

## **Center for Rural Health and Primary Care Advisory Committee June 6, 2013 Minutes**

**Date:** June 6, 2013  
**Time:** 1:00 pm  
**Location:** Conference Call

**Dial: 1 (866) 685-1580**  
**Code: 0009991777**

**Attendance:** Quorum Met

<b>Appointee/Agency Representation</b>		<b>Appointee/Consumer Group</b>	
Margaret Thompson, Dept. Ag & Land Stewardship	✓	Mike Rosmann, PhD, Behavioral & Mental Health	✓
Julie McMahon, IA Dept. Public Health	✓	Sheila Frink, Emergency Medical Services	✓
Mary Spracklin, IA Dept. Inspection & Appeals	✓	<b>Appointee/Farm Organizations</b>	
Kelley Donham, Institute of Agriculture Medicine & Occupational Health	✓	Shari Burgus, Farm Safety Just For Kids	✓
Kathy Nicholls, IA State Association of Counties	✓	Debora Hinnah, Iowa Farm Bureau	
National Institute for Rural Health Policy (IHA)		<b>Representative Appointee</b>	
Rural Health Resource Center		Susie Roberts, Agriculture Business	✓
<b>State Senators &amp; Representatives</b>		Jim Atty, Critical Needs Hospital	✓
Rep. Mark Costello,	✓	Dr. Dennis Mallory, Practicing Rural Family Physician	✓
Rep. Bruce Bearinger	✓	Gregory Randolph, Practicing Rural Physician Assistant	✓
Sen. Mary Jo Wilhelm		Patrick Pucelik, Practicing Rural ARNP	✓
Sen. Mark Segebart		Angela Halfwassen, RDH, Rural Practitioner	✓

**Committee Staff Support and Presenters:** Katie Jerkins, RHPCAC Coordinator; Deborah Thompson, IDPH Legislative Liaison; Dr. Robert Russell, Chief, Bureau of Oral and Health Delivery Systems, IDPH

### **AGENDA**

#### **Call to Order – Kathy Nicholls (Chair)**

The Meeting was opened at 1:01 pm by Chair, Kathy Nicholls. Kathy welcomed new members and instructed participants to use \* 6 to mute/# 6 to unmute their phone line.

#### **Introductions -**

Introductions identified individuals and members on the call as well as their rural connections.

#### **Approval of minutes – Kathy Nicholls (Chair)**

#### **Minutes approved**

The January meeting lacked a quorum for action but Katie has worked with the Governor's office to get the new committee appointments completed. Two vacancies remain and two senior committee members will be finishing their terms. Katie will work to fill those slots.

**Motion:** for approval of the Sept 31, 2012 and January 17, 2013 minutes. Mary Spracklin moved to accept the minutes, seconded by Mike Rosmann. Minutes approved.

#### **I-CASH update – Kelley Donham**

I-CASH Overview:

Iowa Center for Agriculture Safety and Health is a legislated body beginning in 1990 to assure that farmers stay alive and well in agriculture through assessment and education projects. The center engages IDPH and the University and the Center for Primary Care and it is connected to the Departments of Agriculture and Land Stewardship. The center works a lot with Extension and the College of Agriculture and is connected to farm and agriculture Organizations and groups like Farm Safety for Just kids and the Center for Agriculture Wellness and Safety. That is our organizational family and we work closely with this board.

We provide some small community grants – Shari Burgus is our person to review and provide those awards. Larger projects help establish self-sustaining initiatives around the state. We opened a new Agriculture Safety clinic serving four counties in Iowa. We have a committee to investigate tractor accidents, rollovers and we investigate chemical exposures, etc.

Our largest effort is for professionals that are going to be serving in rural communities – we operate an education and certification program and we have a summer institute in the combined DVM and MPH program – offering a course in agricultural medicine core course. All medical students in the rural track have to take the course and ARNP nurses take the course and then we draw people from all the world for a week long course with begins next week on Monday. This course work targets education in identifiable risks and health issues of farm and agricultural populations. This course actually takes the students onto the farm to see what farmers are exposed to.

In November we put on a scientific forum – The Mid-West Health and Safety Science Forum. This forum focuses on current issues -- this past year on grain safety issues as a result of a rash of grain bin accidents. You are all invited to attend these courses as part of this committee.

### **IDPH Legislative Summary – Deborah Thompson**

Legislative Session is over: This session was very interesting, the beginning was contentious and at the end it was most productive with lots of bipartisan movement on bills and legislation. There was improving economic circumstances and investment in health programs resulted.

