





May 9, 2011

The Update is a bi-weekly web newsletter published by the Iowa Department of Public Health's Bureau of Family Health. It is posted the second and fourth week of every month, and provides useful job resource information for departmental health care professionals, information on training opportunities, intradepartmental reports and meetings, and additional information pertinent to health care professionals.

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CDC Report Illustrates Iowa Successes

A new CDC report illustrates the importance of public-private partnerships in fighting childhood obesity. The report indicates that communities, child care facilities and schools can all do more to support healthy eating choices. The 2011 Children's Food Environment State Indicator Report examined 2008 data to determine how individual states address childhood obesity factors. Indicators, such as the availability of sugar-sweetened drinks and the amount of 'screen time' (time spent in front of the television, video and computer screens) at schools and child care centers, were evaluated.

"The exciting news is that the areas where Iowa rated poorly using the 2008 data have already been addressed," said Iowa Department of Public Health director, Dr. Mariannette Miller-Meeks. "If the report were based on current data, we would see a different picture."

For instance, the 2008 data used in the CDC report found nearly 78 percent of lowa middle and high schools offered sugar-sweetened drinks to students. The lowa Healthy Kids Act, which was signed into law in 2008, banned the sale of sugar-sweetened beverages during the school day after July 2010. As a result, the current percentage of schools offering sugar-sweetened drinks (during the school day) to students is actually zero.

The CDC report also found that in 2008, lowa had no regulations regarding screen time for children in licensed child care settings. Currently, IDPH is working with the Department of Human Services to modify DHS rules for child care centers limiting the amount of screen time. In addition, IDPH has partnered with Healthy Child Care lowa to provide training on limited screen time to child care nurse consultants, who in turn have provided trainings to over 600 child care providers to date. IDPH is also partnering with the Women, Infants and Children program this summer to educate WIC parents about screen time and to encourage them to speak with their child care provider about their screen time policies.

To see the complete CDC report, visit www.cdc.gov/obesity/downloads/ChildrensFoodEnvironment.pdf.

Contact Information: Polly Carver-Kimm at 515-401-7988.

Updated SIDS Brochures

The Iowa SIDS Foundation now has updated brochures and DVDs for child care programs! Brochures will eventually be translated to Spanish but aren't currently.

For clarification, the DVD is not meant to be ordered in bulk or a take home piece for providers. It's meant to be a tool to be utilized during trainings, parent education classes, etc. The brochure is the take home piece.

There is also a parent brochure available. To view the parent brochure, go to pages 8-9 of **The UPdate**.

hawk-i Fact Sheets

Updated *hawk-i* fact sheets in English and Spanish are now available on pages 10-11 of **The UPdate**. The fact sheets provide information on eligibility requirements and what services are covered and income guideline charts.

It's HERE and it's FREE

Cultural Awareness/Education Training Tool - "UNNATURAL CAUSES"

The Iowa Department of Public Health, Office of Minority and Multicultural Health, has the video "Unnatural Causes" that can be borrowed from its library and used within your staff meetings or inservice training sessions. You can request that someone from the office provide the training, or use the video on your own. In accordance with the Title V Block Grant State Performance Measure #3 - health equity and awareness - this is a great tool that can be used at no cost to your agency.

If you are interested, please contact Janice Edmunds-Wells at 515-281-4904 or by email at janice.edmunds-wells@idph.iowa.gov.

Conference on Trauma-Informed Care

The conference "Psychological Trauma & Juvenile Justice: Impact on Mind, Body, Behavior and Community - Current Research and Practice Trends" will be held June 14-15 at the Embassy Suites in Des Moines. The cost is only \$20 and includes lunch on both days. Seating is limited to the first 250 registrants, so you are encouraged to register as soon as possible.

Dr. Robert Anda is the opening keynote speaker. Dr. Anda delivered a powerful message during the ECI Congress in February. He will again be presenting his findings from the Adverse Childhood Experience study. This is something you won't want to miss!

To view the conference brochure, go to pages 12-13 of **The UPdate**.

Oral Health Recent Events

News from the Bureau of Oral and Health Delivery Systems - Oral Health Center

The FFY 2010 CMS 416 report shows promising news for the oral health of lowa children. The number of children receiving oral health services in all age categories increased again this year, and children ages 0-5 receiving any dental service saw a significant increase of 2.12 percent.



Total Receiving Any Dental or Oral Health Service (codes 00100 - 09999)						
Age FFY 2009 FFY 2010 % chang						
0 - 5	43.7%	45.82%	+2.12			
1 - 5	50.5%	50.92%	+0.42			
0 - 14	50.9%	52.37%	+1.47			
0 - 20	NA	51.57%	NA			
1 - 20	52.8%	53.68%	+0.88			

County-specific reports for all age ranges can be found on the Oral Health Center's website at www.idph.state.ia.us/phcdp/oral-health-reports.asp.

The reports have been formatted differently this year due to new data breakdowns from CMS. New columns found in the report include:

- Total Receiving Any Dental or Oral Health Service (services provided by dental office or clinic, Title V agencies and physicians).
 - These data are comparable to a category from previous years, Total Receiving Any Dental Services. Data from FQHCs and physicians are now included.
- Total Receiving Oral Health Services by Non-Dentist (services provided by Title V agencies and physicians).
 - This is a new report with no comparable data to previous years. Along with preventive services, it also includes all screening codes and services provided in physician's office.
- Total Receiving Any Dental Service (services provided by dental office or clinic).
 - This report is similar by provider type to the report in previous years, Total Receiving Dental Treatment. It now includes exams, preventive services and dental services provided in both dental offices and FQHCs.

For more information on the CMS 416 reports, please contact the Oral Health Center at 1-866-528-4020.

Administration/Program Management

FFY 2010 CMS 416 Participation Data

The CMS 416 Participation Rate data for 2010 has been released by the Iowa Medicaid Enterprise. Two data sets are found on pages 14-20 of **The UPdate**. The first data set displays the percentages by county, and the second shows the county percentages grouped by agency. These data are also found on the Iowa Department of Public Health EPSDT website (Providers Page) at www.idph.state.ia.us/hpcdp/epsdt care for kids.asp.

There is good news! Iowa's overall state rate is 81 percent, up from the previous year's rate of 75 percent. Ten of our child health agencies reached an 80 percent participation rate or higher for their service area. Significant progress is being made on assuring that children receive well child screens according to the Periodicity Schedule!

Within the data, you will find variation in the rates for individual counties and age ranges within those counties. Any data element under the 80 percent requirement is boxed and in red. The IDPH contract requirement is an 80 percent rate for each county served, so there is still plenty of work to be done!

