

HEALTHY AND WELL KIDS IN IOWA (*hawk-i*)
BOARD MEETING
MINUTES
February 17, 2003

BOARD MEMBERS:

Eldon Huston, Chair (absent)
Terri Vaughan, Vice-Chair
Charlotte Burt (for Ted Stilwill)
Julie McMahon (for Public Health)
Susan Salter
Wanda Wyatt-Hardwick
Jim Yeast (absent)

LEGISLATIVE BOARD MEMBERS:

Senator Kenneth Veenstra (absent)
Senator Amanda Ragan (absent)
Representative Brad Hansen (absent)
Representative Jane Greimann (absent)

DEPARTMENT OF HUMAN SERVICES:

Anita Smith

ATTORNEY GENERAL'S OFFICE:

Marne Woods

GUESTS:

Christopher Cruise
Dee Bradley
Barbara Fox-Goldizen
Sonni Vierling
Angie Doyle Scar
Karen Brown
Deb Kazmerzak
Tim Gibson
Carrie Nordling
Beth Jones
Sarah Taylor
Mary O'Brien
Lisa Huff
Denise Hill
Erin Paugh

AFFILIATION

Broadlawns Hospital
hawk-i Outreach
MAXIMUS
Dept. of Public Health - Covering Kids & Families
hawk-i Outreach
Center for Healthy Communities
Covering Kids Task Force
John Deere Health
Des Moines Public Schools *hawk-i* Outreach
Dept. of Public Health - Covering Kids & Families
Dept. of Public Health - Covering Kids & Families
Visiting Nurse Services
Center for Healthy Communities
Iowa Medical Society
Visiting Nurse Services

MEETING CALLED TO ORDER:

The Healthy and Well Kids in Iowa (*hawk-i*) Board met on Monday, February 17, 2003, in the Oak Room, Des Moines Botanical Center, 909 E. River Drive, Des Moines, Iowa. Terri Vaughan, Vice-Chair, called the meeting to order at 12:40 p.m.

WELCOME, INTRODUCTIONS, AND ROLL CALL:

Ms. Smith took the roll call, a quorum was not present.

REVIEW OF CORRESPONDENCE, REPORTS, & OTHER STATE NEWS:

Ms. Smith reviewed the correspondence.

- Wellmark's monthly comparison data on generic drug usage. Generic drug use was reported at 63.4%, up slightly from the previous month.
- February 5, 2003, press release from CMS. National SCHIP enrollment has increased 15%. There were 5.3 million children covered in Federal Fiscal Year (FFY) 02 compared to 4.6 million in FFY 01.
- A ranking of enrollment among the 50 states shows that Iowa increased enrollment 32.57% in FY 02 over FY 01. Iowa's increase was so significant that it prompted questions from federal officials asking why there was such a large increase compared to other states. Seven states experienced decreased enrollment during the same period: Arkansas, Idaho, Maine, Michigan, New York, Utah, and Virginia. Ms. Smith reported that other states in our region experienced increases, but not at the rate that Iowa did. Kansas had a 15.95% increase, Missouri 4.5%, and Nebraska 14.14%. Ms. Smith said there are no specific factors she can point to as to why Iowa's enrollment was so significant. It could be that Iowa has steadily increased enrollment, the outreach activities have been continuously stable, and at the same time the economy has declined. The increase nationally was 13.04%.
- A February 6, 2003, Reuters article reports that a compromise announcement by the Energy and Commerce Committee would let states keep much of the unused SCHIP funds. It is not known how this will tie in with the January 23rd Senate colloquy.
- January 31, 2003, Health and Human Services press release that indicates the Bush administration will propose innovative improvements in states' health coverage for low-income Americans. The 2004 budget proposal allows for only one additional year to spend FFY 00 SCHIP funds. States that are not yet at their full entitlement spending levels would not be allowed to retain any FFY 00 funds (Iowa). The proposal does not restore the 1.2 billion in unspent FFY 98 and 99 funds to the SCHIP allotments. The proposal does allow states to merge their SCHIP allotments and Medicaid funds. This is being called the Medicaid modernization concept. States that choose this option must agree to it for 10 years. The Medicaid modernization concept would allow states an option to substantially revamp their optional Medicaid services and coverage groups. Ms. Smith said that more information will be forthcoming.
- Government & Medicine Magazine article states that a survey of uninsured Americans indicates almost half of the uninsured also have previous medical debt that prevents them from receiving medical care for current needs. The article discusses the impact medical debt is having on bankruptcy and the reduced availability of charity care.
- An update on the activities of "Cover The Uninsured Week" in March. Ms. Smith said that the activities for Iowa have not been finalized, but as they are she will keep the Board apprised.