- College student aid college student aid trust fund –\$106,000 was appropriated to be used for loan repayment for students who agree to practice in Iowa. 261,113
- PrimeCARRE \$167,000 –there were no changes in the code.
- \$2 million new money was appropriated for medical residencies training – IDPH grants program residency programs in OB-Gyn, ER, and others.
- \$368, 000 for environmental health programs – pool, spa, tattoo, inspections and others.
- I Smile funding was approved – status quo for funding
- LPH status quo funding for core services , nursing, home care aids, public health
- EMS –An EMS task force will review the state EMS system and make recommendations for a legislative report due on December 15 – this item has no big money – just a small fund for a facilitator.

- Iowa health and wellness plan: This reconciles the Medicaid expansion and the Governor's Health Plan – implements compromises. If the committee wants more specifics about this for their next meeting you can get the DHS or Governor's office to come provide a more specific overview of SF 446 of the HHS appropriations bill.

**Questions:**

Can you talk more about the new \$2 mil grant to provide medical residency? This is for training and is state matching funding. It needs to be implemented with additional funds – federal or other funds. These newly appropriated funds implement previous legislative language. It is referred to as the Medical Residency Training Account.

**Bureau of Oral and Health Delivery Systems Report – Dr. Bob Russell**

Fluoridation – Lake View was the last community to discontinue fluoridation – there are serious challenges coming out of Davenport (quad city area) but they have not planned to have a public hearing at this point. No other rural hot spots identified as yet.

Another factor – some communities are updating water purification and some new purification processes remove the fluoride from the water. Not all of Iowa water sources lack fluoride. We have some communities that have adequate Fluoride normally. Some are even a little high.

I did want to talk about the OHDS Bureau – we have ended session and the appropriations budget is now out – even though the governor has not signed the budget -- and we don't know what programs have survived with level funding. The funding for Health and Long Term Care Advisory Council will end in July. Some funding remains in the direct care worker program – though the board was not funded. P-CAST grant – those federal monies will end in September 2013 and only state monies will remain available.

We will be losing the ARRA grant -- it funded a position and it sunsets in September. Some staff positions will change as a result. Many other programs across the department are also facing cuts and/or losses of funding which will cause some shifting of personnel and remaining programs.

Got \$100,000+ plus for PrimeCARRE –federal match amount but need additional supplemental funds are to get to a full federal award. Health organizations have provided funds to meet the federal match in the past.

Oral health is level funding in programs, --no increases to expand I-Smile to seniors and adults. Oral Health has applied for additional resources – a CDC grant and the Bureau co-sponsored an oral health resources grant application with the University of Iowa. We expect decisions sometime this fall.

New programs – Reach Out and Read – This is a safety-net program thru IA Primary Care Association. You have heard about the new funds for medical residency programs and there

are discussions about how to roll that program out. The money is appropriated thru community capacity grant allocation.

**Questions:** How is Medicaid Expansion going to help oral health for either adults or kids – there is a number of caveats – there is debate whether stand-alone dental could offer their products on the exchange when it is in place. Dental-only programs are not subject to the same restrictions as the medical plans are. Some medical plans can offer their own pediatric oral dental component. Only pediatric dental services are mandated under the Accountable Care Act. We have just a few programs in Iowa in the exchange and I don't know if dental will be offered.

With respect to Medicaid programs we – expect same benefit package with a similar dental package. Some kind of care coordination will exist that involves dental. There is no real structure for this, yet – not real clear how it will work yet. There have been few conversations about how dental fits in the exchange plans.

**Questions:** How is the climate out there for fluoride? IDPH is neutral – it has become quite political and anti-government and resistance groups have entered the dialog and make it harder for the government to navigate the environment. There is a growing movement against fluoride. Iowa has no mandate for fluoride – communities choose to fluoridate. We had up to 93% of communities fluoridate and we are proud of that.

#### **Rural Health and Primary Care Advisory Committee Summary – Kathy Nicholls**

Summary of committee and background – the RHPCAC was established to assist and facilitate and advocate for access to quality rural health services and to build collaboration and cooperation. The Committee provided input on issues that we knew about as rural providers and advised regarding health and rural issues. The group was active with I-Smile, PrimeCARRE and to retain Iowa medical providers.

The Committee meets 4 times each year with other centers and the Center for Agricultural Health and Safety to get reports from agencies and IDPH departments and from experts on rural health issues. If you have issues –bring them forward to be added to the agenda

The Committee and its makeup are codified, charged to provide recommendations on rural issues and to connect with the Centers for Primary Care and Rural Health.

