutes](#)
- ✓ Rural Health - [Agenda & Minutes](#)



**Rural health issues was addressed in the 2018 final report summary.**

## February 8, Meeting Summary

The Patient-Centered Health Advisory Council met Friday, February 8 at the West Des Moines Learning Resource Center from 9:00 a.m. to 3:00 p.m. This meeting focused on **children's health**. The [agenda](#) included an overview of IDPH's child health programs (Title V, 1st Five and Family Support/Home Visiting), the Child and Family Policy Center's Child Opportunity Scorecard, a presentation on Brain Science from Blank Children's Hospital, and discussions on how policy and social determinants of health impact children's health. View the [meeting minutes](#) for more information.



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## Palliative Care Legislation Charge



During the 2017 legislative session, the Patient-Centered Health Advisory Council was charged by [House File 393](#) to review the public's awareness of palliative care, provide recommendations to increase awareness and address barriers. The council conducted an online statewide survey to gauge the public's awareness of palliative care and received around 600 responses. The results of the survey and recommendations developed by the council are located in the final report, which was submitted to the Governor and the General Assembly and can be accessed here: [Palliative Care Awareness in Iowa](#)

A [Des Moines Register](#) editorial written by Dr. Yogesh Shah, a Palliative Care Physician on the Patient-Centered Health Advisory Council, highlights the importance of palliative care and explains how it is different than hospice care. The editorial also references the report created by the council.



## Iowa Medicaid UnitedHealthcare to Leave IA Health Link Program

On March 29, 2019, the Department of Human Services (DHS) received notice from UnitedHealthcare that it would be leaving the IA Health Link program. UnitedHealthcare members will be sent notices providing a choice in MCO. They can choose Amerigroup Iowa or Iowa Total Care for their coverage. Iowa Total Care will begin providing coverage for IA Health Link and **Hawki** members July 1, 2019. Find more details on the [UnitedHealthcare Withdraw Frequently Asked Questions](#) webpage.



**Performance monitoring reports are critical to assess how well Iowa's MCOs are working.**



### Iowa Medicaid Managed Care Quarterly Reports

Performance monitoring and data analysis are critical components in assessing how well Iowa's MCOs are maintaining and improving the quality of care delivered to members. The [quarterly reports](#), with a number of elements required through oversight legislation, are comprehensive and focus on compliance areas, as well as health outcomes over time. Below is the most recent report:

✓ [State Fiscal Year 2019, Quarter 1](#)

### Iowa Medical Assistance Advisory Council (MAAC)

The purpose of MAAC is to "Advise the Director of the Department of Human Services about health and medical care services under the medical assistance program." MAAC is mandated by federal law and further established in Iowa Code. MAAC membership includes 43 entities designated in Iowa Administrative Code representing professional and business entities. It also includes 10 public representatives. A MAAC Executive Committee, whose members are appointed by the full council, provides guidance to the group and makes recommendations. All MAAC meetings are open to the public. For more information and to view the meeting schedule, visit [https://dhs.iowa.gov/ime/about/advisory\\_groups/maac](https://dhs.iowa.gov/ime/about/advisory_groups/maac).

### Iowa Council on Human Services

DHS coordinates the Iowa Council on Human Services, which acts in a policymaking and decision-making capacity on matters within the jurisdiction of DHS. For more information and meeting dates, visit <http://dhs.iowa.gov/about/dhs-council>.

### Managed Care Ombudsman Program Reports & Materials

The [Managed Care Ombudsman Program](#) advocates for the rights and needs of Medicaid managed care members in Iowa who live or receive care in a health care facility, assisted living program or elder group home, as well as members enrolled in one of Medicaid's [seven](#) home and community-based services waiver programs.

- ✓ The Managed Care Ombudsman Program develops monthly and quarterly reports which can be accessed [here](#).
- ✓ The Managed Care Ombudsman Program developed a guide called "How to Be Your Own Best Advocate: A Guide on How to Navigate Managed Care in Iowa."

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## Iowa Initiatives

### Iowa State Innovation Model

Iowa's State Innovation Model (SIM) initiative is a four-year federal grant through the Center for Medicare and Medicaid Innovation. Iowa's SIM grant ends April 30, 2019; however, many aspects of this work will continue in some capacity. The grant focuses on the following aims:

- ✓ Improve population health
- ✓ Transform health care
- ✓ Promote sustainability

### Community and Clinical (C3) Initiatives

Seven Community and Clinical Care (C3) initiatives were established through Iowa's SIM grant. C3s are community-level, multi-sector groups of stakeholders implementing innovative strategies and referral processes to meet the clinical and social needs of the target population through person-centered, coordinated care. The target population for Iowa's SIM grant are individuals at risk for, or having diabetes. C3s have two primary functions:

1. Addressing social determinants of health through care coordination; and
2. Implementing population-based, community-applied interventions related to the [Iowa SIM Statewide Strategies](#).

Each C3 is unique and has experienced great successes. Summaries of each C3 can be viewed [here](#).

