

Iowa Department of Public Health

✓ The Check-Up

An update on issues and ideas Related to health reform in Iowa

The Check-Up is a health care reform newsletter designed to keep interested Iowans up to date on the progress of health reform initiatives.

The Check-Up will feature updates on activities of the Office of Health Care Transformation, which is a key point-of-contact for health care reform initiatives within IDPH including Accountable Care Organizations, Health Benefits Exchange, Chronic Disease Management Initiatives, and Patient-Centered Medical Homes/Health Homes. The Check-Up also features health reform councils as authorized by HF 2539 (2008) including activities related to the Federal Patient Protection and Affordable Care Act (ACA) (HR 3590) and other activities related to the focus of the councils.

Office of Health Care Transformation (OHCT)

The OHCT is the key point-of-contact for ACA related initiatives at IDPH including Health Insurance Exchange, Accountable Care Organizations, Patient-Centered Medical Home/Health Homes, prevention and chronic care management initiatives, community utility and care coordination. The mission of the OHCT is to promote community care coordination and advance the patient-centered transformation of the health care system, which will improve care and reduce cost. The overarching goals of the OHCT are convening stakeholders, building relationships and partnerships, streamlining efforts, presents to and offer technical assistance to a variety of organizations including outside stakeholder groups, Local Public Health Agencies and Maternal and Child Health grantees to prepare for ACA implementation.

[Prevention and Chronic Care Management/Medical Home \(PCCM/MH\) Advisory Council](#)- The

OHCT also coordinates the PCCM/MH Advisory Council. The Council includes representation from health care, state agencies, academia and consumers. The vision of the Council is below. The PCCM/MH Advisory Council [2012 Annual Report](#) gives an overview of the Councils, lays out their progress reports with recommendations, and summarizes the activities that the Councils have accomplished since their creation. The Council last met on Wednesday, August 21st. Information about the meeting including the PowerPoint presentations can be found [here](#). Agenda items included:

- Iowa Wellness Plan – *Jennifer Vermeer- Iowa Medicaid Enterprise*
- Integrated Health Homes- *Maria Montanaro – Magellan*
- Community Care Coordination- *Iowa Primary Care Association*
- 1st Five- Community Utility Examples- *Gretchen Hageman – Iowa Department of Public Health- Bureau of Family Health*
- State Innovation Model- *SIM Workgroup Members*

Next Meeting: November 15th, 2013 from 9:30 – 3:00 at the Iowa Hospital Association

July – October
2013

Websites

Advisory Councils

[Prevention and Chronic Care Management/Medical Home](#)

[Iowa e-Health](#)

[Health and Long-Term Care Access](#)

[Direct Care Worker](#)

[Patient Autonomy in Health Care Decisions Pilot Project \(IPOST\)](#)

Other Iowa HCR Activities

[Community Transformation Grant](#)

[Office of Health Care Transformation](#)

[Health Insurance Marketplace](#)

Issue Briefs

The PCCM/MH Advisory Council develops issue briefs on a variety of important topics related to prevention, chronic disease management, and the spread of the PCMH in Iowa. The issue briefs educate stakeholders and policymakers on Iowa specific information and data and may include recommendations from the Council related to the topic.

- [Chronic Disease Management](#)
- [Disease Registries](#)
- [Prevention](#)
- [Diabetes in Iowa](#)
- [Patient Centered Care- What Does it Look Like?](#)
- [Social Determinants of Health](#)
- [Community Utility](#)

Legislative Charges

The OHCT has led a number of legislative charges to address chronic disease management. These include:

