The Check-Up

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

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

The Check-Up will feature updates on activities of active health reform councils and other activities as authorized by HF 2539 (2008).

The Check-Up will be archived on the main IPDH Health Care Reform Website at http://www.idph.state.ia.us/hcr_committees/

Electronic Health Information Advisory Council

In March, Iowa e-Health received a notice of award from the Office of the National Coordinator for Health Information Technology (ONC) for $8,375,000 over the next four years in American Recovery and Reinvestment Act (ARRA) funding. This funding will assist Iowa in planning and implementing the statewide Health Information Exchange (HIE). To access implementation funding, a strategic and operational plan (State Plan) is due to ONC by May 30, 2010. The IDPH Office for Health IT, e-Health Executive Committee and Advisory Council, and e-Health workgroups are actively engaged in developing the content of the State Plan, building upon the Iowa Health Information Technology Plan developed in 2009.

The following goals provide a high-level overview of the information that will be included in this plan:

- Goal 1: Build awareness and trust of health IT (i.e., Communication and Outreach)
- Goal 2: Promote statewide deployment and use of electronic health records (i.e., HIT Adoption)
- Goal 3: Enable the electronic exchange of health information (i.e., Technical Infrastructure and Interoperability)
- Goal 4: Enable the exchange of clinical data*
- Goal 5: Safeguard privacy and security of electronic health information (i.e., Legal and Policy)
- Goal 6: Advance coordination of activities across state and federal government*
- Goal 7: Establish a governance model for statewide health information exchange
- Goal 8: Ensure sustainable business and technical operations for health IT (i.e., Business and Technical Operations)*
- Goal 9: Secure financial resources to develop and sustain a statewide HIE*
- Goal 10: Monitor and evaluate health IT progress and outcomes*

* Indicates a new goal that was not included in the Iowa Health Information Technology Plan.

Next Meeting:
May 21st, 10:00 – 2:00 at the Old Capitol Town Center (Iowa City)
The Medical Home System Advisory Council Progress Report #1 is available here. The Council’s Progress Report #2 is almost finalized.

The Council’s first issue brief on “Patient Centered- What does it Look Like” is available here. It summarizes what patient-centered care encompasses, along with family-centered care, and gives improvement strategies at an organization and system level to help leverage widespread implementation of patient-centered care.

National Academy for State Health Policy (NASHP) staff came to Iowa for an in depth technical assistance site visit on April 8th. Their staff, along with Iowa’s medical home stakeholders, discussed current barriers in implementing and spreading the medical home concept in Iowa. They also discussed medical home implementation strategies utilized by states similar to Iowa’s structure. Iowa’s Medicaid Director and the Iowa Medicaid Enterprise attended the site visit to gain information and assistance in deciding on the medical home model for the IowaCare expansion.

**SF 2356** has been signed by the Governor and includes a section that expands the IowaCare program. IowaCare expands Medicaid to 200% of the FPL for adults who don’t otherwise qualify for Medicaid. The coverage includes single adults and childless couples. The IowaCare program has a limited benefit package and a limited provider network (limited to 2 providers – Broadlawns Medical Center in Polk County and the UI Hospitals and Clinics in Iowa City), which provides service statewide. SF2356 expands the provider network under the current IowaCare program to include a regional primary care provider network, beginning with a phased in approach of Federally Qualified Health Centers (FQHC). The bill mandates the FQHC’s selected by the DHS to provide primary health care services to the IowaCare population and to comply with certification requirements of a Medical Home.

The Council met on April 16th to discuss the certification requirements related to the IowaCare expansion. It was decided that initially, the FQHC’s will be required the meet a set of medical home minimum standards. Additionally, IDPH will draft and adopt rules for certification of medical home.

The Iowa Healthcare Collaborative held the Medical Home Learning Community on April 21st. To access the agenda and handouts, visit www.ihconline.org

**Next Meeting: June 30th 10:00-3:00 at the Urbandale Public Library**

Health and Long-Term Care Access Advisory Council

The Phase 1 Strategic Plan for Health Care Delivery Infrastructure and Health Care Workforce Resources is available here.

The Council is focused on sharing information and resources, integrating its work with other existing efforts, and assuring the progress occurs with the strategic plan. The March meeting included a presentation by Anne Kinzel regarding the Legislative Health Care Coverage Commission and Senate File 2356. Anne’s presentation was well-received, generating significant discussion.

The Direct Care Worker Advisory Council’s work is critical to the health care infrastructure and health care workforce resources in Iowa due to the anticipated increased demand for these services and the difficulty recruiting and retaining direct care workers in Iowa. Jennifer Furler, State Public Policy Group, updated the council on the DCW Advisory Council’s recommendations.

The Council’s mandate for a Strategic Plan includes a specific requirement for a rural health care resources plan. To inform the council regarding existing efforts to build upon toward such a plan, State Office of Rural Health Director, Gloria Vermie presented information to the council about the recently-released Iowa Center for Rural Health and Primary Care 2010 Annual Report.

The May 27th meeting will include a joint session with the Rural Health and Primary Care Advisory Committee to assure communication and collaboration in the two Advisory Councils.

**Next Meeting: May 27th 10:30 – 3:00 at the West Des Moines Learning Resource Center**
The Prevention and Chronic Care Management (PCCM) Advisory Council Initial Report is available [here](link). The Council has finalized their first issue brief “Chronic Disease Management”, which aims to increase education about chronic disease prevention and management and include Iowa-specific information and data. Another issue brief on “Disease Registries” is currently being developed collaboratively by the PCCM Advisory Council, the Medical Home System Advisory Council, and the eHealth Advisory Council. The next issue brief produced by the PCCM Advisory Council will be on “Prevention”.

