



# The Check-Up

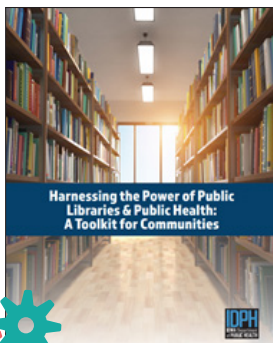


*The Check-Up is a newsletter designed to keep interested Iowans up-to-date on the progress of emerging health care initiatives and resources.*

## Iowa News Library and Public Health Collaboration



A new toolkit has been developed called “Harnessing the Power of Public Libraries & Public Health: A Toolkit for Collaboration”. This toolkit is a planning resource for public libraries and public health agencies to assist in forming a collaborative partnership that meets the needs of the community. The toolkit provides information, ideas, and resources to inspire and facilitate public library and public health collaboration. This toolkit was created from funding received by the Iowa Department of Public Health (IDPH) through the Telligen Community Initiative. Through this grant funding, pilot projects were implemented which focused on supporting and equipping Iowa’s libraries with the tools, resources, and programs to collaboratively address social determinants of health (SDH) gaps and improve population health.



**Public Libraries and Public Health can team together to help improve population health.**



Another project that supports this work is a partnership between IDPH and the State Library of Iowa to promote the collaboration among libraries and public health. IDPH coordinates a wide variety of programs and resources on different health topics and emerging issues. The goal of this collaborative relationship is to equip Iowa’s 544 public libraries through the already established communication channels with the State Library of Iowa with these health promotion materials and resources that can be shared with library patrons. A survey was conducted with Iowa’s public libraries to gauge their interest in offering resources developed by IDPH within their library, as well as the types of public health topics they would be most interested in. The results from this survey led to a number of trainings to Iowa’s libraries to share information and resources that can be utilized within libraries. The training topics so far included:

- **Nutrition and physical activity:** IDPH’s 5-2-1-0 Healthy Choices Count Program
- **Information & referral resource for patrons:** 211 Iowa, Iowa Compass, LifeLong Links



## Iowa Healthcare Workforce Strategic Planning and Stakeholder Engagement Initiative

The Iowa Rural Healthcare Workforce Strategic Action Plan has been finalized and can be viewed here: [https://www.iowaruralworkforce.org/uploads/2/6/8/3/26836754/iowaruralhealthcare-workforcestrategicactionplan\\_public\\_\\_3\\_.pdf](https://www.iowaruralworkforce.org/uploads/2/6/8/3/26836754/iowaruralhealthcare-workforcestrategicactionplan_public__3_.pdf)



Modern changes in healthcare delivery from a volume-based system to a value-centered system has increased strain on the rural healthcare providers. Rural communities currently face aging populations, higher comorbidity rates, an ongoing opioid epidemic, and lower incomes. All of these challenges shape the healthcare experience in these communities. The state of Iowa is covered in large part by rural healthcare, boasting 82 critical access hospitals and 170 rural health centers with its 78 rural counties. Iowa currently ranks 43rd in the nation in physicians per capita. In addition, the vast majority of Iowa’s counties contain shortage areas for primary care, mental health, and dental health services. Shortage area locations can be seen on the next page. These shortages are particularly severe in rural communities and result in decreased access to medical care. Increasing and assisting rural healthcare providers is paramount to healthcare provision for Iowans across the state.

The Iowa Medical Society (IMS), in coordination with the Iowa Department of Public Health (IDPH), Iowa Hospital Association (IHA), the Iowa Pharmacy Association (IPA), and the Iowa Primary Care Association (Iowa PCA), leads the Iowa Healthcare Workforce Strategic Planning and Stakeholder Engagement Initiative.