- House File 2144 directed IDPH to develop recommendations on strategies to collect and provide statistically accurate data concerning chronic disease in multicultural groups of racial and ethnic diversity in Iowa.
 - [Report- Data Collection of Chronic Diseases in Multicultural Groups of Racial & Ethnic Diversity in Iowa](#)
- Senate File 2336 charged IDPH to partner with the Iowa Department of Education and other key stakeholders to work on developing guidelines for the management of chronic conditions in Iowa schools.
 - [Report- Guidelines for the Management of Chronic Conditions in Iowa Schools](#)
- Senate File 2356 charged IDPH to develop a plan to coordinate care for individuals with diabetes who receive care through safety net providers. A number of different Iowa specific tools have been created for this:
 - [Diabetes Focus Groups Report](#)
 - [Iowa Diabetes Issue Brief](#)
 - [Diabetes Clinical Subcommittee Recommendations](#)
 - [Iowa Diabetes Action Plan](#)
 - [Iowa Diabetes Care Flowsheet](#)
 - [Iowa Algorithm for Prediabetes and Type 2 Diabetes](#)

OHCT Partner News-

[Community Care Coordination Plan](#)- This legislative session, [Senate File 446](#) allocated \$1,158,150 to the Iowa Primary Care Association to be used for the development and implementation of a statewide regionally based network (often times referred to as community utility) to provide an integrated approach to health care delivery through care coordination that supports primary care providers and links patients with community resources necessary to empower patients in addressing biomedical and social determinants of health to improve health outcomes. The PCCM/MH Advisory Council had made a recommendation to pursue a community utility model in Iowa and the OHCT is a key partner in the development of this plan. More information can be found [here](#).

[State Innovation Model \(SIM\)](#)- The SIM is an effort funded by CMS and led by Iowa Medicaid Enterprise to help states develop and test new multi-payer models and health care delivery systems. On February 21, 2013, CMS announced that Iowa had been granted a Model Design Award, which provides Iowa with the funding to develop a State Health Care Innovation Plan over a six month period. Iowa was awarded \$1,350,711 to develop its plan for lowering costs and improving quality of care for its Medicare, Medicaid, and CHIP populations. When the design phase is complete, Iowa will have six months to submit a Health Care Innovation Plan to CMS as an application for a Model Testing Award. Four workgroups with specific design objectives met four times between July and early September. More information about the four workgroups can be found here:

- [Metrics and Contracting Workgroup](#)
- [Long Term Care Workgroup](#)
- [Mental Health and Substance Abuse Workgroup](#)
- [Member Engagement Workgroup](#)

The DHS website has more information about Iowa's SIM can be located [here](#).

Office of Health Care Transformation (cont.)

Health Homes for Medicaid Enrollees with Chronic Conditions- Section 2703 of the ACA gives states the option to submit a State Plan Amendment (SPA) depicting a health home model of care. There is a drawdown of funding a 90/10 Federal match rate for eight quarters. Iowa Medicaid Enterprise has developed a Primary Care Health Home Program which was effective on July 1st, 2012. Eligible individuals include those who have at least two chronic conditions or one and are at risk for a second from the following: Mental Health Condition, Substance Use Disorder, Asthma, Diabetes, Heart Disease, Obesity, and Hypertension. Currently enrolled are 22 health home entities covering 54 different clinic locations in 21 counties with 5354 individual practitioners. There are over 2270 members assigned to Health Homes. A second SPA is currently being developed called Specialized Health Homes for members with a Serious and Persistent Mental Health (SPMI) Condition. More information can be found here: <http://www.ime.state.ia.us/providers/healthhome.html>

Medical Homes in Iowa- Currently, there are 37 clinics and 288 practitioners in Iowa that are NCQA medical homes. Visit [NCQA's website](#) to access the current list of NCQA certified physicians/practices in Iowa. Be sure to select in the drop-down list "Physician Practice Connection- Patient Centered Medical Home" and then select "Patient Centered Medical Home 2011". These two lists combined equal the full list in Iowa. NCQA has a new certification called "*Patient-Centered Medical Home Certified Content Expert™*". The PCMH Content Expert has comprehensive knowledge of the requirements, the application process and the documentation of the NCQA PCMH Recognition Program. Certified content experts are required to complete two NCQA educational seminars, pass a comprehensive exam and commit to continuous learning and recertification to maintain the credential. The list of PCMH Content Experts can be accessed [here](#). Iowa Primary Care Association's Pamela Lester is a certified PCMH Content Expert.