CMS tracks EPSDT participation rates based upon a federal requirement of 80 percent*. Participation rates indicate the extent to which the number of Medicaid eligible children (continuously enrolled for a minimum of 90 days) who should be screened (well child exam) during the year receive at least one initial or periodic screening (well child exam). This is the first year that CMS has defined the population as the Medicaid eligible children who have been continuously enrolled for a minimum of 90 days. This change in the universe of Medicaid children included in the data could be responsible for some of the increase in rates noted.

* The unit of measure is the number of eligibles receiving at least one initial or periodic screening service divided by the unduplicated count of eligibles who should receive at least one initial or periodic screening service in the year. The initial and periodic screening services are based on the periodicity schedule recommended in the AAP Guidelines for Health Supervision and the average period of eligibility in each state.

IME Informational Letter #1004 - Annual Provider Training 2011

The Iowa Medicaid Enterprise has released Informational Letter #1004 announcing the DHS 2011 Annual Provider Training available to all Medicaid providers. This year the IME is offering trainings in 16 communities across the state. The following five training modules will be offered over a two-day period at each site:

■ General Medicaid Policies and Procedures: This module provides an overview of general policies, billing information and forms, recent and upcoming changes affecting providers, and general questions and answers.

Administration/Program Management

IME Informational Letter #1004 - Annual Provider Training 2011 continued

- **Documentation Standards**: This module provides a review of Iowa Administrative Code Chapters 79.3 and 79.4, which address documentation requirements identified in the Iowa Administrative Code.
- **Health Information Technology**: This module provides an overview and update of the Electronic Health Records Incentive Payment Program, allowing incentive payments for eligible professionals and hospitals for adoption and meaningful use of certified electronic health records. It includes an overview of plans to promote health information technology and the benefits of using electronic health records for providers and patients.
- Case Management and Targeted Case Management: This session is designed for case managers and service workers to coordinate the Home and Community Based Services with the IME. It is intended to guide the service provider's role within the waiver programs.
- Individual CDAC: This module provides a review of the Consumer Directed Attendant Care program. It addresses the CDAC agreement, completing a claim for targeted medical care, and the CDAC daily service record.

See Informational Letter #1004 on pages 21-24 of **The UPdate** for more information including the dates, times and locations of the training sessions. To register, use the registration form found online at www.ime.state.ia.us/Providers/ATRegistration.html.

If you have any questions, please contact IME Provider Services Unit at 1-800-338-7909 (515-256-4609 in the Des Moines area) or by email at imeproviderservices@dhs.state.ia.us.

Calendar

June 9, 2011 MCH Advisory Council Meeting, 1-3 p.m., Iowa Lutheran Hospital, Conference Room 1

June 16, 2011*

Bureau of Family Health Grantee Committee Meeting 9-11:30 a.m., ICN

MAY Contract Required Due Dates

15 - Due: Electronic expenditure workbooks

27 - Export WHIS records to IDPH

31 - Semi-Annual CAReS/ WHIS review summaries

^{*} Required meeting



Bureau of Family Health: 1-800-383-3826

Teen Line: 1-800-443-8336

Healthy Families Line: 1-800-369-2229

FAX: 515-242-6013

NAME	PHONE	E-MAIL
Beaman, Janet	281-3052	janet.beaman@idph.iowa.gov
Boltz, Rhonda	281-4926	rhonda.boltz@idph.iowa.gov
Brown, Kim	281-3126	kim.brown@idph.iowa.gov
Connet, Andrew	281-7184	andrew.connet@idph.iowa.gov
Cox, Jinifer	281-7085	jinifer.cox@idph.iowa.gov
Dhooge, Lucia	281-7613	lucia.dhooge@idph.iowa.gov
Ellis, Melissa	242-5980	melissa.ellis@idph.iowa.gov
Goebel, Patrick	281-3826	patrick.goebel@idph.iowa.gov
Hageman, Gretchen	745-3663	gretchen.hageman@idph.iowa.gov
Hinton, Carol	281-6924	carol.hinton@idph.iowa.gov
Hobert Hoch, Heather	281-6880	heather.hobert@idph.iowa.gov
Horak, Shelley	281-7721	shelley.horak@idph.iowa.gov
Horras, Janet	954-0647	janet.horras@idph.iowa.gov
Hummel, Brad	281-5401	brad.hummel@idph.iowa.gov
Johnson, Marcus	242-6284	marcus.johnson@idph.iowa.gov
Jones, Beth	333-1868	beth.jones@idph.iowa.gov
Kappelman, Andrea	281-7044	andrea.kappelman@idph.iowa.gov
Mathews, Renee	281-6071	renee.mathews@idph.iowa.gov
McGill, Abby	281-3108	abby.mcgill@idph.iowa.gov
Miller, Lindsay	281-7368	lindsay.miller@idph.iowa.gov
Montgomery, Juli	242-6382	juliann.montgomery@idph.iowa.gov
O'Hollearn, Tammy	242-5639	tammy.ohollearn@idph.iowa.gov
Parker, Erin	725-2166	erin.parker@idph.iowa.gov
Pearson, Analisa	281-7519	analisa.pearson@idph.iowa.gov
Peterson, Janet	242-6388	janet.peterson@idph.iowa.gov
Piper, Kim	720-4925	kimberly.piper@idph.iowa.gov
Thorud, Jennifer	281-0219	jennifer.thorud@idph.iowa.gov
Trusty, Stephanie	281-4731	stephanie.trusty@idph.iowa.gov
Vierling, Sonni	281-8287	sonni.vierling@idph.iowa.gov
West, PJ	725-2856	pj.west@idph.iowa.gov
Wheeler, Denise	281-4907	denise.wheeler@idph.iowa.gov
Wolfe, Meghan	242-6167	meghan.wolfe@idph.iowa.gov

Area code is 515

FACTS

Annually in the United States, 4,500 otherwise healthy infants die suddenly and unexpectedly during sleep, of these more than 2,300 are diagnosed SIDS. SIDS remains the leading cause of death of babies one month to one year of age in the United States. SIDS can happen to any family, regardless of age, ethnicity, religion, or economic status. In 2008 and 2009, 91 lowa infants died suddenly and unexpectedly during sleep. Of those 91 babies:

- Only 18 were put to sleep in a crib. Fifty one were sleeping on either an adult bed, couch, or in a recliner.
- → 71% of the 91 infants that died had soft bedding, such as bumper pads, blankets, toys, or pillows, in their sleep environment.
- 63 of the 91 infants were found either on their stomach, side, or seated in a car seat or swing.
- Statistics confirmed 40 of the 91 babies were sleeping with an adult or sibling at the time of death.
- 58% of the 91 infants were exposed to nicotine before or after birth.

