



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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Screen-Free Week Encourages Fitness

The Iowa Department of Public Health and Live Healthy Iowa encourage all Iowans, especially children, to find ways to make time for fitness. Screen-Free Week, April 30 through May 6, is an annual event that asks participants to take a look at the amount of time they spend in front of the TV, computer, or other devices with screens and consider ways to rely less on screens for entertainment.

"There is clearly a time and place for screen media in our world today," said Sarah Taylor Watts, IDPH Physical Activity Coordinator. "It's equally clear that screen time is cutting into time for physical activity. Screen-Free Week is an opportunity to recognize the amount of our free time that's spent in front of a screen, and to look for healthier alternatives."

The American Academy of Pediatrics recommends no screen time for children under 2 years of age and less than two hours per day for older children; however, according to the Nielson Company which measures television viewing data, preschool children spend 32 hours a week with screen media. In an effort to reduce screen time and replace it with physical activity among children, IDPH has partnered with five Iowa YMCAs in Burlington, Forest City, Muscatine, Scott County and Waukee by offering mini-grants during Screen Free Week. Participating Ys agree to:

- Revise before and afterschool and/or child watch policies regarding television viewing.
- Eliminate television viewing for children attending the YMCA during Screen Free Week.
- Provide educational programming regarding television viewing and physical activity.

For suggestions on how to move away from the screen and toward better fitness, visit Live Healthy Iowa at www.livehealthyiowa.org/default.aspx. For information on Screen-Free Week, visit www.commercialfreechildhood.org/screenfreeweek/whatissfw.htm.

Learn the Signs Act Early Webinar

Child Health Specialty Clinics is sponsoring a webinar on “Learn the Signs Act Early,” on Thursday, May 3, from 3-4 p.m. This is a webinar for local grantees on the importance of learning the signs of Autism and the benefits of acting early.

Reserve your webinar seat now at www1.gotomeeting.com/register/926392217. After registering you will receive a confirmation email containing information about joining the webinar.

System Requirements for PCbased attendees

Windows® 7, Vista, XP or 2003 Server

Macintosh®-based attendees

Required: Mac OS® X 10.5 or newer



The poster features a blue header with the University of Iowa Children's Hospital logo and text. The main content is on a light green background with a white central area. The text is centered and includes the event title, date, location, topics, and sponsors. The date is highlighted in red with arrows pointing to it. The footer has a blue dashed line and the slogan 'Changing Medicine. Changing Lives.' with 'Kids' written in red above 'Lives'.

 University of Iowa
Children's Hospital
University of Iowa Health Care

SAVE THE DATE

Pediatric Environmental Health Conference

Friday, September 14, 2012

Location:
Urmila Sahai Seminar Room, Sahai Medical Education Center
Room 2117 Medical Education and Research Facility
Newton Road, Iowa City, IA

TOPICS: • Radon • Organophosphates • Lead Recommendations
• BPA • Arsenic & Nitrates • Legislative/Policy Updates

Sponsored by:
University of Iowa Children's Hospital
University of Iowa Roy J. and Lucille A. Carver College of Medicine, Department of Pediatrics
In Cooperation with: American Academy of Pediatrics, Iowa Chapter

The activity is seeking approved for *AMA PRA Category 1 Credits™*

Changing Medicine. Changing ^{Kids}Lives.



MCH Administrative Manual

What's new in section 700?

What's new in section 700 of the MCH manual?

The newly-released fourth edition of the MCH manual provides up-to-date information on all of the MCHFP grant-funded programs. Section 700 of the manual is devoted to Oral Health Services, and the biggest change to this section is the name of the bureau. In 2011, the Oral Health Bureau combined with the Bureau of Health Care Access and was renamed the Bureau of Oral and Health Delivery Systems (OHDS). Consultants from the former Oral Health Bureau are now housed in the Oral Health Center of OHDS.

Other changes to this section include the following program updates:

- Title V Child Health Dental funds may no longer be used to support direct care services provided by federally qualified health center (FQHC) dental clinics.
- The infrastructure-building activities that are paid for with CH Dental funds, no longer need to be reported on the Dental Data Report.
- All dental screenings must include a referral to a dentist.
- The school screening mandate requirements were updated in the manual to align with the legislative changes that have occurred. Kindergarten and 9th grade students are the only children required to provide proof of a dental screening.
- The “DA modifier” must be added to the dental screening codes when billing Medicaid.
- Population-based services were further defined; programs and services must meet the specific needs of a group, benefiting many people at once, the client’s payer source is not assessed, and services for individuals are not billed.