### Iowa SIM Healthcare Innovation and Visioning Roundtable Recommendations

The purpose of the [Iowa SIM Healthcare Innovation and Visioning Roundtable](#) is to engage leaders around the state to develop consensus and transform how the health care system operates to best serve the needs of all Iowans. The group will identify and prioritize elements necessary for reform, such as specific payment models, infrastructure support, and policy and regulatory shifts necessary to fuel progress. The Roundtable has developed recommendations regarding necessary steps to implement reform for Iowans that is both cost-effective and improves the health of our citizens.

- ✓ The recommendations can be accessed here: [Recommendations on Improving the Health of Iowans from the Healthcare Innovation and Visioning Roundtable](#)



### SIMplify Newsletter

The SIMplify newsletter highlights key information and events related to Iowa's SIM project. To subscribe to the Iowa Healthcare Collaborative's monthly SIMplify newsletter or to view past newsletters, [click here](#).

### Iowa Health Insurance Marketplace

Open Enrollment for the 2019 Health Insurance Marketplace took place November 1, 2018, through December 15, 2018. The Centers for Medicare & Medicaid Services released the [Health Insurance Exchanges 2019 Open Enrollment Report](#). The report confirms a successful open enrollment period coinciding with a stabilization of premiums after years of substantial increases. Specifically, the report shows plan selections in Marketplace plans remained steady at 11.4 million. The average total premiums for plans selected through [HealthCare.gov](#) dropped by 1.5% from the prior year, the first decline since the Marketplace began operations in 2014.

Data from Gallup National Health and Well-Being Index shows that **uninsured rates in the United States have risen to a four-year high** at 13.7% uninsured. The national uninsured rate has risen steadily since 2016. Data show that women, younger adults and lower-income individuals have the greatest increases. Read the full article [here](#).

### 2019 Iowa Marketplace Enrollment Date

- 49,210 Iowans selected a Marketplace Plan
- 43,886 Iowans received an Advanced Premium Tax Credit (APTC)
- \$918 was the Average Premium
- Average APTC among Iowans receiving APTC: \$888
- Average Premium after APTC among Iowans receiving APTC: \$50

Open Enrollment for 2019 is over, but Iowans may still be able to enroll in a Marketplace health insurance plan for 2019 if they qualify for a [Special Enrollment Period](#) for certain life events, like getting married, having a baby or losing other health coverage. To determine if someone qualifies for a Special Enrollment Period, visit this screening tool: [www.healthcare.gov/screener/marketplace.html](http://www.healthcare.gov/screener/marketplace.html)

There is no enrollment period for any Medicaid program. Individuals can continue to apply for Medicaid and hawk-i through Iowa DHS by visiting <https://dhsservices.iowa.gov> or [widgets & badges](#).



**Uninsured rates in the U.S. have risen to a four-year high of 13.7% uninsured.**



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## Iowa Department of Public Health Accreditation

The Iowa Department of Public Health received national accreditation from the Public Health Accreditation Board (PHAB) on November 20, 2018. The department has approached accreditation as an effort in quality improvement. The overall goal is to demonstrate ability to meet public health best practices as defined by the national standards and measures. The accreditation application process was led by cross-department teams who identified documentation that showed the department's ability to meet PHAB standards and measures. Department leadership have identified several benefits of accreditation work including:

- ✓ the ability to hone in on specific opportunities to improve
- ✓ providing a mechanism for important cross-department conversations
- ✓ raising the importance of documenting our work
- ✓ the embedding of workforce development, quality improvement, communication, performance management and health equity in the department's work

For more information about national accreditation, visit [www.phaboard.org](http://www.phaboard.org).



**IDPH received national accreditation for the Public Health Accreditation Board November 20, 2018**



## Iowa Community Health Worker Implementation and Apprenticeship Project

With guidance and leadership from the Iowa Community Health Worker Alliance, the Iowa Chronic Care Consortium (ICCC) is fostering the presence of a community health worker (CHW) workforce in Iowa. Linking clinical care with community resources and improving health care navigation via utilization of CHWs is a key strategy to engage underserved populations and address social determinants of health.

Recognizing the need to demonstrate the value of this workforce while also building training infrastructure, ICCC developed a two-pronged approach – a demonstration project and development of a robust course to advance the skills of the CHW workforce. With these components in place, ICCC expects to demonstrate value and legitimize CHW roles, so that state leaders and policymakers, along with health systems, payers and nonprofits embrace the need to deploy and expand opportunities for this workforce in Iowa.

### Demonstration

ICCC will partner with nonprofit organizations to place CHWs that will receive training and support over the period of one year. ICCC will support these nonprofits and the CHWs by providing the training as well as additional opportunities for networking and support for CHWs and their supervisors. CHWs will be placed in a range of health and human service organizations and serve in a variety of roles over this three-year demonstration designed to test the utilization and value CHWs bring to the health care team. In addition to the organizations' own data collection, an overall evaluation of the demonstration will highlight strategies that have shown to be effective, assess satisfaction with the addition of CHWs to the health care team, and illustrate how CHWs have been instrumental in improving patient connection with services and outcomes.