SIDS cannot be predicted or prevented at this time, but research shows a baby's risk can be reduced by following the safe sleep recommendations.

For more information contact: lowa SIDS Foundation "To Keep Every New Life Living" 1-866-480-4741 www.iowasids.org

It is recommended that every child care home AND center have a a safe sleep policy. A safe sleep policy:

- Shows parents that their baby's health and safety is your top priority.
- Educates staff on consistent care and best practice.
- If followed, helps reduce your risk of liability.
- May save the lives of babies!!



should include:

- Healthy babies will ALWAYS sleep on their backs.
- Safety-approved cribs and firm mattresses will be used.
- · Cribs will remain free of all soft bedding.
- · Cribs will sleep only one baby.
- Room temperature will remain comfortable for a lightly clothed adult.
- Babies will be monitored on a regularly scheduled time interval.
- Supervised tummy time will occur when baby is awake.
- Physician notes are required for non-back sleepers.

For more information on safe sleep policies or unresponsive infant drills, contact the lowa SIDS Foundation.

Brochure Funding Provided By:
CJ Foundation for SIDS
Washington County Riverboat Foundation
Principal Financial Group Foundation
Revised 2010

A message to child care providers Safe Sleep for lowa **Babies**

B

Risk Reduction Recommendations for Infant Safe Sleep:

(Based on the recommendations of the American Academy of Pediatrics)

Sudden Infant Death Syndrome (SIDS) is the sudden and unexpected death of an apparently healthy infant younger than one year of age that remains unexplained after a thorough autopsy, death scene investigation, and clinical history review.



The Iowa Sudden Infant Death
Syndrome Foundation is a statewide
non-profit 501(c)(3) health organization
dedicated to providing emotional
support to SIDS and SUID families,
educating professionals and the
general public about SIDS, and funding
medical research into
the causes of SIDS.

Infants should **ALWAYS** be placed <u>flat</u> on their back alone in a safe crib for ALL sleep, naps and nighttime. If baby falls asleep in a swing, car seat, bouncy chair or other surface while at home or child care, immediately remove baby and place them flat on their back in a safe crib.

A firm mattress in a safety approved crib, covered by a tight fitting sheet, is the recommended sleep surface for baby.

Keep ALL soft objects and loose bedding out of the crib. Items such as pillows, blankets, bumper pads, wedges, blanket rolls, and toys create an opportunity for baby to rebreathe carbon dioxide that may build up around baby's face.

Consider a wearable blanket or sleeper to keep baby comfortable and eliminate the risk of baby's head being covered.

Provide a nicotine free environment for baby, before and after birth. If odor from second hand smoke is detectable on clothing or bedding, research shows toxins are still present that can be harmful to baby.



To avoid overheating, baby should be lightly clothed for sleep and the room temperature should be kept comfortable to a lightly clothed adult.

Parents may share a room with baby but NEVER a bed! A separate but close sleeping area is recommended. Sleeping with a baby in a bed, couch, recliner, or other sleep surfaces with adults or other children is **NOT SAFE!**

Pacifier use at naps and nighttime is recommended for the first year of life. For breastfed infants, delay use until breastfeeding is established.



Keep baby's crib free of all soft bedding and positioning devices. Do NOT use commercial devices marketed to reduce the risk of SIDS.

Encourage supervised tummy time when baby is awake to assist in developing head and neck control.

Educate anyone caring for your baby about these risk reduction recommendations.

Every baby is at risk for SIDS!



hawk-i Fact Sheet

hawk-i is a program for uninsured children that provides no-cost or low-cost health care coverage to children in working families.

Eligibility

Children and teens under 19 years of age who:

- Meet income guidelines (see chart)
- Are Iowa residents
- Are U.S. citizens or permanent legal residents
- Are not the dependent of a State of Iowa employee
- Are not eligible for Medicaid benefits

Health Plan Providers

Children enrolled in *hawk-i* will get an insurance card and services through one of the health plans that participates in the program.

Covered Services

poctor visits to Hospital Care to Prescriptions to Well-child visits

★ Vaccines/shots ★ Emergencies ★ Surgery ★ Dental care ★ Vision exams

Hearing services Mental health/substance abuse Speech therapy

What does it cost?

Look up your family's income in the charts to see if your children may qualify for free or low-cost health care coverage. If your income is below the amounts listed in these charts, your children may qualify for Medicaid.

Family Size (parents, spouses, stepparents & children under 19 living together)	hawk-i If your family's yearly countable income is in this chart, your children may be able to get FREE coverage under hawk-i
1	\$14,593 to \$16,334
2	\$19,711 to \$22,064
3	\$24,830 to \$27,794
4	\$29,949 to \$33,524
5	\$35,068 to \$39,254
6	\$40,187 to \$44,984
7	\$45,305 to \$50,714
8	\$50,424 to \$56,444

Family Size (parents, spouses, stepparents & children under 19 living together)	Medicaid If your family's yearly countable income is in this chart, your children may be able to get FREE coverage under Medicaid.
1	up to \$14,592
2	up to \$19,710
3	up to \$24,829
4	up to \$29,948
5	up to \$35,067
6	up to \$40,186
7	up to \$45,304
8	up to \$50,423

Family Size (parents, spouses, stepparents & children under 19 living together)	hawk-i If your family's yearly countable income is in this chart, your children may be able to get hawk-i for \$10-20 per month. No family pays more than \$40 per month.
1	\$16,335 to \$32,670
2	\$22,065 to \$44,130
3	\$27,795 to \$55,590
4	\$33,525 to \$67,050
5	\$39,255 to \$78,510
6	\$44,985 to \$89,970
7	\$50,715 to \$101,430
8	\$56,445 to \$112,890



hawk-i es un programa para niños no asegurados que provee seguro médico gratuito o a bajo costo para los niños de familias de bajos recursos.

Elegibilidad

Son elegibles los niños y adolescentes menores de 19 años quienes:

- Están dentro de los límites de ingresos (vea las tablas abajo)
- Son residentes de Iowa
- Son ciudadanos de los Estados Unidos o residentes permanentes legales
- No son los dependientes de un empleado del Estado de Iowa
- No son elegibles para los beneficios de Medicaid

Proveedores del Plan de Salud

Los niños matriculados en *hawk-i* recibirán una tarjeta de seguro médico y servicios a través de uno de los programas de salud que participan en el programa.