Two sections were deleted from the 3rd edition of the MCH manual: Section 720 - Dental Care for Persons with Disabilities Program and Section 721 - Child Health: Fluoride Analysis of Private Well Water. Both programs were cut due to loss of funding.

If you have any questions about the oral health services provided by your agency, please contact your oral health consultant.

Administration/Program Management

IME Informational Letter #1111: Adjustment and Recoupment Request Form Changes

The Iowa Medicaid Enterprise has released Informational Letter #1111 which announces that effective May 1, 2012 Iowa Medicaid providers must use the updated forms when submitting either a claim adjustment or recoupment to the IME. (See IME Informational Letter #1111 on pages 8-9 of **The Update**.) These forms are found on the IME website at www.ime.state.ia.us/Providers/Forms.html and are listed as:

- Adjustment Request Form 470-0040
- Recoupment Request Form 470-4987

The purpose of each form differs:

- The Adjustment Request Form is used to change or correct a paid claim.
- The Recoupment Request Form is used to take back an entire claim payment.

Informational Letter #1111 includes important reminders when completing and submitting either a Recoupment or Adjustment Request Form. These include:

- All forms must be filled out completely.
- All forms must have the appropriate supporting documentation that matches the claim information from the previously paid claim.
- Recoupment requests must have a Remittance Advice (RA) attached.
- Adjustment requests must have a corrected claim or an RA with changes attached. Changes made on the RA must be clear.
- When attaching a corrected claim, include all charges that need to be processed, not just the line that needs to be corrected.
- Denied claims must be resubmitted in the normal claim submission process. Denied claims cannot be adjusted.

Completed Adjustment Request and Recoupment Request Forms and supporting documents are mailed to:

IME Provider Services
P.O. Box 36450
Des Moines, IA 50315

Providers are encouraged to use the new forms immediately. However, they must use them effective May 1, 2012. As of May 1, 2012, old forms will be returned to providers without processing.

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

Administration/Program Management

IME Informational Letter #1115: Important 5010 and ICD-10 HIPAA Transition Information

The Centers for Medicare and Medicaid Services (CMS) has announced that the non-enforcement period for conversion of electronic transaction formats from HIPAA version 4010 to 5010 now runs through June 30, 2012. Effective on and after July 1, 2012, the Iowa Medicaid Enterprise (IME) will only accept transactions submitted in the new 5010 format. Providers not ready by the deadline should prepare an action plan for compliance and submit the plan to the IME via an email to imeproviderservices@dhs.state.ia.us. The plan should include the projected compliance date and primary point of contact for follow up (name, title, phone number, and email address).

Informational Letter #1115 also provides information on:

- Total OnBoarding (TOB)
- Login/5010 Access
- Formatting/Billing
- 5010 Report Translation
- Top Nine A3:21 Rejections EDISS has Encountered

If you have questions, EDISS can be reached at 800-967-7902 or by email at support@edissweb.com.

Providers are also reminded to prepare for ICD-10 implementation. The IME is continuing to move forward in preparing for the use of the new ICD-10 code set for services provided on and after October 1, 2013. CMS guidance is found at www.cms.gov/icd10.

For further detail, see IME Informational Letter #1115 on pages 10-12 of **The UPdate**.

Bureau of Family Health Grantee Committee Meeting

The next Bureau of Family Health Grantee Committee meeting will be held via a GoToWebinar on April 19, 2012 from 9-11:30 a.m. The meeting agenda and minutes from the January meeting are available on pages 13-17 of **The UPdate**.

This is a required meeting for Bureau of Family Health grantee agencies.

Reserve your Webinar seat now at www1.gotomeeting.com/register/508582777. After registering you will receive a confirmation email containing information about joining the Webinar.

