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In This Issue:

2...Important Stuff:

New Bureau Chief for the Bureau of Family Health

New MCH Services for FFY 2015

MCH/FP Fall Seminar Registration

3...Interesting Reads

4...Calendar at a Glance

4...Resources

Agency Highlight: *Mid-Iowa Community Action*

The MICA Child Health Program is working to expand services provided to families in the WIC MCH Clinics including Substance Abuse and Domestic Violence Screenings. The Maternal Health Program at Mid-Iowa Community Action is working to encourage home visit services, including postpartum and listening home visits when appropriate, with all Maternal Health clients served in our 5 counties. We have seen an increase in women accepting postpartum home visits, as the nursing staff takes extra opportunities during appointments and through phone calls to discuss the benefits.

The Maternal Health Nursing staff has scheduled the first Listening Home Visit for our agency and plans to begin in August. We continue to recruit women into the program through connections with other MICA services including WIC, Strong Parents Strong Children Program, Head Start, and Family Development. We also maintain a strong referral network with local public health, medical providers, and various human service agencies. We are strengthening our relationships and referral procedures with local agencies to connect families to appropriate and useful resources.

Important Stuff

The Bureau of Family Health Welcomes a New Chief

IDPH is pleased to announce that Marcus Johnson-Miller has accepted the position as Chief for the Bureau of Family Health. Marcus has been with IDPH and the Bureau of Family Health for over 12 years with the Title V MCH program and as the project coordinator for the 1st Five Healthy Mental Development program. He is looking forward to this new opportunity to continue improving the health of families in Iowa!



New MCH Services for FFY 2015

Preventive Medicine Counseling Related to Screening for Chlamydia and Gonorrhea

For FFY 2015 (effective October 1, 2014), the Iowa Medicaid Enterprise is including preventive medicine counseling in the Maternal Health Center (MH) and Screening Center (CH) provider packages. The purpose for adding these new codes is to be able to bill for providing counseling for risk reduction when screening for chlamydia and gonorrhea. The ability to provide screening for chlamydia and gonorrhea is new to our MCH programs.

Rationale: Both IME and IDPH support including screening for chlamydia and gonorrhea in a variety of settings. We are including MCH as an additional possible setting for clients to access these services. Because these are direct care services, agencies have a choice as to whether to including this option in their MCH service package – or not. In recent years, two of our MCH agencies have made a specific request for these services. Note that including these services does not preclude an agency from referring client to their medical home or to another agency such as Family Planning if they choose.

Coding and billing: There are no billing codes available for collecting the specimens for screening for chlamydia and gonorrhea. However, the following codes will be open for MCH agencies and are included in the upcoming Cost Analysis:

- **Code 99000:** Handling and conveyance of a specimen to a lab. Although this is a billable code that can be used for packing and sending the specimen to the lab, this code is typically denied by IME as an 'incidental service' if another direct care service is billed for the client on the same date.
- **Code 99401:** Preventive medicine counseling for risk reduction counseling as you screen for chlamydia and gonorrhea. This is a 15 minute, time-based code.
- **Code 99402:** Preventive medicine counseling for risk reduction counseling as you screen for chlamydia and gonorrhea. This is a 30 minute, time-based code.

Note that codes 99401 and 99402 will not pay if another counseling-type code is billed for the client on the same day (e.g. health education in the Maternal Health program).

More information and training: Codes 99401 and 99402 are included in the FFY 2015 Cost Analysis materials. Additional information will be made available at the Fall Seminar. We also plan to offer a webinar training in coming weeks related to these new services.

Registration is NOW OPEN for the MCH/FP Fall Seminar!

The Maternal and Child Health and Family Planning Fall Conference is just one month away! The conference will be held at the West Des Moines Marriott, 1250 Jordan Creek Pkwy, West Des Moines, IA 50266 on October 14th and 15th. Registration is now open, and the deadline is October 6th. To register, click on the link below.