Servicios Cubiertos

- ★ Visitas Médicas ★ Atención en Hospital ★ Recetas ★ Visitas del Programa de Niños Sanos
- 🜟 Vacunas e Inyecciones 🌟 Emergencias 🌟 Cirugías 🌟 Cuidado Dental 🜟 Exámenes de la Vista
- ricios de Audición ricion Mental Y Atención de Abuso de Substancia ricion del Habla

¿Cuánto Cuesta?

Si el ingreso contable anual de su familia está abajo de las sumas escritas en las tablas, a sus hijos les puede ser posible obtener cobertura GRATIS bajo Medicaid.

Tamaño de la Familia (padres, cónyuges, padrastros, y niños menores de 19 viviendo juntos)	hawk-i Si el ingreso contable anual de su familia está en esta tabla, a sus hijos les puede ser posible obtener cobertura GRATIS bajo hawk-i
1	\$14,593 to \$16,334
2	\$19,711 to \$22,064
3	\$24,830 to \$27,794
4	\$29,949 to \$33,524
5	\$35,068 to \$39,254
6	\$40,187 to \$44,984
7	\$45,305 to \$50,714
8	\$50,424 to \$56,444

Tamaño de la Familia (padres, cónyuges, padrastros, y niños menores de 19 viviendo juntos)	Medicaid Si el ingreso contable anual de su familia está en esta tabla, a sus hijos les puede ser posible obtener cobertura GRATIS bajo Medicaid
1	up to \$14,592
2	up to \$19,710
3	up to \$24,829
4	up to \$29,948
5	up to \$35,067
6	up to \$40,186
7	up to \$45,304
8	up to \$50,423

Tamaño de la Familia (padres, cónyuges, padrastros, y niños menores de 19 viviendo juntos)	hawk-i Si el ingreso contable anual de su familia está en está gráfica a sus hijos les puede ser posible obtener hawk-i por \$10-\$20 ño por mes. Ninguna familia pagará más de \$40 or mes.
1	\$16,335 to \$32,670
2	\$22,065 to \$44,130
3	\$27,795 to \$55,590
4	\$33,525 to \$67,050
5	\$39,255 to \$78,510
6	\$44,985 to \$89,970
7	\$50,715 to \$101,430
8	\$56,445 to \$112,890

Location Details:

Embassy Suites Des Moines – On The River is located at 101 E Locust, Des Moines, IA 50309 515-244-1700

Room Rate is \$139.00 per night when you let the hotel know you are reserving for the Orchard Place-Trauma Informed Care Conference.

Limited outside parking is available across the street from the hotel at a rate of \$4.00 per day as well as street meter parking.

Space is limited to the first 250 registrants

Send Registration with payment to:

Nancy Boggess Orchard Place 808 5th Avenue, Des Moines, IA 50309 Phone: 515-244-2267 nboggess@orchardplace.org

Conference Audience:

Professionals who work with children and families including: physicians, nurses, social workers, mental health counselors, early interventionists, psychologists, medical, and juvenile justice professionals.

Sponsored by:
Midwest Trauma Services Network;
Boys & Girls Home; OJJDP; and
Orchard Place Child Guidance Center
in cooperation with Harvard Medical
School-Disaster Medicine Section and
International Center for Disaster
Resilience (ICDR)

Made possible by a grant from The Office of Juvenile Justice and Delinquency Prevention and the Iowa Department of Human Services Mental Health Block Grant.







PSYCHOLOGICAL TRAUMA
& JUVENILE JUSTICE:
IMPACT ON MIND, BODY,
BEHAVIOR AND
COMMUNITY- Current
Research and Practice
Trends

June 14 & 15, 2011 Embassy Suites – On the River 101 E Locust Street Des Moines, IA 50309



About the Presenters

Robert Anda, MD, MS. graduated from Rush Medical College. He played a principal role in the design of the ACE study and serves as its Co-Principal Investigator. He has conducted research in a variety of areas including disease surveillance, behavioral health, mental health and disease, cardiovascular disease, and childhood determinants of health. Currently, he is Senior Scientific Consultant to the CDC, with Carter Consulting. Dr. Anda has more than 100 peer-reviewed publications and has received numerous awards and recognition for scientific achievement.

Sandra Bloom, MD is a Board Certified Psychiatrist, currently Associate Professor of Health Management and Policy and Co-director of the Center for Nonviolence and Social Justice at the School of Public Health of Drexel University in Philadelphia. Dr. Bloom partnered with Andrus Children's Center in establishing the Sanctuary Institute to train a wide variety of human service delivery programs in the Sanctuary Model, a trauma informed approach to organizational change.

Robert Kinscherff, Ph.D. Esq. is a psychologist and attorney who is currently Director of Forensic Studies at the Massachusetts School of Professional Psychology. He provides site reviews, technical assistance, training and program consultations to innovative juvenile justice programs across the United States. He is both a Designated Forensic Professional and a Certified Juvenile Court Clinician.

Robert Macy, Ph.D. is a Founder and Director of the International Center for Disaster Resilience-Boston, Founder and Executive Director of the Boston Children's Foundation, and co-directs the Midwestern Trauma Services Network. Dr. Macy is a pioneer in the

field of psychological trauma, psychosocial recovery and resiliency in research, interventions and violence prevention initiatives. Dr. Macy co-directs the Division of Disaster Resilience at the Beth Israel Deaconess Medical Center, a Harvard Medical School teaching hospital and is an instructor in the Division of Emergency Medicine at Harvard Medical School.



Continuing Education Credits:

Upon completion of this conference participants will be familiar with:

- Current research on the impact of trauma
- Importance of trauma informed care & interventions
- How trauma informed knowledge impacts decision making at all levels
- Knowledge of evidenced based trauma informed interventions.

This conference is approved for 6.75 CEU's for Day One and 6.25 CEU's for Day Two for social workers, mental health counselors and psychologists.

CLE's have been applied for.