Calendar

March 29-30

Maternal and Breastfeeding Nutrition Core Workshops

April 17-18, 2012

2012 Iowa Governor's Conference on Public Health
Scheman Conference Center, Ames

April 19, 2012

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

* Required meeting

APRIL

Contract Required Due Dates

1 - Change CARES Password

12 - FP Client Visit Records

15 MH & CH Chart Audit -
Direct Care Services

15 - FP Chart Audit

15 - Electronic Expenditure
Workbooks

19 - Grantee Committee
Meeting

27 Export WHIS Records to
IDPH

30 Dental Data Report

30 *hawk-i* Outreach
Quarterly Progress Report



THE UPdate



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
Couch, Roger	281-4653	roger.couch@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 – <i>Bureau Chief</i>	745-3663	gretchen.hageman@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-miller@idph.iowa.gov
Kappelman, Andrea	281-7044	andrea.kappelman@idph.iowa.gov
Mauch, Sarah	725-2289	sarah.mauch@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
Rasmusson, Addie	281-6071	addie.rasmusson@idph.iowa.gov
Steffen, Esha	725-2160	esha.steffen@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



Iowa Department of Human Services

Terry E. Branstad
Governor

Kim Reynolds
Lt. Governor

Charles M. Palmer
Director

INFORMATIONAL LETTER NO.1111

DATE: March 28, 2012

TO: Iowa Medicaid Providers (Excluding Individual CDAC)

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

RE: Adjustment and Recoupment Request Form Changes

EFFECTIVE: May 1, 2012

Effective May 1, 2012, providers must use the updated Adjustment Request Form, 470-0040 (Rev. 8/11), or the Recoupment Request Form, 470-4987 (Rev. 8/11) when submitting a claim adjustment or recoupment to the IME. The updated forms are currently available on the IME website and are found at: <http://www.ime.state.ia.us/Providers/Forms.html>.

Important reminders when completing and submitting a Recoupment or Adjustment Request form:

- The Adjustment Request Form is used to change or correct a paid claim.
- The Recoupment Request Form is used to take back an entire claim payment.
- All forms must be filled out completely.
- All forms must have the appropriate supporting documentation that matches the claim information from the previously paid claim.
- Recoupment requests **must have** a Remittance Advice (RA) attached.
- Adjustment requests **must have** a corrected claim or an RA with changes attached.
- Changes made on the RA must be clear.
- When attaching a corrected claim, include all charges that need to be processed, not just the line that needs to be corrected.
- Denied claims must be resubmitted in the normal claim submission process - denied claims cannot be adjusted.

We encourage providers to begin using the new forms immediately; however, providers **must begin using the new forms as of May 1, 2012. After May 1, 2012 the old forms will be returned to providers without processing.**

As always, mail completed Adjustment Request and Recoupment Request Forms and supporting documents to:

IME Provider Services
PO Box 36450
Des Moines, IA 50315

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



Iowa Department of Human Services

Terry E. Branstad
Governor

Kim Reynolds
Lt. Governor

Charles M. Palmer
Director

INFORMATIONAL LETTER NO.1115

DATE: April 5, 2012

TO: All Iowa Medicaid Providers Billing Electronically

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

RE: Important 5010 and ICD-10 HIPAA Transition Information

EFFECTIVE: Upon Receipt

As you are all aware, the electronic transaction formats for health care claims changed on January 1, 2012, from HIPAA version 4010 to version 5010. The Centers for Medicare and Medicaid Services (CMS) announced a “non-enforcement” period that now runs through June 30, 2012, where Medicaid may continue to accept claims in both the old (4010) and new (5010) format, allowing some extra time to transition. **The non-enforcement period will end July 1, 2012. At that point, Medicaid will only be able to accept transactions in the new 5010 format.**

Providers not ready by the deadline should prepare an action plan for compliance and submit the plan to the IME via an email to imeproviderservices@dhs.state.ia.us. The plan should include the projected compliance date, primary point of contact for follow up (name, title, phone number, and email address).

Total OnBoarding (TOB):

- Direct providers need to obtain a digital certificate for TOB from ABILITY at: vsitobsupport@abilitynetwork.com, in order to send the 5010 re-certification test files.
 - The test file needs to contain 10 clean claims in order to be 5010 recertified.
- If a vendor is used for claim submission it is the vendor’s responsibility to test for 5010 on behalf of the provider. Providers are encouraged to maintain communication with the vendor if recertification for the 5010 has not been done.
- Providers who plan to receive the 5010 835 transaction (Electronic Remittance Advice), should log into the TOB and verify that the transaction is setup correctly and set to deliver to the appropriate location.
- Once transactions have been approved for 5010 Production, an email will be sent indicating approval. Please verify that the email address in the TOB profile is accurate.