Accountable Care Organizations (ACO)- The ACA includes a number of policies to improve the safety and quality of patient care and make health care more affordable. By focusing on the needs of patients and linking payments to outcomes, these delivery system reforms will help improve the health of individuals and communities and slow cost growth. An ACO is an entity that is clinically and fiscally accountable for the entire continuum of care that patients may need. They are groups of doctors, hospitals, and other health providers, who come together voluntarily to give coordinated, quality care to patients.

- The [Pioneer ACO Model](#) was launched on January 1st, 2012 with 32 organizations to test the ACO model. One Iowa community was selected to participate in the Pioneer ACO Model- TriHealth, Inc. in Fort Dodge. There is a [new video on the Pioneer ACO](#) in which you can hear directly from the health care professionals making this care possible.

More information about ACO's in Iowa:

- Wellmark is collaborating with 5 health systems in an ACO- <http://www.wellmark.com/Member/HealthInsurance101/ACO.aspx>
- University of Iowa Hospitals and Clinics and MercyCare Community Physicians- <http://uimercyaco.org>.

ACO Toolkit- The Toolkit is designed to serve as a reference guide for those in the health care industry who are interested in learning more about ACOs and how they can prepare to participate.

Affordable Care Act Resources

- New Report from the *Journal of Public Health Management and Practice* - [Public Health's Role in Health Care Reform: Lessons Learned in Massachusetts](#)
- Healthcare.gov has released a new educational video explaining what a HBE is. This video can be found [here](#).
- "[Health Reform Hits Main Street](#)" is a short, animated video explaining the ACA.
- Healthcare.gov has put together a collection of [online personal videos and blog stories](#) of Americans helped by the ACA.
- Learn more about how the health reform law will affect the health insurance coverage options for individuals, families and businesses with the interactive feature "[Illustrating Health Reform: How Health Insurance Coverage Will Work.](#)"
- The [Health Care Reform Implementation Timeline](#) is an interactive tool designed to explain how and when the provisions of the ACA will be implemented over the next several years.
- [HHS.gov has an ACA Resource Page](#) that offers brochures, factsheets, PowerPoint presentations, and other materials related to the implementation of the ACA.

Iowa Health and Wellness Plan- To find the most up-to-date information and documents related to the Iowa Health and Wellness Plan, visit: <http://www.ime.state.ia.us/iowa-health-and-wellness-plan.html>.

Health Insurance Marketplace

Beginning in 2014, tens of millions of Americans will have access to health coverage through newly established Health Insurance Marketplaces in each State. Individuals and small businesses can use the Marketplaces to purchase affordable health insurance from a choice of products offered by qualified health plans. The Marketplace will ensure that participating health plans meet certain standards and facilitate competition and choices by rating health plans' quality. Individuals and families purchasing health insurance through the Marketplace may qualify for premium tax credits and reduced cost-sharing if their household income is between 138% and 400% of the federal poverty level. The Marketplace will coordinate eligibility and enrollment with State Medicaid and *hawk-i* ensure all Iowans have affordable health coverage. Iowa has formed a Health Insurance Marketplace Interagency Workgroup with the Iowa Insurance Division, the Iowa Department of Human Services, and Iowa Department of Public Health.

DHS is working on the development of a new, integrated eligibility system that will have the functionality to determine eligibility for exchange tax credits as well as for Medicaid, *hawk-i* and other state programs. This new eligibility system is called **Eligibility Integrated Application Solution**, or the **ELIAS** Project. ELIAS is the eagerly anticipated replacement for the current outdated system.