Wanda Wyatt-Hardwick arrived at the meeting at this time.

Activities in other states include:

- Alabama's new Governor has rescinded executive orders by the previous Governor; one of which was to allow state employees' children to receive coverage under their SCHIP program.
- Arkansas has a proposal that would expand their ARKids program to college students. This proposal would be funded using state-only dollars to cover kids as long as they are in college.
- New Jersey will cut parents who earn above 133% of FPL, childless adults, and illegal immigrants. A waiver has been approved to expand New Jersey's CHIP program to uninsured parents 133% of FPL.
- Virginia reports increased enrollment due to CHIP program reforms. The article said that enrollment was 50,728, up from 36,134 two years ago. Ms. Smith noted that this was in conflict with the report she shared earlier comparing the 50 states. That reported shows that Virginia actually had a decrease in enrollment.

ADMINISTRATOR'S REPORT:

Budget:

Ms. Smith reported that to year-to-date expenditures total \$5,580,502; 45.31% of projections. Interest earned from the *hawk-i* trust fund is \$72,940.

Enrollment & Statistics:

January 2003 was the first month in several months that *hawk-i* had an increased enrollment at the time the reports were generated. Current enrollment was up 344 over December. Current enrollment is 26,831.

The "How You Heard About *hawk-i*" report shows quite a few referrals in January as a result of the efforts through the free and reduced lunch program.

Legislative Update:

There have been several bills introduced that will impact *hawk-i*:

- House File 49 by Representatives Greimann and B. Hansen. The bill makes technical amendments to Iowa Code Section 514I to accurately reflect the policies and procedures adopted by the *hawk-i* Board and eliminates the policy that requires a six-month waiting period for families who drop employer-sponsored coverage.
- House File 136 by Representatives Greimann, Petersen, Wise, et al. The bill adds the benefits as recommended by the Clinical Advisory Committee to *hawk-i*'s benefit package.

- House File 161 by Representative Heaton. The bill requires the administrator of Medicaid and **hawk-i** be appointed by the DHS Director, serve at the pleasure of the Director, and be subject to confirmation by the Senate. The bill also amends Iowa Code Sections 249A and 514I to repeal the definition of the Director of Human Services and provide for the administrator of those programs to perform those functions.
- Senate File 26 by Senator Ragan. This is a companion bill to HF 49.
- There is a legislative study bill that would expand **hawk-i** to 300% of poverty and directs the Department to use waivers and other methods to secure additional federal funding.
- House File 171 is the Code Editor's technical amendments to the Code. There is a provision that would change the upper case HAWK-I to the lower case **hawk-i** throughout the Code.

Ms. Smith said that in addition to those above, informational requests have been received regarding the impact of covering both parents and children to 300% of FPL using waivers. CMS has indicated that they are not approving any new waivers that also don't contain an employer buy-in provision. Ms. Smith said this information has been relayed to the Legislative Service Bureau and is included in the bill draft. The proposal has not been introduced as a formal bill.

There have been several bills having to do with mental health parity that, if passed, would require that mental health parity be included in the **hawk-i** program.

Ms. Smith said that the Department has also received a request to provide information on covering unborn children under **hawk-i**. The Department had some discussions with CMS and indicated that if this was passed they would do a Medicaid expansion to cover the unborn children via the pregnant mother as part of the mothers and children program. CMS said that the state could not do a Medicaid expansion to cover pregnant women because the law that changes the definition of children to include unborn fetus was only changed in SCHIP, it was not changed in Medicaid. Ms. Smith said that the Department explained that it would be a lot more expensive and a lot more administratively cumbersome to create a separate **hawk-i** program only for pregnant women to provide only pregnancy-related services. A conference call with CMS took place on February 14th and the Department inquired about doing a Medicaid "look-alike" program. In other words, it would be called a separate SCHIP program, but would use Medicaid delivery service and eligibility systems. CMS was agreeable to this. Ms. Smith said the Department estimates there would be approximately 1,000 pregnant women per year who would be served.