Login/5010 Access:

- It is important to remember that the 5010 and 4010 are separate environments and require a unique login and password for each process. Once the 5010 transactions are

moved into a live production status, EDISS will provide the 5010 login credentials via the 5010 Production fax.

- The new 5010 web portal address is:
<https://ime-ediss5010.noridian.com>.
- If accessing EDISS via the Bulletin Board System, the new production phone line is: 701-277-2355.

NOTE: 5010 claims will not process in the 4010 environment.

Formatting/Billing:

- A variation of a Post Office Box should not be sent in the Billing Provider Loops (2010BB) or the Secondary Provider Loops. (i.e., P.O Box, PO BX).
- A billing provider address and a service facility address cannot be the same. In this circumstance the service facility loop does not need to be sent.
- If the Billing NPI and Rendering NPI values are the same, the Rendering NPI does not need to be sent.

5010 Report Translation:

- 999 and 277CA are the reports issued after the 5010 claim submission. There is no GENRPT/Claim Confirmation Report or 997/ACK in 5010.
 - Both the 999 and 277CA are returned in ANSI X12 formatting and require translation from the billing software vendor in order to simplify interpretation.
 - PC-ACE Pro32 can be used for this translation. If different billing software is used, EDISS recommends that the software vendor be contacted to gain assistance in the translation process.

EDISS is aware that reject reasons of A3:21s are being returned on 277CA reports, and that the reject reasons are not descriptive enough to point to a specific reason why a claim has rejected. EDISS is working to resolve this issue and will send an email notification once updated.

Top Nine A3:21 Rejections EDISS has Encountered are:

- The Address Information (N302) is only required when there is a second address line; otherwise, do not send.
- The Address field (2010AA) may not contain the following: "Post Office Box", "P.O. Box", "PO Box", "Lock Box", or "Lock Bin."
- The Last Menstrual Period Date (2300, DTP) is only required when related to the patient's pregnancy; otherwise, do not send.
- The Zip code XXXXX was not found in Code Table ZIP.
- The Admitting Diagnosis (Loop 2300, HI) is required on all inpatient claims.
- The Admission Date Time Qualifier (Loop 2300, DTP02) must be equal to D8, for Medicare claims when the Facility Type Code (Loop 2300, CLM05.01) equals 32, 33, or 34. [Severity: Error]
- The Attending Provider Name (Loop 2310A, NM1) loop is not used for transportation claims.

- The Claim Payment Amounts do not balance for XXXXX. The Sum of Loop 2430 SVD02 amounts, 78 - sum of loop 2320 CAS adjustment amounts, 27 = Loop 2320 AMT Payer Paid amount, 78.
- The Claim Check or Remittance Date (Loop 2330B, DTP) is required when the payer identified in loop 2330B has previously adjudicated the claim and Loop 2430, Line Check or Remittance Date is not used.

Contacting EDISS:

EDISS can be reached at 800-967-7902, or by email at support@edissweb.com.

ICD-10 Implementation for the IME to Continue:

On February 16, 2012 the United States Department of Health & Human Services (HHS) announced in a press release that it intends to delay the ICD-10 compliance date. The message indicated the delay would be for "certain health care entities" without defining them. As such, **the Iowa Medicaid Enterprise (IME) is continuing to move forward in preparing for the use of the new ICD-10 code set for services provided on and after October 1, 2013**, until more about the delay is announced and understood. When we have more information, the IME will re-evaluate our ICD-10 efforts and offer direction. Until then, we will continue to move forward with our current projects and timelines.

Please make sure you are preparing for ICD-10. CMS has great guidance to consider and review at: <http://www.cms.gov/icd10/>.

If you have any questions not specifically related to electronic transactions, please contact the IME Provider Services Unit, 1-800-338-7909, locally 515-256-4609 or by email at imeproviderservices@dhs.state.ia.us.

BFH Grantee Committee Meeting

April 19, 2012

9 a.m. – 11:30 a.m.