Iowa's Navigator Grant Recipients

Iowa has 3 awards totaling \$514,002:

- **Genesis Health System: Received \$128,430**
Genesis Health System will implement a navigator program through the Genesis Visiting Nurses Association (GVNA). Genesis plans to use existing relationships to aid residents and small business in accessing new sources of coverage.
- **Visiting Nurse Services of Iowa: Received \$257,142**
The Visiting Nurse Services of Iowa will implement a navigator program serving 38 of Iowa's 99 counties, home to approximately half of the uninsured in Iowa. The Visiting Nurse Services will provide navigator services through public awareness, education and assistance in enrolling individuals in qualified health plans. They also will partner with other organizations with considerable expertise in eligibility, enrollment, and knowledge of other health programs such as Medicaid and CHIP.
- **Planned Parenthood of the Heartland: Received \$214,427**
Planned Parenthood of the Heartland (PPHeartland) is a private, non-profit community-based health care agency operating in Arkansas, Iowa, Nebraska and Oklahoma. In Iowa, PPHeartland plans to have Navigators cover 61 counties and will strategically base Navigators in regions across Iowa.

Iowa Community Health Center Outreach Efforts

All 14 of Iowa's health centers received funding (totaling \$1,474,583) from the Health and Resources Services Administration (HRSA) to support outreach and enrollment activities with the goal of helping eligible, uninsured Iowans in accessing health care coverage. Iowa's 14 health centers served just under 182,000 patients last year of which nearly 33% were uninsured. The health centers expect to hire 26 additional workers, who will assist over 37,000 people with enrollment into affordable health insurance coverage. The Iowa Primary Care Association also received funding from HRSA to support the outreach and enrollment activities at the health centers. For a list of the award amounts to each health center, click [here](#)

Iowa Health Insurance Marketplace Weekly Updates

If you'd like to subscribe to these email notifications, please email "subscribe" along with your name, organization and contact information to affordablecareact@iid.iowa.gov.

Stakeholder Outreach and Education Workgroup

The Iowa Stakeholder Outreach and Education Workgroup met on September 5 with some 50 participants. Angel Robinson from IID provided an update on state outreach and planning activities, and Nancy Rios from CMS spoke to federal outreach activities. The workgroup meets bi-weekly via WebEx. The next meeting is September 19. If you would like to participate, contact affordablecareact@iid.iowa.gov.

IDPH Health Insurance Marketplace Activities

- During the planning grant phase, Iowa held a series of regional meetings and focus groups to ensure stakeholder involvement throughout the planning of the HBE. Community stakeholder groups were given a chance to voice concerns and solicit ideas and expectations from what Iowans want out of an HBE. The information gathered from the meetings was compiled into a [Final HBE Regional Meeting and Focus Group Summary](#).
- IDPH has developed an [Iowa HBE Consumer Education and Outreach Report](#) which outlines consumer education and outreach research and strategies for Iowa's HBE. Recommendations include:
- IDPH is partnering with the Safety Net Network to develop a toolkit and hold regional meetings targeted at safety net providers and patients to educate participants on the implementation process and how use of the HBE once it is live.
- IDPH is contracting with the University of Iowa to conduct a consumer and business research survey. This survey will expand beyond the initial focus group questions to include a more comprehensive set of questions. A number of business and consumer groups are disseminating the survey to their members. These groups include:
 - Professional Developers of Iowa
 - Iowa Association of Business and Industry
 - Iowa Chamber Alliance
 - Federation of Iowa Insurers
 - Iowa Public Health Association
 - Iowa CareGivers Association
 - Iowa State University Extension
 - AARP
 - Local Public Health/Title V Agencies
 - Safety Network

Some of the main results from the consumer survey are:

- Those likely to use the Marketplace are not as comfortable with the Online system and will want one-on-one help
- Cost is most important when choosing plan (in focus groups they said it was quality)
- Trusted sources for marketplace information include work HR, public health agencies, community resources

Iowa e-Health



The Iowa Health Information Network (IHIN) continues to add organizations and providers across the state. To date, over 800 Direct accounts have been created representing more than 50 organizations for Directed Exchange messaging use. Testing is being completed with the University of Iowa Hospitals and Clinics, Henry County Health System, Mercy Trinity and Genesis Health Care prior to enable the IHIN's second service, Patient Look-Up (query) functionality. It is expected this service will "go live" this fall and be fully functional by the end of this year.