GRASSROOTS OUTREACH UPDATE:

Jane Borst introduced Angie Doyle Scar, the new **hawk-i** outreach coordinator:

Ms. Doyle Scar began her duties on February 5th and orientation activities include:

- 1) meeting with key personnel from IDPH, DHS and MAXIMUS
- 2) becoming familiar with the 27 local outreach projects
- 3) planning meetings with local outreach coordinators.

Ms. Doyle Scar is coordinating development of an updated work plan for statewide outreach activities.

Local Outreach Activities: Local activities are focused on continued progress on agency work plans. Technical assistance to agencies will concentrate on those who reported a delay in initiating activities due to staff shortages. Linda Lantz will be assisting with initial agency visits.

Planning for 2004 Outreach Activities: Guidance for Continuation Applications for FY 2004 will be issued on March 7, 2003, and are due back to IDPH on May 12th. Technical assistance will be available to agencies that request help with work plan development.

Training: Local outreach coordinators will be attending the state's "Public Health Conference, Changing the Future" on March 26th in Ames. This is a two-day conference, but the coordinators are required only to attend the second day where there will be a presentation on social inequities and its effect on health outcomes and two breakout sessions specifically designed for the outreach coordinators. Ms. Borst said that any Board members who would like to attend that day are welcome to attend as guests.

COVERING KIDS & FAMILIES TASK FORCE:

Deb Kazmerzak distributed the Task Force's "2003 Winter Report". This report will be shared with the legislature on February 18, 2003. The report is an extensive review of the issues the task force has considered over the years and what they feel are emerging issues relating to **hawk-i** and Medicaid.

Ms. Kazmerzak summarized the three findings and recommendations:

- 1) Coordination among programs.
 - Eliminate or reduce the six-month waiting period to access **hawk-i**
 - Better align Medicaid and **hawk-i** eligibility guidelines
- 2) Simplification of enrollment.
 - Simplify Medicaid forms, correspondence, and other paperwork
 - Develop an electronic application
 - Move toward a system of 12-month continuous eligibility for Medicaid
- 3) Increasing public awareness
 - Develop systems for raising **hawk-i** awareness through employers

- Embark upon a statewide media campaign promoting Iowa's children's health insurance programs.

The report contains a full explanation of each of these recommendations.

The task force is currently working on a series of issue briefs that will delve more deeply into certain issues. The first two are continuous eligibility and the HHS guidelines for the unborn child.

Julie McMahon arrived at the meeting at this time. A quorum is now present.

PUBLIC COMMENT:

There were no public comments.

NEW BUSINESS:

Ms. Smith reported that the Office of Inspector General's (OIG) audit continues. The Department will also be receiving formal notice in the near future that CMS will be conducting a compliance audit to ensure Iowa is complying with all the SCHIP regulations that were finalized last Spring. Also, on February 19th there is an entrance conference with OIG who will be auditing the Medicaid systems, so *hawk-i* may be involved in that audit as well.

Ms. Smith said that she and Ms. Doyle Scar have met to discuss priorities. CMS has noted in their earlier compliance visits that they would like Iowa to have more interactions with the Native American Tribes along the Iowa-Nebraska border. This will be one of the priorities Ms. Doyle Scar will be addressing.

There was no other new business to present before the Board.

APPROVAL OF MINUTES OF JANUARY 27, 2003, MEETING:

Wanda Wyatt-Hardwick made a motion to approve the January 27, 2003, meeting minutes as written. Susan Salter seconded the motion. Unanimous approval was made by Julie McMahon, Wanda Wyatt-Hardwick, Charlotte Burt, Susan Salter, and Terri Vaughan.

Susan Salter moved for adjournment. Julie McMahon seconded the motion. Unanimous approval was made by Julie McMahon, Wanda Wyatt-Hardwick, Charlotte Burt, Susan Salter, and Terri Vaughan.

The Board's next meeting is Monday, February 17, 2003, at 12:30 in the Oak Room at the Des Moines Botanical Center.