MINUTES IOWA STATE BOARD OF HEALTH November 9, 2011 10:00 A.M.

BIOVENTURES CENTER MULTI PURPOSE CONFERENCE ROOM THE UNIVERSITY OF IOWA RESEARCH PARK 2500 CROSSPARK ROAD CORALVILLE, IOWA 52241

CALL TO ORDER

Justine Morton called the meeting to order.

ROLL CALL

Members present:

Members Absent:

Other Attendees:

Justine M. Morton, Chair

Rowe Winecoff, Vice Chair

Gregory Garvin

Tonya Gray

Hattie Middleton

Jay Hansen

Donald Skinner

Maggie Tinsman

Kenneth Wayne

Michael Wolnerman

Karen Woltman

Heather Adams, Asst. AG Mariannette Miller-Meeks Shayne Huston, Acting Recording Secretary

I. Minutes

A motion made by Gregory Garvin and seconded by Kenneth Wayne to approve the September 14, 2011 Board of Health minutes. Motion approved.

II. Rules

- a. Department of Public Health [641] Barb Nervig Adopted and Filed
 - i. Chapter 126, "State Medical Examiner"

This amendment clarifies that the fees collected under subrule 126.3(1) are considered repayment receipts. The amendment also letters paragraphs within the subrule. Notice of Intended Action was published in the July 27, 2011, Iowa Administrative Bulletin as ARC 9771B. No written comments were received. The adopted rules are identical to those published under Notice.

A motion was made by Jay Hansen and seconded by Kenneth Wayne to approve. Motion approved.

III. Substance Abuse

a. Jay Hansen reported that the Substance Abuse sub-committee approved one 3 year comprehensive program, one 3 year assessment and evaluation program and the approval of a 270 day program. Jay Hansen also reported that two denials for renewal of licenses. The department staff is working with these programs to try and mediate the issues.

IV. Department Reports

a. Director's Update – Dr. Miller-Meeks

Director updated the board that the Health Information Network (HIN) is going forward with signed Memorandums of Understandings (MOU) containing assessed fee amounts. The University of Iowa, Iowa Health Systems, Mercy and Genesis as well as Wellmark has signed their MOU documents.

Director updated the board that IDPH was awarded the Community Transformation Grant which is approximately \$3 million per year for 5 years for 27 communities. The communities have shared that they will proceed with Blue Zone work even if not selected and will use this grant money help support the Healthiest State Initiative.

Director notified the board that the Early Childhood Iowa group put forward a Race to the Top grant application that also includes some funding for IDPH. The department would receive about \$9 million for 4 years to expand upon childcare and early childhood initiatives the department has undertaken with Marcus Johnson-Miller.

The Healthiest State Initiative kick-off launched with the road tour which was extremely successful. The Blue Zone and Healthways organizations stated that they had more participants in Iowa than in Albert Lea, MN or in California when Blue Zones was launched in those areas. 84 Iowa communities have submitted statements of interest to be considered as a Blue Zone community. Many communities around Iowa will go forward with their projects even if the community is not selected for the Blue Zone funding.

The department is continuing to work on the integration of the tobacco division into other programs that have a tobacco component within the department. IDPH will continue to have as great an expansion and outreach as IDPH has had before. The department is launching into the social media venues with help from Heather Adams to ensure compliance with state laws.

The Department of Aging has established a multi-agency group to meet about long term care which will have some implications for Public Health due to our involvement with home care and other programs. The Director has suggested to this multi-agency group to have a conference inviting the stake holders to involve them in the dialog.

The department has had some dialog with the CDC about movement on the strategic national stockpile. The department will continue to work on this with the CDC as we have the upcoming expirations of the vaccines.

Insurance Exchange update has the Division of Insurance as the lead agency. The State has applied for Level 1 Establishment Grant. This grant will help with the Medicaid system updates. We still do not know the make-up of the essential benefit package and this is a stumbling block for many states.

V. Old Business

a. Demonstration of Distance Treatment

Mark Vander Linden provided a history of how the department moved into the Distance Treatment venue. This process allows the support of more individuals around Iowa. Substance Abuse Services Center (SASC) has been a leader with the utilization of distance treatment. At this point Marc introduced Diane Thomas, Exec Director of SASC who then provided the board with an online demonstration of the online services and interaction. The security of this system was a cornerstone of the development of this methodology. This service and technology supports the different social and economic groups and provides a level of anonymity to the participant.

b. Health Information Network Plan (HIN) – Director Miller-Meeks
The HIN legislation requires the department to have a sustainability plan prepared and ready for the legislature by December 1, 2011. Director Miller-Meeks shared that the plan was approved by the executive committee on October 28th. Contained in the plan are the participation fees for all users of the network. These fees are a key component to the sustainability of the HIN. The fee schedule was developed in conjunction with the users and the executive committee and no fees will be collected until after June 2012. There will be some legislative requirements put forth to allow for the collection of the fees. The funds are non-revertible to support the ongoing system expenses.

Current funds include \$8.3 million from a grant of the office of national coordinator, we have applied for grant funding from CMS Medicaid HiTech funds. This grant required the signed MOUs as mentioned earlier during the Directors Report. These moneys will support the build phase and then after 2014 the sustainability will be achieved from the fees. The model does assume a very high rate of participation. However with the current signed MOUs 95% of the beds in Iowa are covered.

Also required was to have a governance model and we are recommending that it remain in the Dept. of Public Health at least through the build phase and until the office of the national coordinator funding is utilized through March of 2014. A final recommendation for governance will be provided in December 2013 allowing for some time of the system to be in place.

The State of Iowa is the first state in the nation to have memos of understanding with the fees assigned.

A motion for the approval of this plan was made by Gregory Garvin and seconded by Hattie Middleton. Motion was approved.

VI. New Business

a. Review Public Health Standards – Joy Harris

The original Board of Health Standards was published in 2007. The standards need to be update due to local requirements and measurements and some portions were not truly under control of the local and state board of health. Clarification was also addressed in the standards to make them easier and straight forward as well as to remove duplication. There are some major changes to the evaluation sections of the standards. The emergency response section has been changed by reviewing the basic needs.

A motion to approve the modifications of the standards was made by Jay Hansen and seconded by Rowe Winecoff. Motion was approved.

b. Healthy Iowans – Jonn Durbin / Martha Gelhaus Martha Gelhaus introduced the progress of the Community Health Needs Assessment and reminded the Board that this is one of the core functions of the department. This was done through working with the local public health offices. Today is to share what the next step of the planning based on the assessment report.

Jonn Durbin provided an explanation of the methodology that was utilized in the collection and analysis of data for the Healthy Iowans survey. This information help to identify the critical health needs across the state. Additional data was also used from other comparative sources across the nation. Items where Iowa performed in the lower portion of the ratings was used as input into this analysis. The team paid particular attention to health disparity in the analysis.

The results of the assessment were displayed to the board. This information can be found on the website at http://www.idph.state.ia.us/adper/healthy iowans involved.asp.

VII. Next Meeting

- a. Report from the State Hygienic Laboratory (SHL) Chris Atchison
- b. Update on Fluoroscopy Law Suit Heather Adams

VIII. Adjournment

A motion to adjourn was made by Maggie Tinsman and seconded by Kenneth Wayne. Motion was approved and meeting was adjourned at 11:47 a.m. November 9, 2011.