GoToWebinar

*BFH Required Meeting

Agenda

9:00 a.m.	Call to Order Introductions & Roll Call Approval of Minutes	<i>Cari Spear</i> <i>Cari Spear</i>
9:15 a.m.	Announcements Bureau Updates Fall Seminar	<i>Gretchen Hageman</i> <i>Andrew Connet</i>
9:25 a.m.	Budget/Legislative Update	<i>Julie McMahon</i>
9:40 a.m.	Affordable Care Act: Implications For BFH/Oral Health Contractors (health homes, ACO's, HBE, etc.) - Best practice implementation of ACO with MCH involvement	<i>Angie Doyle Scar/ Abby McGill</i> <i>Kari Prescott</i>
10:20 a.m.	MCH Consultation & TA Workgroup	<i>Cindy Harpenau</i>
10:30 a.m.	CAReS and WHIS Audits	<i>Juli Montgomery</i> <i>Shelley Horak</i>
10:50 a.m.	Texting for Care Coordination	<i>Shelley Horak</i>
10:55 a.m.	Perinatal Depression Consultation Services	<i>Stephanie Trusty</i>
10:55 a.m.	Home Visiting Update	<i>Janet Horras</i>
11:10 a.m.	CAReS Update Follow-Up	<i>Marcus Johnson-Miller</i>
11:25 a.m.	Agenda Items for Next Meeting Adjournment	<i>Cari Spear</i>

*This is a required meeting for Bureau of Family Health contractors (Maternal Health, Child Health, and Family Planning).

BFH GRANTEE COMMITTEE MEETING

Date: January 19, 2012

Time: 9-11 a.m.

GoToWebinar

Members Present:

- | | |
|--|---|
| <p>Allen Memorial Hospital: Sandy Kahler*</p> <p>American Home Finding: Tracey Boxx-Vass*, Lacey Dickey</p> <p>Black Hawk County Child Health Department: Rhonda Bottke*, Ann-Marie Nielsen, Kim Howard, Arlene Prather O’Kane, Marianne Hickey, Tina Kuper, Crystal Schmitz</p> <p>Crawford County Home Health Agency: Kim Fineran*, Jennifer Muff</p> <p>Family Inc.: Sarah Zach*</p> <p>Hawkeye Area Community Action Program: Gloria Witzberger*</p> <p>Hillcrest Family Services: Sherry McGinn*</p> <p>Johnson County Dept. of Public Health: Chuck Dufano*, Erica Wagner</p> <p>Lee County Health Dept.: Michele Ross*, Melissa Calvillo</p> <p>Marion County Public Health: Kim Dorn*, Rachel Cecil</p> <p>MATURA Action Corporation: Mary Groves*</p> <p>Mid-Iowa Community Action: Kate Pergande*, Mary Greene</p> <p>Mid-Sioux Opportunity, Inc.: Cindy Harpenau*</p> | <p>New Opportunities: Paula Klocke*</p> <p>North Iowa Community Action Org.: Lisa Koppin*</p> <p>Northeast Iowa Community Action: Lori Egan*</p> <p>Scott County Health Dept.: JaNan Less*, Tanya Smith, Tiffany Tjepkes</p> <p>Siouxland Community Health Center: Sheila Martin</p> <p>Siouxland District Health Department: Linda Drey*, Mona Scaletta</p> <p>Southern Iowa Family Planning: Mary Pratt*</p> <p>St. Luke’s Family Health Center: Val Campbell*</p> <p>Taylor County Public Health: Joan Gallagher*</p> <p>Trinity Muscatine: Mary Odell*</p> <p>Visiting Nurse Assoc. of Dubuque: Nan Colin*, Molly Lammers, Jacquie Zwack, Therese Maiers</p> <p>Visiting Nurse Services of Iowa: Zoe Prevette*, Sarah Black, Stacy Jobses, Mary O’Brien</p> <p>Warren County Health Services: Jodene DeVault*</p> <p>Washington County PHN Service: Chrystal Woller*, Jen Weidman, Peggy Wood, Edie Nebel</p> <p>Webster County Public Health: Kari Prescott*</p> |
|--|---|