Course Structure & Content

DAY ONE Tuesday June 14, 2011

7:45 to 8:30...Registration

8:30 to 8:45 ... Welcome by Will Bronson, OJJDP

8:45 to 10:30....Keynote: Robert Anda, MD, MS -

The Health and Social Impact of Adverse Childhood Experiences Throughout the Lifespan

10:30 to 10:45....Break

10:45 to 12:30.... Keynote: Robert Kinscherff, Ph.D Esq–Juvenile Justice as a Default Forensic Mental Health System: Mental Disorders Among Youth in

Juvenile Justice

12:30 to 1:30... Lunch: Provided

1:30 to 3:00Seminar: A continuum of Trauma Informed Interventions for youth exposed to adverse childhood experiences

3:00 to 3:15..... Break

3:15 to 5:00.....Keynote: Sandra Bloom, MD -

Destroying Sanctuary: The Crisis in Human Service

Delivery Systems **5:00**....Adjourn

DAY TWO Wednesday June 15, 2011

7:45 TO 8:30..... Registration

8:30 to 9:15 Corey McClure, JD Assistant Polk

County Attorney - Pre-removal Conference

Program: Progress and Successes

9:15 to 11:00Keynote: To Be Announced

11:00 to 11:15 Break

11:15 to 12:30...Keynote: Robert Macy, Ph.D – The intersection of Trauma Informed Care for Educational

System and the Juvenile Justice System

12:30 to 1:30.....Lunch: provided

1:30 to 2:30..... Seminar: Decision making trees-How Juvenile Judges can use trauma informed care

models to inform decision making and adjudication

2:30 to 2:45..... Break

2:45 to 4:00..... Keynote: Sandra Bloom, MD- The

Building and Sustaining of Sanctuary

4:00 to 5:00 Q & A for Panel

5:00Adjourn

Total %	% of	% of	% of	% of	% of	% of	% of
of	Children <	Children	Children	Children	Children	Children	Children
Children	1	1 - 2	3 - 5	6 - 9	10 - 14	15 - 18	19 - 20

American Home Finding

Keokuk	67%	96%	74%	63%	49%	55%	73%	95%
Wapello	79%	90%	80%	73%	58%	73%	101%	130%
Agency Average	77%	91%	79%	72%	57%	70 %	96%	125%

Black Hawk County Health Department

Black Hawk	94%	95%	89%	84%	99%	95%	116%	101%
Bremer	79%	88%	82%	78%	64%	69%	82%	122%
Buchanan	75%	86%	80%	78%	53%	59%	91%	109%
Chickasaw	70%	95%	78%	66%	42%	60%	79%	120%
Delaware	67%	93%	77%	74%	53%	34%	68%	86%
Grundy	76%	97%	82%	81%	41%	48%	112%	88%
Agency Average	88%	93%	86%	82%	86%	83%	107%	102%

Crawford County Home Health & Hospice

	•							
Cass	63%	96%	78%	70%	44%	30%	55%	88%
Crawford	67%	91%	70%	68%	49%	54%	73%	72%
Harrison	76%	86%	85%	82%	62%	67%	79%	65%
Monona	61%	92%	63%	66%	36%	50%	73%	64%
Shelby	63%	95%	82%	54%	58%	36%	58%	95%
Agency Average	66%	92%	75%	69%	50%	49%	68%	76%

Family, Inc.

Mills	82%	89%	84%	78%	77%	70%	103%	100%
Pottawattamie	83%	93%	84%	79%	78%	69%	99%	108%
Agency Average	83%	93%	84%	79%	78%	69%	99%	107%

Hawkeye Area Community Action Program

Benton	72%	94%	81%	70%	57%	64%	70%	80%
Jones	69%	99%	83%	79%	51%	41%	63%	83%
Linn	88%	94%	85%	84%	84%	82%	104%	113%
Agency Average	85%	94%	85%	83%	79%	77%	98%	108%

Johnson County Department of Public Health

Iowa	75%	94%	73%	74%	78%	50%	93%	95%
Johnson	88%	95%	85%	83%	91%	81%	109%	84%
Agency Average	86%	95%	83%	82%	89%	77%	107%	85%

By Agency 5/9/2011

	Total %	% of	% of	% of	% of	% of	% of	% of
	of	Children <	Children	Children	Children	Children	Children	Children
	Children	1	1 - 2	3 - 5	6 - 9	10 - 14	15 - 18	19 - 20
Lee County Hea	lth Depar	tment						
Davis	72%	84%	76%	58%	57%	61%	103%	158%
Des Moines	73%	94%	81%	69%	56%	59%	91%	101%
Jefferson	74%	88%	75%	83%	46%	58%	88%	115%
Lee	85%	94%	85%	77%	76%	79%	102%	106%
Van Buren	65%	93%	77%	79%	63%	35%	49%	50%
Agency Average	77%	93%	81%	73%	62%	64%	92%	104%
		J						
Marion County			== 0/	5 00/	(20/	50 0/	1010/	1020/
Appanoose	79%	93%	75%	78%	63%	72%	101%	102%
Lucas	66%	95%	74%	76%	39%	47%	70%	108%
Marion	81%	98%	84%	80%	72%	65%	97%	104%
Monroe	74%	93%	80%	71%	43%	64%	102%	100%
Wayne	65%	92%	71%	68%	38%	52%	77%	75%
Agency Average	76%	95%	79%	77%	57%	62%	91%	101%
MATURA Actio	n Corpor	ation						
Adair	71%	86%	72%	63%	51%	57%	100%	123%
Adams	76%	92%	89%	90%	37%	60%	74%	73%
Buena Vista	83%	95%	84%	87%	70%	64%	90%	113%
Clay	82%	100%	93%	95%	66%	49%	85%	83%
Decatur	69%	89%	76%	80%	49%	46%	60%	104%
Dickinson	67%	86%	73%	78%	44%	37%	76%	133%
O'Brien	72%	93%	84%	77%	53%	44%	50%	123%
Osceola	66%	88%	84%	63%	49%	40%	65%	100%
Ringgold	77%	95%	61%	81%	71%	63%	105%	138%
Union	79%	96%	69%	72%	80%	66%	108%	119%
Agency Average	76%	93%	81%	81%	61%	54%	83%	110%
Mid-Iowa Comn	nunity Ac	tion						
Boone	83%	91%	88%	91%	60%	79%	85%	94%
Hardin	84%	89%	89%	90%	48%	59%	123%	132%
Marshall	84%	97%	92%	93%	69%	62%	85%	104%
Story	95%	92%	90%	97%	98%	83%	116%	112%
Tama	76%	93%	86%	85%	39%	54%	88%	96%
Agency Average	86%	93%	90%	93%	71%	69%	97%	107%
Mid Ciarra Or								
Mid Sioux Oppo			0.40/	970/	720/	500/	0.40/	1100/
Cherokee	79%	94%	84%	87%	73%	50%	94%	110%
Ida	74%	91%	79%	85%	41%	43%	106%	90%
Lyon	68%	92%	85%	81%	45%	34%	50%	115%
Plymouth	82%	97%	85%	89%	66%	61%	91%	107%
Sioux	77%	94%	84%	88%	53%	44%	67%	118%
Agency Average	77%	94%	84%	87%	58%	49%	80%	110%