### Training course

ICCC is partnering with Iowa Workforce Development to develop a U.S. Department of Labor-approved Registered Apprenticeship. For CHWs, this involves one year of on the job training provided by the employer, and extensive classroom training that will be provided by ICCC. CHWs supported through the demonstration project will participate in the Registered Apprenticeship program. Upon successful completion, the CHW will earn a national credential as a CHW – a valuable asset should any CHWs move across state lines.

Alongside the apprenticeship, the classroom component of the training course will be available as a stand-alone offering for organizations without capacity to participate in the Registered Apprenticeship. CHWs may enroll in either component and learn together.

Findings from the three-year demonstration will be disseminated and an implementation guide will be developed to assist organizations in adopting and implementing this workforce.



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## Federal News

### CMS Value-Based Models Could Stretch Beyond Medicare

CMS Administrator Seema Verma said the agency is exploring ways to apply its value-based payment models beyond Medicare and encourage more providers to buy in to the programs.

Currently, only 14% of Medicare providers participate in value-based arrangements, Verma said at the CMS Quality Conference in Baltimore. But the agency hopes its new cadre of models will change that. The CMS will develop templates that states can use to implement similar pay models in their own programs, she said. Read the full article [here](#).



Currently, only **14%** of Medicare providers participate in value-based arrangements.



### HHS to Deliver Value-Based Transformation in Primary Care

On April 22, HHS Secretary Alex Azar and CMS Administrator Seema Verma are announced the CMS Primary Cares Initiative, a new set of payment models that will transform primary care to deliver better value for patients throughout the healthcare system. Building on the lessons learned from and experiences of the previous models, the CMS Primary Cares Initiative will reduce administrative burdens and empower primary care providers to spend more time caring for patients while reducing overall health care costs. For more information, visit <https://www.cms.gov/newsroom/press-releases/hhs-news-hhs-deliver-value-based-transformation-primary-care>



## IDPH News

### Iowa Youth Survey: Suicide Risk and E-Cigarette Use Climbing; Alcohol Use Declines

The IDPH 2018 Iowa Youth Survey shows in general, underage drinking continues to decline. Alcohol use among Iowa 11th graders was down from 26.4% in 2012 to 20.4% in 2018. Binge drinking fell from 19.2% in 2012 to 12.0% in 2018. An exception to the overall decline came among eighth graders, who reported a significant increase in drinking from 2016 to 2018, from 5.4% in 2016 to 7.3% in 2018 - a level not seen since 2012. For more information, visit [here](#).



### I-Smile™ Program Helps More than 54,000 Iowa Children in 2018

The IDPH I-Smile™ Dental Home Initiative is a program that helps Iowa's children connect with dental services. Last year, I-Smile™ helped more than 54,000 Iowa kids find dental care. Since 2006, more than 554,000 fluoride applications and 372,000 dental sealants have been provided for children through I-Smile™. For more information, visit [here](#).



Since 2006, more than **554,000 fluoride applications** and **372,000 dental sealants** have been provided.



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## Social Determinants of Health

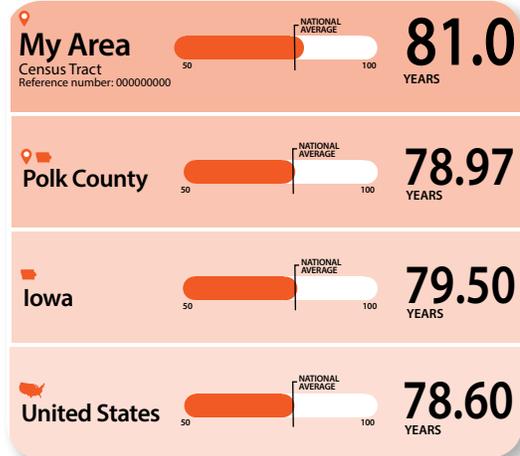
### New Neighborhood-Level Data on Life Expectancy



A new tool has been released that estimates life expectancy down to the neighborhood-level using census data. For the first time in history, the United States is raising a generation of children who may live sicker and shorter lives than their parents. Reversing this trend will, of course, depend on healthy choices. But not everyone in America has the same opportunities to be healthy. Developed with support from the Robert Wood Johnson Foundation, this data makes it possible to understand how much our health is influenced by conditions where we live.

Compare how your area's life expectancy measures up to the national average, and explore resources to help illuminate these disparities and enable everyone to have the opportunity to live a healthier life. Enter your address here.

[CLICK HERE](#)



## Des Moines Life Expectancy\*



- 4 miles distance between 50312 & 50314
- 8 years difference in life expectancy
- Iowa average life expectancy is 79.5 years

\* Source: <https://www.rwjf.org/en/library/interactives/whereyouliveaffectshowlongyoulive.html>



## ✓ Contact Information

For more information on the work of IDPH's Office of Health Care Transformation, visit <http://idph.iowa.gov/ohct>