*Voting Representative

Minutes

Handouts included: Agenda; October 16, 2011 Meeting Minutes, IME Related Issues Powerpoint, The Check-Up Newsletter, Social Determinants of Health Issue Brief, Community Utility Issue Brief, Understanding Iowa Exchanges, HBE Planning Grant

TOPICS	KEY DISCUSSION POINTS/OUTCOMES
<p>Call to Order <i>Heather Hobert-Hoch</i></p>	<ul style="list-style-type: none"> • Meeting called to order at 9 a.m. Cari Spear was unable to attend today, Heather Hobert-Hoch will chair today’s meeting.
<p>Approval of Minutes</p>	<ul style="list-style-type: none"> • The October 16, 2011 Grantee Meeting Minutes were presented for approval. Motion for approval was made by Cindy Harpenau and seconded by Jodene DeVault. Motion approved.

<p><u>Announcements</u> Department Updates <i>Gretchen Hageman</i></p> <p>Perinatal Depression Resource <i>Heather Hobert-Hoch</i></p>	<ul style="list-style-type: none"> • Several legislative initiatives have come up so far this session. • Esha Steffen was hired in November and is the new EHDI short-term follow-up coordinator. • Addie Rasmusson has accepted the PREP (Personal Responsibility Education Program) coordinator position. • Sarah Mauch has accepted the PRAMS coordinator position. • Listening post feedback is being addressed by the MCH Technical Assistance and Consultation workgroup. MCH contract agency personnel serving on committee include: Mary Groves, Michele Ross, Chrystal Woeller, Sandy Kahler, Mary Odell and Cindy Harpenau. <ul style="list-style-type: none"> • A brochure is available for providers working with pregnant and new moms called <i>A Provider's Guide to Perinatal Depression</i>. Order by contacting Heather Hobert-Hoch. • Go to www.beyondtheblues.info for information about a consultation services available and additional resources.
<p>CAReS Update <i>Erin Parker</i></p>	<p>New CAReS Software:</p> <ul style="list-style-type: none"> • Timeline – Early February a phased approach of agencies loading the new CAReS software. There will not be double data entry. The software will be loaded in phases then plan to go “live” in March. • Erin Parker sent out an email to agency CAReS Administrators requesting information to help IDPH phase the installation.
<p>Health Care Reform <i>Beth Jones</i></p>	<ul style="list-style-type: none"> • See handouts. • AOCs (Accountable Care Organizations): accountable for the care of a set of patients or quality indicators for a disease process. MCH agencies need to think about your role for having a contract with a local physician or medical group. • Question: How will ACOs be required to work with FP and MCH? Beth does not think they will be required to do so. The onus will be on our agencies to talk with ACOs to convince them how their agency can help them reach or exceed their quality indicators and financial rewards. • Handout - Health Benefits Exchange: Understanding Iowa Exchanges and Iowa Health Benefits Exchange and Iowa ehealth (Electronic Health Information Advisory Council), see the November-December 2011 edition of The Check-Up. • Handout - Health Benefits Exchange Planning Grant Key Implementation Decisions and Activities. Public health is a small player in the bigger picture of HBE. IDPH holds the grant. • Governance structure must be in place before IDPH can request a level II grant. The governor or legislature must authorize a governance structure. • Contact Beth Jones at beth.jones@idph.iowa.gov if you have questions.
<p>MCH Administrative Manual <i>Lucia Dhooge</i></p>	<ul style="list-style-type: none"> • The 4th edition of the MCH Administrative Manual is now posted to the IDPH website. • One hard copy will be printed per agency by IDPH. • Thanked everyone who was involved in preparing the new edition. • Watch for a post-publishing survey in approximately three months.