			FFY 20)10 - By A	Agency			
	Total %	% of	% of					
	of	Children <	Children	Children	Children	Children	Children	Children
	Children	1	1 - 2	3 - 5	6 - 9	10 - 14	15 - 18	19 - 20
New Opportunit	ies							
Audubon	72%	88%	75%	63%	28%	76%	86%	133%
Carroll	75%	94%	78%	68%	54%	63%	99%	109%
Dallas	78%	93%	78%	77%	73%	68%	84%	120%
Guthrie	65%	97%	75%	65%	49%	47%	71%	106%
Sac	63%	85%	73%	67%	33%	52%	76%	71%
Agency Average	74%	93%	77%	72%	60%	63%	85%	111%
North Iowa Com	nmunity A	Action Org	anization					
Butler	74%	88%	83%	70%	61%	67%	69%	76%
Cerro Gordo	79%	90%	80%	73%	79%	72%	94%	87%
Floyd	70%	90%	70%	72%	63%	50%	79%	117%
Franklin	79%	95%	84%	77%	67%	77%	75%	106%
Hancock	77%	92%	75%	74%	75%	63%	92%	121%
Kossuth	67%	91%	82%	71%	47%	46%	66%	87%
Mitchell	56%	81%	64%	61%	40%	26%	45%	100%
Winnebago	73%	88%	77%	69%	65%	58%	95%	78%
Worth	72%	81%	76%	68%	74%	60%	90%	56%
Agency Average	74%	89%	78%	72%	68%	62%	82%	92%
Scott County He	alth Dens	artment						
Scott Scalley 116	73%	94%	77%	72%	62%	61%	76%	95%
Agency Average	73%	94%	77%	72%	62%	61%	76%	95%
Siouxland Comm Woodbury	76%	95% [78%	75%	69%	60%	87%	100%
•		_						
Agency Average	76%	95%	78%	75%	69%	60%	87%	100%
Taylor County P								
Fremont	84%	94%	80%	82%	65%	86%	106%	71%
Montgomery	87%	91%	77%	84%	82%	79%	109%	110%
Page	82%	91%	80%	79%	81%	67%	93%	103%
Taylor	68%	88%	70%	77%	72%	39%	66%	92%
Agency Average	82%	91%	78%	81%	77%	70%	97%	99%
Trinity Muscatin	ne Public	Health						
Cedar	79%	87%	75%	74%	64%	76%	105%	110%
Louisa	77%	95%	81%	81%	67%	64%	81%	83%
Muscatine	76%	95%	84%	76%	59%	62%	80%	96%
Agency Average	76%	94%	82%	77%	61%	64%	84%	96%

	Total %	% of	% of	% of	% of	% of	% of	% of
	of Children	Children <	Children 1 - 2	Children 3 - 5	Children 6 - 9	Children 10 - 14	Children 15 - 18	Children 19 - 20
	Ciliaren	1	1 - 2	3-3	0-9	10 - 14	15 - 16	19 - 20
Visiting Nurse S	ervices of	lowa						
Clinton	80%	94%	81%	81%	57%	60%	98%	137%
Jackson	85%	92%	85%	78%	75%	62%	129%	146%
Jasper	73%	92%	69%	71%	71%	61%	87%	96%
Mahaska	81%	95%	87%	77%	66%	65%	104%	121%
Polk	86%	95%	85%	80%	89%	77%	99%	109%
Poweshiek	85%	93%	85%	83%	68%	70%	116%	141%
Agency Average	85%	95%	84%	80%	83%	74%	100%	114%
VNA of Dubuqu	ie							
Allamakee	75%	95%	84%	82%	66%	48%	62%	84%
Clayton	74%	93%	80%	89%	56%	52%	71%	95%
Dubuque	85%	95%	83%	79%	80%	81%	104%	95%
Fayette	78%	95%	88%	86%	46%	65%	82%	82%
Howard	75%	94%	82%	78%	71%	63%	53%	100%
Winneshiek	73%	87%	88%	80%	54%	42%	79%	100%
Agency Average	81%	94%	84%	81%	70%	69%	89%	93%
Warren County	Health Se	ervices						
Clarke	72%	88%	80%	77%	38%	48%	97%	126%
Madison	78%	95%	83%	63%	80%	73%	93%	78%
Warren	79%	96%	77%	70%	66%	72%	94%	136%
Agency Average	77%	94%	79%	70%	63%	67%	95%	123%
Agency Average	7770	7470	17/0	70 /0	05/0	07 70	75/0	12370
Washington Cou	ınty PHN						_	
Henry	86%	95%	84%	86%	69%	74%	114%	117%
Washington	87%	96%	89%	92%	75%	77%	98%	94%
Agency Average	87%	96%	87%	89%	72%	75%	107%	108%
Webster County								
Calhoun	59%	95%	78%	62%	34%	33%	54%	78%
Emmet	67%	86%	77%	71%	36%	31%	97%	100%
Greene	71%	92%	72%	66%	53%	65%	88%	95%
Hamilton	93%	96%	93%	93%	89%	80%	119%	130%
Humboldt	82%	98%	88%	77%	85%	71%	86%	93%
Palo Alto	68%	92%	78%	68%	40%	48%	70%	108%
Pocahontas	70%	93%	88%	76%	29%	46%	80%	87%
Webster	90%	94%	92%	95%	79%	76%	99%	104%
Wright	90%	93%	93%	94%	81%	85%	90%	97%
Agency Average	82%	93%	87%	85%	67%	67%	93%	101%