Iowa eHealth has posted a Request for Proposal (RFP) as a means by which to provide funding to increase the capacity for health information exchange across Iowa. The RFP, which includes information about how to apply, is posted on the Iowa Department of Public Health's website at <http://www.idph.state.ia.us/IdphGBP/IdphGBP.aspx>. Proposals are due by 4:00pm CST on Monday, September 30, 2013.

Furthermore, Iowa eHealth has issued a Notice of Intent to Award (NOIA) a contract for IHIN Enrollment and Outreach Services to Telligen. The purpose of the contract is to increase provider adoption of IHIN services and encourage utilization of the IHIN. Contract negotiations are underway between Telligen and the IDPH, with a final contracted expected within the week.

Next Meeting: October 25th, 2013 from 10:00 – 2:00

Direct Care Worker Initiative

What is the Direct Care Workforce Initiative?

The Direct Care Workforce Initiative is the result of the work of the many members of the Direct Care Worker Advisory Council and additional direct care professionals (DCP), employers, state agency representatives, and other individuals and organizations that contribute their expertise and assistance to IDPH. The Council was

charged with advising IDPH on training standards and the creation of a credentialing board for the direct care workforce in Iowa. IDPH applied for and received a federal grant from the US Department of Health and Human Services to conduct a pilot of the training and credentialing recommendations. The purpose of the pilot project is to evaluate the impact of the standardized training and additional retention supports on DCPs knowledge, job satisfaction and retention in their employment. Participating DCPs will receive interim credentials and participate in leadership, mentoring and retention activities. Control groups that will not receive the pilot training or the retention interventions have been selected to enable the project to compare evaluation outcomes. The sites participating in the training are Bright Star, Ankeny, Candeo, Ankeny, Centerville Community Betterment, Centerville, ChildServe, Johnston, Des Moines Area Community College, Easter Seals, Des Moines, First Resources Corporation, Sigourney, Home Instead, West Des Moines, Clive and Ottumwa, H.O.P.E., Inc., Des Moines, Indian Hills Community College, Ottumwa, Iowa Home Care, West Des Moines, Monroe County Professional Management, Albia, Mosaic, Des Moines, REM-Iowa, Adel, Woodward Resource Center, Woodward.

Celebrating the End of the Pilot

The Personal and Home Care Aide State Training (PHCAST) Grant pilot project participants gathered for one last meeting on September 5, 2013. It was a celebratory event (with cake!) to applaud a successful pilot of the DCW Advisory Council's recommendations of standardized training and credentialing. We trained 500 direct care professionals in the pilot! A big thank you to the participating pilot sites, direct care professionals, ambassadors, council members, and many others who helped develop curriculum, test the training and online systems, promote the importance of the initiative, and work out all of the kinks before we move to the next chapter of making the curriculum available statewide!

Promoting *Prepare to Care: Iowa's Direct Care and Support Curriculum*

The Iowa Department of Public Health, in partnership with Iowa CareGivers and AARP-Iowa, held events in six communities in Iowa to share findings from the pilot project and plans to release the new curriculum soon. We are excited to be able to share the positive outcomes, including high satisfaction with the courses, significant knowledge gains, and increases in staff retention. If you weren't able to make it to one of our events but want to find out how to access the *Prepare to Care* training, [click here to let us know](#) if you're a direct care professional interested in taking training, an employer interested in sending staff to training or arranging trainings at your agency, and/or you want to become a trained *Prepare to Care* instructor. The curriculum will be delivered through trained instructors, and we will be scheduling instructor trainings based on demand. More than 80 people so far have expressed interest in taking classes or becoming an instructor.