<https://www.surveymonkey.com/s/fallseminar14>



Interesting Reads

Evidence-based Youth Development:

Iowa and the PREP Program

Check out the Summer 2014 issue of Healthy Generations for an in-depth look at Iowa's Personal Responsibility Program (PREP), written by the Bureau of Family Health's own Addie Rassmussen! Iowa is using three different evidence-based teen pregnancy prevention curricula in seven counties to promote a healthy adolescents as they prepare for adulthood. Through the Teen Outreach Program (TOP)[®], Wise Guys[®], and Sistering, Informing, Healing, Living, and Empowering (SiHLE)[®] program, Iowa PREP contractors are reaching specific groups of high-risk teens. In addition to teen pregnancy prevention resources, these programs include adulthood preparation subjects such as healthy life skills, adolescent development, and healthy relationships. Approximately 1,200 Iowa youth have participated in these programs!

Click here to see the full Summer 2014 issue of Healthy Generations

Rassmussen, A. (2014). Evidence-based youth development: Iowa and the PREP program. *Healthy Generations*, (Summer 2014), 20-22. University of Minnesota.

Say What?!

Sexual Health: Adolescent Social Network Characteristics and Communication Patterns

Also included in the Summer 2014 issue of Healthy Generations is an overview of a study on adolescent communication in Iowa PREP participants. Researchers examined the size and density (total number of ties within a network, out of all possible ties) of the participants' social networks, proportion of family and friends, and who they would talk to about friendships, romantic relationships, sexual activity, abstinence, and birth control. Check out the full article to see findings and recommendations!

Askelson, N. M., Turchi, J., Elchert, D., Golembiewski, E., Leicht, E., & Rassmussen, A. (2014). Evidence-based youth development: Iowa and the PREP program. *Healthy Generations*, (Summer 2014), 20-22. University of Minnesota.

Young Adults' Attitudes Towards Health Insurance

Click here to see the report and infographic summary.

Social Media Spotlight – Social Media in the Workplace

Is your agency using social media?

Human 1.0, the International Association of Business Communicators, and the Society for New Communications Research developed a survey to study how use of social media affects employee activities and attitudes. They found that employees were more likely to express greater loyalty to and trust of their employers, experience more pride in their work, and feel they were making a difference when they were able to communicate openly with both internal and external stakeholders through social networks. Social media use did not appear to be linked to the organizational function or level of the survey respondents (marketing, communications, management, human resources, etc.). Over half of the participants believe that social media is one of the best ways to get information on a company, and 40% believe what they read about a company on social media is *more accurate* than what is on the company's website. Training in the use of social media was identified as a major barrier to using it, and almost half (46%) of the participants believe their company does not do a good job of using social media. Only 20% of survey respondents' employers explicitly do not allow social media use, but half reported they believe their employer prefers that they do not use social media, and over half (54%) reported their employer does not provide training on social media use. While survey responses were inconclusive regarding the impact of social media use on worker productivity, it is clear employee perceptions of trust and their ability to make a difference with their work is improved through the use of social media. Many organizations use social media to promote their work, but it could also be used as a way for employees to network and improve employee attitudes! Click here to read the full report.



Calendar at a Glance

September

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
	1	2	3	4	5	6
7	8	9	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27
28	29	30	31			

October

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30		

Resources

New fact sheets from NASHP supporting high performance in early entry into prenatal care.

CMS Strategy Guides on the Medicaid Benefit for Children and Adolescents:

- » Making Connections: Strategies for Strengthening Care Coordination in the Medicaid Benefit for Children & Adolescents
- » EPSDT – A Guide for States: Coverage in the Medicaid Benefit for Children and Adolescents
- » Keep Kids Smiling: Promoting Oral Health Through the Medicaid Benefit for Children & Adolescents
- » Paving the Road to Good Health: Strategies for Increasing Medicaid Adolescent Well-Care Visits

Kerrying On: Whose Line Is It Anyway?

Have an extra minute? Need a break? Check out [this fun blog post](#) about using social scripts to handle high-stakes conversations.