Our next meeting will be a face to face meeting and facilitated to do some planning for our work over the next five years. We will look at our vision and mission and build our work. The timing is great because much of our group is new.

#### **Membership Update – Katie Jerkins 1-515-423-2690**

We have fifteen appointed members --many new members. Katie thanked both the new and currently serving members. Kathy Nicholls is the current chair and her term is coming to an end. Katie asks the group to consider Please think about committing to be chair, chair runs the

quarterly meeting, primarily. Katie does the planning and coordination for the meeting. There are two vacant positions on the Committee. An Iowa Hospital Association program representative will be appointed by the IHA and hopefully before our August meeting. An Iowa State University member is no longer a position at ISU and that slot will be removed. Mike Rosmann will be leaving and we will work with the Governor's Office to re-appoint that position: a consumer group active in rural issues. If you have suggestions, provide Katie with names for recommendations. Ordinarily we seek gender, geographic and party balance, but that will not be an issue with these appointments. The next positions to fill are Kathy Nichols and perhaps Mary as well. Watch the website and emails for staying up to date.

### **August facilitation - Katie Jerkins**

The August meeting (date to be selected as either the last week of July or the first week of August) will be a face to face meeting in Des Moines for a facilitated planning session. Subsequent meetings can be conference calls, face to face, by webinar or over the ICN. The group does need a quorum for the meeting to count. Katie will send a survey about meeting times, and dates and will include a survey monkey with some questions in preparation for that facilitated planning meeting.

Katie is building a directory just for the Committee members and helping them network. She will be asking for information and a picture to put this together over the next few weeks. Meetings are usually 9:30 to 2 – travel and meals are reimbursed.

There is a website for the Committee and handouts, presentations, minutes and all other materials are posted on the IDPH committee website. There is also a map of Committee appointments on the website. Katie is updating the look of the website now.

<http://www.idph.state.ia.us/OHDS/RuralHealthPrimaryCare.aspx?prog=RHPC&pg=Committee>

### **Old/New Business – Kathy Nicholls**

No other old business

No new business

Kathy thanked Mike for his years of service and his passion for mental health issues. Mike is leaving the group and this is his last meeting.

### **Adjourn**

### **Meeting Adjourned**

Jim Atty moved the meeting be adjourned, Angie Halfwassen seconded the motion. Meeting was adjourned at 2:20 pm.

Respectfully submitted,  
Jane Schadle

# REPORT TO THE RURAL HEALTH AND PRIMARY CARE ADVISORY COUNCIL

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Briefing by Deborah Thompson, Policy Advisor, Iowa Department of Public Health:

- The College Student Aid Commission's **Rural Iowa Primary Care Trust Fund** received status quo funding of \$105,823 for FY 2014. The Trust Fund is used for loan repayments for medical students who agree to practice as physicians in specified areas for five years and meet other eligibility requirements. Iowa Code Section 261.113.
- **PRIMECARRE** also received status quo funding from the legislature of \$127,926 and no changes to the code sections or session-law that relate to the program.
- A new **medical residency training account** has received \$2.0 million for a medical residency training state matching grants program that would be administered by IDPH. At this time, Dr. Miller-Meeks is having preliminary discussions with the Governor's office regarding their intent for the program. The Governor expressed support for medical residency programs and the Rural Physician Loan Repayment Program in his Condition of the State Address to the General Assembly this session. For the latter, he encouraged expansion of eligible specialties to OB-GYN and emergency medical doctors. He believes that these are important tools for improving Iowa's quality of life.
- We received the requested appropriation of \$368,000 for several of our **environmental health programs**. These include our pool/spa, tattoo, radon, and tanning programs. The federal funding stream for these programs has been eliminated and as a result we had to request additional funds to cover the shortfall. The Governor recommended the funds to the General Assembly who provided them in our budget.
- The **I-Smile Program** received status quo funding for the next fiscal year. The Senate proposed expansion of this program to adult populations however this was not included in the final bill.
- The line items that directly support **local public health agencies** received status quo funding for FY 2014.
- An **EMS Task Force** was established to review systems changes and will provide a report to the legislature by December 15, 2013. IDPH is administering the task force.
- The **Iowa Health and Wellness Plan** is a compromise between the Governor's Healthy Iowa Plan and Medicaid Expansion. Beginning January 1, 2014 it will cover all Iowans ages 19-64 with incomes under 138% of the Federal Poverty Level. DHS is still working through the language that is located in SF 446 the Health and Human Services Appropriations Bill to understand how they will implement the provisions of the language. Please see the DHS handout for more information.