	Total %							
G N	of	% of	% of	% of	% of	% of	% of	% of
Co. Name	Children	Children < 1	Children 1 - 2	Children 3 - 5	Children 6 - 9	Children 10 - 14	Children 15 - 18	Children 19 - 20
Adair	71%	86%	72%	63%	51%	57%	100%	123%
Adams	76%	92%	89%	90%	37%	60%	74%	73%
Allamakee	75%	95%	84%	82%	66%	48%	62%	84%
Appanoose	79%	93%	75%	78%	63%	72%	101%	102%
Audubon	72%	88%	75%	63%	28%	76%	86%	133%
Benton	72%	94%	81%	70%	57%	64%	70%	80%
Black Hawk	94%	95%	89%	84%	99%	95%	116%	101%
Boone	83%	91%	88%	91%	60%	79%	85%	94%
Bremer	79%	88%	82%	78%	64%	69%	82%	122%
Buchanan	75%	86%	80%	78%	53%	59%	91%	109%
Buena Vista	83%	95%	84%	87%	70%	64%	90%	113%
Butler	74%	88%	83%	70%	61%	67%	69%	76%
Calhoun	59%	95%	78%	62%	34%	33%	54%	78%
Carroll	75%	94%	78%	68%	54%	63%	99%	109%
Cass	63%	96%	78%	70%	44%	30%	55%	88%
Cedar	79%	87%	75%	74%	64%	76%	105%	110%
Cerro Gordo	79%	90%	80%	73%	79%	72%	94%	87%
Cherokee	79%	94%	84%	87%	73%	50%	94%	110%
Chickasaw	70%	95%	78%	66%	42%	60%	79%	120%
Clarke	72%	88%	80%	77%	38%	48%	97%	126%
Clay	82%	100%	93%	95%	66%	49%	85%	83%
Clayton	74%	93%	80%	89%	56%	52%	71%	95%
Clinton	80%	94%	81%	81%	57%	60%	98%	137%
Crawford	67%	91%	70%	68%	49%	54%	73%	72%
Dallas	78%	93%	78%	77%	73%	68%	84%	120%
Davis	72%	84%	76%	58%	57%	61%	103%	158%
Decatur	69%	89%	76%	80%	49%	46%	60%	104%
Delaware	67%	93%	77%	74%	53%	34%	68%	86%
Des Moines	73%	94%	81%	69%	56%	59%	91%	101%
Dickinson	67%	86%	73%	78%	44%	37%	76%	133%
Dubuque	85%	95%	83%	79%	80%	81%	104%	95%
Emmet	67%	86%	77%	71%	36%	31%	97%	100%
Fayette	78%	95%	88%	86%	46%	65%	82%	82%
Floyd	70%	90%	70%	72%	63%	50%	79%	117%
Franklin	79%	95%	84%	77%	67%	77%	75%	106%
Fremont	84%	94%	80%	82%	65%	86%	106%	71%
Greene	71%	92%	72%	66%	53%	65%	88%	95%
Grundy	76%	97%	82%	81%	41%	48%	112%	88%
Guthrie	65%	97%	75%	65%	49%	47%	71%	106%
Hamilton	93%	96%	93%	93%	89%	80%	119%	130%
Hancock	77%	92%	75%	74%	75%	63%	92%	121%

			111 1 2	LOTO By	Jounty			
Co. Name	Total % of Children	% of Children < 1	% of Children 1 - 2	% of Children 3 - 5	% of Children 6 - 9	% of Children 10 - 14	% of Children 15 - 18	% of Children 19 - 20
Hardin	84%	89%	89%	90%	48%	59%	123%	132%
Harrison	76%	86%	85%	82%	62%	67%	79%	65%
Henry	86%	95%	84%	86%	69%	74%	114%	117%
Howard	75%	94%	82%	78%	71%	63%	53%	100%
Humboldt	82%	98%	88%	77%	85%	71%	86%	93%
Ida	74%	91%	79%	85%	41%	43%	106%	90%
Iowa	75%	94%	73%	74%	78%	50%	93%	95%
Jackson	85%	92%	85%	78%	75%	62%	129%	146%
Jasper	73%	92%	69%	71%	71%	61%	87%	96%
Jefferson	74%	88%	75%	83%	46%	58%	88%	115%
Johnson	88%	95%	85%	83%	91%	81%	109%	84%
Jones	69%	99%	83%	79%	51%	41%	63%	83%
Keokuk	67%	96%	74%	63%	49%	55%	73%	95%
Kossuth	67%	91%	82%	71%	47%	46%	66%	87%
Lee	85%	94%	85%	77%	76%	79%	102%	106%
Linn	88%	94%	85%	84%	84%	82%	104%	113%
Louisa	77%	95%	81%	81%	67%	64%	81%	83%
Lucas	66%	95%	74%	76%	39%	47%	70%	108%
Lyon	68%	92%	85%	81%	45%	34%	50%	115%
Madison	78%	95%	83%	63%	80%	73%	93%	78%
Mahaska	81%	95%	87%	77%	66%	65%	104%	121%
Marion	81%	98%	84%	80%	72%	65%	97%	104%
Marshall	84%	97%	92%	93%	69%	62%	85%	104%
Mills	82%	89%	84%	78%	77%	70%	103%	100%
Mitchell	56%	81%	64%	61%	40%	26%	45%	100%
Monona	61%	92%	63%	66%	36%	50%	73%	64%
Monroe	74%	93%	80%	71%	43%	64%	102%	100%
Montgomery	87%	91%	77%	84%	82%	79%	109%	110%
Muscatine	76%	95%	84%	76%	59%	62%	80%	96%
O'Brien	72%	93%	84%	77%	53%	44%	50%	123%
Osceola	66%	88%	84%	63%	49%	40%	65%	100%
Page	82%	91%	80%	79%	81%	67%	93%	103%
Palo Alto	68%	92%	78%	68%	40%	48%	70%	108%
Plymouth	82%	97%	85%	89%	66%	61%	91%	107%
Pocahontas	70%	93%	88%	76%	29%	46%	80%	87%
Polk	86%	95%	85%	80%	89%	77%	99%	109%
Pottawattamie	83%	93%	84%	79%	78%	69%	99%	108%
Poweshiek	85%	93%	85%	83%	68%	70%	116%	141%
Ringgold	77%	95%	61%	81%	71%	63%	105%	138%
Sac	63%	85%	73%	67%	33%	52%	76%	71%
Scott	73%	94%	77%	72%	62%	61%	76%	95%

	Total %							
Co. Name	of Children	% of Children						
		< 1	1 - 2	3 - 5	6 - 9	10 - 14	15 - 18	19 - 20
Shelby	63%	95%	82%	54%	58%	36%	58%	95%
Sioux	77%	94%	84%	88%	53%	44%	67%	118%
Story	95%	92%	90%	97%	98%	83%	116%	112%
Tama	76%	93%	86%	85%	39%	54%	88%	96%
Taylor	68%	88%	70%	77%	72%	39%	66%	92%
Union	79%	96%	69%	72%	80%	66%	108%	119%
Van Buren	65%	93%	77%	79%	63%	35%	49%	50%
Wapello	79%	90%	80%	73%	58%	73%	101%	130%
Warren	79%	96%	77%	70%	66%	72%	94%	136%
Washington	87%	96%	89%	92%	75%	77%	98%	94%
Wayne	65%	92%	71%	68%	38%	52%	77%	75%
Webster	90%	94%	92%	95%	79%	76%	99%	104%
Winnebago	73%	88%	77%	69%	65%	58%	95%	78%
Winneshiek	73%	87%	88%	80%	54%	42%	79%	100%
Woodbury	76%	95%	78%	75%	69%	60%	87%	100%
Worth	72%	81%	76%	68%	74%	60%	90%	56%
Wright	90%	93%	93%	94%	81%	85%	90%	97%
State	81%	94%	83%	80%	72%	69%	93%	104%



STATE OF IOWA

TERRY E. BRANSTAD, GOVERNOR KIM REYNOLDS, LT. GOVERNOR

DEPARTMENT OF HUMAN SERVICES CHARLES M. PALMER, DIRECTOR

INFORMATIONAL LETTER NO. 1004

DATE: April 26, 2011

TO: All Iowa Medicaid Providers

ISSUED BY: Iowa Department of Human Services, Iowa Medicaid Enterprise (IME)

RE: Annual Provider Training 2011

The Iowa Medicaid Enterprise (IME) would like to invite all Iowa Medicaid providers to the Annual Provider Training sessions. Based on increasing provider interest and success last year, the IME is pleased to offer sessions in 16 different communities throughout the state.