Ed Wagner will be receiving the University of Iowa’s Public Policy Center Forkenbrock Series and the College of Public Health’s Hansen Award. A conference will be held on October 27th to present Ed Wagner with this award. Ed Wagner developed the Chronic Care Model, which is the leading framework for improving care for chronic diseases. The Chronic Care Model identifies the essential elements of a health care system that encourage high-quality chronic disease care. The PCCM Council staff is assisting in the coordination of this event.

The PCCM Advisory Council has been written into two pieces of legislation this session. HF 2144 charges the Council to submit recommendations by December 15, 2011 on strategies to collect and provide statistically accurate data concerning chronic disease in multicultural groups of racial and ethnic diversity in the state. Following implementation of the strategies and collection of data, the council shall also make evidence-based recommendations to the director to address and reduce identified disparities. SF 2356 charges IDPH (the PCCM Advisory Council) to develop a plan to coordinate care for individuals with diabetes who receive care through community health centers, rural health clinics, free clinics, and other safety nets. The plan may include a diabetic registry to provide drugs and to collect data to assist providers in tracking the care of their patients with diabetes. As a first step, focus groups with patients will be conducted through the Community Health Centers to determine the barriers that people with diabetes face.

Four new members have joined the Council to make the Council more well-rounded and comprehensive. They are representatives from the Iowa Public Health Association, Iowa Dietetic Association, YMCA of Central Iowa and a Community Advocate.

**Next Meeting:**
- April 30th 10:00 -3:00 at Urbandale Public Library
- June 24th 10:00 -3:00 location TBD (DSM area)

The Direct Care Worker Advisory Council report is available [here](link). The Iowa Direct Care Advisory Council met April 16, 2010. The group discussed a model for credentialing direct care workers and a plan for next steps. Recommendations included conducting focus groups that engage a diverse sample of direct care workers, employers and educators to test and evaluate the recommendations of the Direct Care Worker Advisory Council. John Hale provided an overview of House File 2526 that addresses implementation of the recommendations. An interim report is due to the General Assembly by March 1, 2011 outlining progress towards the establishment of a board of direct care workers within the Iowa Department of Public Health by July 1, 2014.

**Next Meeting:** May 10th 10:00- 3:00 at the Urbandale Public Library
**Youth Individual Challenge:** The Live Healthy Iowa Kids/Governor’s Challenge will end on April 28, 2010. During the 100 day challenge, teams tracked their physical activity, television time, and fruit, vegetable, low-fat milk and water intake. Supporting classroom activities that align with the Iowa Core Curriculum were available. 10,704 Iowa youth are participating, over 1000 more than in 2009. For more information click here.

**School Challenge:** The Governor’s Council has agreed to support the criteria of the USDA’s HealthierUS School Challenge. Visit here for the HealthierUS School Challenge criteria.

The Governor’s Council on Physical Fitness and Nutrition has developed 12 strength training exercises, in instructional picture format, for use as a resource. The exercises have been posted here.

**Healthy Iowa Awards:** The Council partnered with the Wellness Council of Iowa to provide Healthy Iowa awards for communities, schools, colleges, and visionaries in 2009. The 2010 Healthy Iowa Awards Ceremony will be held September 23, 2010. Applications will be posted to the Wellness Council of Iowa Web site http://www.wellnessiowa.org/

**Next Meeting:** May 27th Location TBD

**Iowa Healthy Communities Initiative**

Evaluation is one component of the Iowa Community Wellness Grant Model. Community Wellness Grant projects write an evaluation plan and track outcome and process measures throughout the initiative. Technical assistance and training is provided by the IDPH health promotion unit in the area of evaluation. Factors identified with strong coalitions and healthy communities are also assessed.

For a brief description of the 2009-10 Community Wellness Grants, click here. To view a map of the 2009-10 Community Wellness Grant projects, click here. To view a map of the 2010-11 Community Wellness Grant projects, click here.

Melissa Strovers of Imagine Grinnell, a partner in the Poweshiek County Local Board of Health Community Wellness Grant project, is pictured at the 2010 Iowa Governor’s Conference on Public Health providing a session on evaluation and the Iowa Healthy Communities program. Additional presenters included Denise Coder of Cass County Public Health and Cathy Lillehoj and Kala Shipley from IDPH.

**Small Business Qualified Wellness Program Tax Credit Plan**

Click here for a copy of the plan. A small business worksite wellness toolkit is being developed as part of a separate, but supportive, project for the Iowans Fit for Life worksite wellness initiative. The toolkit is projected to be completed by Fall of 2010.

**Patient Autonomy in Health Care Decisions in Pilot Project Advisory Council (IPOST)**

The final report of the Patient Autonomy in Health Care Decisions Pilot Project is available here. The Cedar Rapids IPOST (Iowa Physician Orders for Scope of Treatment) pilot project continues through 2012 as a result of 2010 Iowa legislation that not only extends the pilot for two years, but also requires a rural outreach effort. Though no state funding supports this effort, state technical assistance is provided from the IDPH Office for Healthy Communities and the local coalition has received several local grant awards to continue and expand their work. The coalition has just developed a new working group in response to the “outreach into an adjacent rural community” language in the current legislation and begun discussions with regional communities to identify replication possibilities.