The Initiative team also recently presented to the Iowa Alliance in Home Care and to a national audience at the National Home and Community Based Services Conference in Virginia. We attended the Developmental Disabilities Nurses Association, where we staffed a booth with resources and information, and the Iowa CareGivers conference, where we presented on the initiative and new recommended autism competencies.

Training Development Continues – Online Core Course Available Soon!

The online Core course is being piloted right now, and will be made available to the public soon. Join our e-update list to be notified right away when the Online Core is made available (link below). Work groups were hard at work in July, August and September, developing competencies for three new specialty areas: autism, mental health, and oral care. We've added new resources to our wiki, including the specialty competencies, instructor requirements, a list of already-trained instructors who are available to teach *Prepare to Care* courses, and the regulation comparison documents that compare the *Prepare to Care* curriculum with existing state and federal regulations: <http://iowadirectcare.wikispaces.com/>.

To keep updated on progress, go to www.idph.state.ia.us/directcare and click the button to be added to the E-Update.

What is a Direct Care Professional?

A direct care professional (DCP) is an individual who provides supportive services and care to people experiencing illnesses or disabilities and receives compensation for such services. DCPs provide 70-80% of all direct hands-on services, assisting individuals with daily living tasks, personal care, independent living skills, and basic health care services. DCP is the umbrella name for the workforce. DCPs are commonly called direct support professionals, direct care workers, supported community living workers, home health aides, certified nurse aides and others.

Community Transformation Grant (CTG)

Community Food System Assessment

Iowa adult obesity rates have increased to 30.4 percent (2012). Although not statistically significant, this represents an increase of 5% since the previous year. There are many factors that influence the alarming increase in obesity including a lack of a healthy diet. For example, only 19 percent of Iowa adults report eating 2 or more servings of fruit daily, and only 11 percent of Iowa adults report eating 3 or more servings of vegetables daily. Increasing obesity rates and poor nutrition have been linked to increases in chronic diseases, including diabetes, heart disease, and stroke.

A food system assessment can lead to important changes in the community's food system, such as increased access to healthful food for low-income Iowans, local economic development, and improved public health. A food system assessment is a cooperative and participatory process that systematically examines a broad range of food issues and assets (indicators), so as to inform policy, system and environmental changes at a local, county, regional or state level. Often led by a team of food system stakeholders, community food system assessments may be conducted per specified region, such as census tract, city, county or group of counties.

A food system assessment is a natural accompaniment to the Community Health Needs Assessment and Health Improvement Planning (CHNA&HIP) process conducted by local public health agencies. Using similar approaches, a food system assessment may increase community involvement, collaboration, and integration across programs and leverage new resources. The information gathered may lead to more strategic and effective public health action.

Public health will benefit from food system assessments through:

- Broader awareness and visibility of food system-related issues
- Improved public health program development and coordination
- Stronger or new networks and coalitions
- Increased community participation in shaping the food system
- Positive changes in environmental and systems-level changes affecting the food system
- Greater community capacity to create positive change

The goal of this initiative is to have all counties in Iowa complete a community food system assessment and plan by September 2016 by integrating it with the current CHNA&HIP process. The CTG team has developed materials and training tools to guide public health practitioners and community stakeholders in assessing, planning, implementing and evaluating food system initiatives. CTG counties have been trained on the assessment, and copies of the training materials have been provided. The CTG counties will "pilot" the materials and process in the next year.

F as in Fat 2013: How Obesity Threatens America's Future

The 2013 edition of the *F as in Fat* report has been released by the Robert Wood Johnson Foundation and Trust for America's Health. This latest information reports that adult obesity rates remained steady in all states, minus one. To download the report, visit <http://www.rwjf.org/en/research-publications/find-rwjf-research/2013/08/f-as-in-fat-how-obesity-threatens-america-s-future-2013.html>.