This year each location will offer five distinct training modules. Each training module will be presented **once** per site over a two day period.

- 1. General Medicaid Policies and Procedures: An overview of the Medicaid program. This is intended to familiarize new providers with the program policies and emphasize the billing changes within the last year. These sessions will cover the following topics:
 - General Medicaid policies
 - Billing information and forms
 - Recent and upcoming changes affecting providers
 - General questions and answers
- 2. Documentation Standards: This is a review of the lowa Administrative Code (IAC) Chapters 79.3 and 79.4. This information is important to all provider types, as we discuss the documentation required by the lowa Administrative Code. Please note as the IAC remains constant, this training maintains the same information and intent as previous years.
- 3. Health Information Technology (HIT): An overview and update of the Electronic Health Records (EHR) Incentive Payment Program allowing for incentive payments for Medicaid eligible professionals and hospitals for the adoption and meaningful use of certified electronic health records launched on January 3, 2011. This session will also include an overview of plans to promote health information technology and the benefits of using EHR technology for both providers and patients.
- 4. Case Management and Targeted Case Management: New this year, we will incorporate Targeted Case Management (TCM) and Case Management (CM) as an all day concentrated training to guide case managers and service workers (SW) in coordinating Home and Community Based Services (HCBS) with the IME. This is intended to guide the TCM/CM/SW in their role within the waiver programs. The training will address the IME's expectations of the TCM/CM/SW. TCM/CM/SW are

invited to make this a full day session composed of the Case Management training module in the morning and the Consumer Directed Attendant Care (CDAC) module in the afternoon.

5. Individual CDAC: A review of all aspects of the CDAC program. The training will focus on understanding the CDAC Agreement, completing the Claim for Targeted Medical Care form, and the CDAC Daily Service Record.

Registration: Once again the IME is using an online registration tool to prevent over booking of the training sessions, and to simplify the sign-in process at each venue. Each individual training session will have its own registration form.

- If you are unable to complete the online registration form because you do not have internet access, please call Provider Services and a representative will complete a form on your behalf.
- If you are unable to register because a session is fully booked, contact Provider Services and we will try to get you into a different session.
- Each attendee must register for each session. If you plan to attend General Policies and Procedures in the morning and Documentation Standards in the afternoon, then you must complete **two** (2) registration forms.

Please plan on attending your selected session(s). You will <u>only</u> be contacted by the IME if we are unable to accommodate your request (s). Actual session end times will depend on the needs of that particular session. Time frames are an estimate, so please plan accordingly. There is no cost to attend these sessions.

How to Register

Listed on the following pages are the dates, times, and locations of the Annual Training 2011 sessions. All providers are welcome to attend both morning and afternoon sessions. Please go to our website and complete the online Annual Training Registration Form. The link is below.

http://www.ime.state.ia.us/Providers/ATRegistration.html

Site Information: Listed below are the dates, times, and locations of the Annual Training 2011 sessions.

DAILY SCHEDULE

Day	9:00 AM-12:00 PM	1:00 PM-2:45 PM	3:00-4:30 PM
Monday	General Policies & Procedures	Documentation Standards	Health Information Technology
Tuesday	Case Management	Individual CDAC	
Wednesday	General Policies & Procedures	Documentation Standards	Health Information Technology
Thursday	Case Management	Individual CDAC	

LOCATION SCHEDULE

Venue	Dates	Address/Location	Additional Information
Council Bluffs	June 6 & 7	Iowa Western Community College 2700 College Rd	Visitor Parking Auditorium Looft Hall
Creston	June 8 & 9	Pizza Ranch 520 Livingston Ave. Ste A	Park in West Lot; off Hwy 25. Conference Rooms
Sioux City	June 13 & 14	Western Iowa Tech Community College 4647 Stone Ave	Parking: Lot 4-Entrance 14 Auditorium (Cargill D103)
Spencer	June 15 & 16	Pizza Ranch 528 Grand Ave	Park in back of restaurant North Conference Room
Fort Dodge	June 20 & 21	Iowa Central Community College 1 Triton Circle	Visitor Parking Career Education Building Room 108/110
Marshalltown	June 22 & 23	Iowa Valley Community College 3702 S. Center	Visitor Parking Room 608/610
Ottumwa	July 11 & 12	Indian Hills Community College 623 Indian Hills Dr	Parking in West Lot- Visitor. Room 121/122 (Advanced Technology Building)
West Burlington	July 13 & 14	Memorial Auditorium 200 Front St.	Parking-where available Banquet Room A
Waterloo	July 18 & 19	Hawkeye Community College 1501 E. Orange Rd	Visitor Parking Tama Hall Room 107A
Decorah	July 20 & 21	Luther College 700 College Drive	Parking behind building. Room 102
Mason City	July 25 & 26	North Iowa Area Community College 500 College Drive	Parking on West side of campus. Room 206C

Bettendorf	August 1 & 2	Scott Community College 500 Belmont Rd	Visitor Parking-Entrance 4-Lot D Room: Student Life Center
Carroll	August 3 & 4	City Hall 112 E 5th St. Located behind Courthouse	Parking in both lots on either side of building. Room: Council Chambers
Coralville	August 15 & 16	Coralville Public Library 1401 5th Street, Coralville	Lower level parking- downstairs Meeting Rooms A&B
Dubuque	August 17 & 18	Northeast Iowa Community 680 Main St.	Parking Ramps or Meters Room 106 A&B
Des Moines	August 22-25	Wallace Building 502 E. 9th St.	Parking in Ramps down the street or Visitor Lots. Room: Main Auditorium

If you have any questions, please contact the IME Provider Services Unit, 1-800-338-7909, locally 515-256-4609 or by e-mail at imeproviderservices@dhs.state.ia.us.