	<p>This will probably be via Survey Monkey.</p> <ul style="list-style-type: none"> • IDPH intends to publish monthly articles in The UPdate to highlight features of the new manual. • Gretchen Hageman stated she is very excited about the revisions in the new MCH Administrative Manual. Consultation and training will be provided for major issues such as the new CAREs software.
<p>IME Related Issues <i>Janet Beaman</i></p>	<ul style="list-style-type: none"> • See handout “IME Related Issues.” • Code S9123 – Home visit for nursing services – increased the number of allowable units from 6 to 10 in a 200-day period. • Code A0120 – Transportation by mini-bus or other non-profit transportation has been added to the Maternal Health Center package. • Revised periodicity schedule is coming soon. Revised schedule will include a 30-month visit per recommendations within Bright Futures, 3rd edition. • Immunization administration with counseling codes 90460 and 90461 will be revised by IME. • Developmental testing: CMS added code G0451 for developmental <i>testing</i> (ASQ, PEDS, Brigance). Maximum Medicaid reimbursement for these tools did not change. Developmental <i>screening</i> (96110) was redefined as a brief questionnaire and is reimbursed at a lower level. • New Medicaid HMO: Meridian will begin coverage of services for clients in Clinton, Scott and Muscatine counties sometime in spring of 2012. MH and CH agencies continue to provide informing and care coordination services for this population. Medical direct care is provided by practitioners with the HMO panel of providers. Dental direct care is not affected and remains for fee-for-service. IME will release an informational letter providing additional detail. • 5010 format and transition: If you are having trouble getting through on the telephone for assistance, try going to the website to review the user guide, tutorials and presentations for self-help. • FFY 2012 MCH Chart Audit: New chart audit tools for both MH and CH are posted on the MCH Project Management Tools website. <i>Internal audit required every other year and joint audit with state staff and agency staff in the alternate year.</i> Due by April 15, 2012. Request extension in advance of this date, if needed. • Transportation plan: How to account for “no shows” in the Transportation plan since these are not billable? Determine the total cost of “no shows” in FFY 2011 for the mode of transportation. Divide “total no show cost” by number of rides actually provided for clients for the mode of transportation. Add this “no show amount per ride” to the cost of a ride for FFY 2012. When you bill, use the total of the cost of the ride plus the cost of “no show” per ride. Send adjustment of Transportation Plan to shelley.horak@idph.iowa.gov. • Mary Kay Brinkman stated that the dental codes have been fixed.
<p>RFA <i>Gretchen Hageman</i></p>	<ul style="list-style-type: none"> • FFY 2013 RFA for MCH/FP/OH targeting release date of February 22. Webinar will be held on February 29 at 1:30 p.m. to highlight changes. Due date will be April 30, 2012. • Funding will be a 3 percent decrease and a 3 percent hold. We will keep agencies posted as new information is received. • The RFA team tried to streamline the process even more than was done for FFY 2012. The February 29 webinar will be recorded.
<p>CAREs Review</p>	<ul style="list-style-type: none"> • The CAREs Review Tool and Summary is being piloted by a few

<p>Tool/Summary <i>Juli Montgomery</i></p>	<p>agencies. The new process for CH and MH will be announced.</p> <ul style="list-style-type: none"> • This process should be considerably less labor and time intensive. The new process will not require going back to October to review records. • On December 15, project director's received an Excel file example of what will be received monthly. There is some data that fills into the template. Juli will resend files. • Juli will offer a webinar in February to provide training and illustrate examples.
<p>Budget/Legislative Update <i>Julie McMahon</i></p>	<ul style="list-style-type: none"> • State level: legislative session has begun. April 17 is day 100 and adjournment is anticipated by the end of March 2012. • Governor's State of the State: budget request for IDPH at level funding. There is a chance for additional money, but also a chance that the budget will be decreased. • All are encouraged to sign up for the weekly legislative update listserve. Deborah Thompson is the department's legislative liaison and a registered lobbyist. She is also the liaison for Iowa the Healthiest State in the Nation efforts. • IDPH annual report and budget summary for 2011 was posted this week on the IDPH website. Each topic section is brief, no more than two pages. These program topics are good to reference with local legislators, boards of health and more. Topic sections help to show the impact these dollars make. • Legislative issues for this year: still being flushed out. There was a fiscal note concerning abortion.
<p>Adjournment <i>Heather Hobert-Hoch</i></p>	<ul style="list-style-type: none"> • Meeting adjourned at 11 a.m. • Next meeting will be held April 19 via a GoToWebinar. • Motion by Cindy Harpenau to adjourn. Motion seconded by Kim Finneran. • Recommended agenda items for next meeting include: <ul style="list-style-type: none"> - Perinatal depression consultation services. - Continue to discuss Accountable Care Organizations and what MCH/FP agencies should be doing right now to make sure we are recognized by ACO's and be paid for our services. - Continue to update us on the affordable care act and how we work within it. - Reimbursement for interpretation services.