## Iowa Healthcare Workforce continued...

The goal of this project is to use input from local communities and healthcare workforce stakeholders to identify actionable solutions that would advance Iowa's healthcare workforce. Through a variety of stakeholder events and meetings with healthcare providers, this initiative has gathered the insight necessary to assemble a Strategic Action Plan. The Strategic Action Plan includes four common, consistent goals, including:

- **Goal 1: Recruitment**
- **Goal 2: Training & Education**
- **Goal 3: Retention**
- **Goal 4: Sustainability**

The Rural Healthcare Workforce Task Force that guided the development of the Strategic Action Plan met in January to recap the plan, share priorities and opportunities from the plan, and outline next steps for forward momentum and accomplishment. Since that January meeting, partners have been hard at work focusing on the policy components to bolster Iowa workforce programming and supports. Stakeholders will continue working together as part of goal-oriented work groups and will share latest updates on statewide activity during the next Task Force meeting in June 2022.

Progress updates of the Strategic Action Plan will be made publicly available and all stakeholders are welcomed and encouraged to contribute. Let us know if you'd like to be more involved.



## Iowa Rural Healthcare Workforce Connection Website

The [Iowa Rural Healthcare Workforce Connection website](#) is dedicated to providing people with information and resources about rural healthcare in Iowa. Through this website, individuals are able to:

- Access employer recruitment and retention programs
- Understand what it is like living in rural Iowa
- Learn about health sciences careers
- Find a job
- Post a job
- Find education and training opportunities
- Understand Iowa's healthcare system and workforce



## Centers of Excellence Program

Centers of Excellence are innovative care models that specialize in specific areas of medicine, offer a variety of services and treatments, and create regional access to specialty care, with a focus on creating access to specialty care in rural areas where access is currently lacking. The goal of this program is to demonstrate regional collaboration to assess targeted medical needs of local residents, and establish partnerships to leverage resources and develop a business model for long-term sustainability. State funding was available to establish two Centers of Excellence projects in Iowa. IDPH has established contracts through an RFP process with the following two organizations:

- ✓ **UnityPoint Health (Iowa, Marshall, Poweshiek, Tama)**
- ✓ **St. Anthony Regional Hospital (Audubon, Calhoun, Carroll, Crawford, Greene, Sac)**

These two projects both have a focus on maternal health. Below are summaries of both projects.

### Background

The State of Iowa recognizes access to healthcare as one of the biggest challenges affecting rural communities. If resources are limited, community members may have unmet health needs, potentially leading to a decrease in quality of life and life expectancy. Forty percent of Iowans reside in rural communities, and like the national trend, people living in rural Iowa also experience social, economic, and health-related disparities. Access to comprehensive, quality health care services is important for promoting and maintaining health, preventing and managing disease, reducing disability and premature death, and achieving health equity for all Iowans. As a predominantly rural state, many Iowa communities face significant challenges accessing health care services. In many areas, the supply of healthcare providers cannot keep up with the demand for services. These shortages can create barriers to access and timely and appropriate care, which can lead to negative health outcomes.

Iowa has more than 82 critical access hospitals, 170 rural health centers, and 76 local public health agencies servicing Iowa's rural counties. Iowa also has 14 community health centers that offer full health services in over 48 locations. Working together to navigate the changing healthcare landscape is pivotal to being able to ensure the needs of Iowans in Iowa's rural communities are met. Declining populations in some rural communities across Iowa have resulted in lower volumes of patients for local health care providers. Local hospitals and health care providers are struggling to sustain all the services they have historically offered. Changing how and where care is delivered by leveraging resources regionally can improve access to care in some areas of our state. Centers of Excellence can play a pivotal role in encouraging collaboration among regional health care providers in rural areas.

### UnityPoint Health's Center of Excellence Project

The UnityPoint Women's Health Service Line Center of Excellence project is working to develop a framework to sustain access to high quality obstetric services for rural populations. They are engaging key stakeholders in Marshall, Iowa, Tama, and Poweshiek counties and have formed a Center of Excellence Steering Committee. Some of the key early successes of this project include the development and design

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## Centers of Excellence continued...

of a process [map] for selecting regional initiatives as well as the development and dissemination of provider and consumer surveys (with over 300 responses to date). The results of this survey will be compared to the Community Health Needs Assessments & Health Improvement Planning (CHNA & HIP) and evaluated for any additional perceived need, trends, or themes, as well as, gaps in care as reported by the providers and consumers in the defined service area. Another huge success is the alignment between the local public health departments, the providers, and hospital leadership team. This alignment has created a successful path forward in having public health nurses, clinic nurses, and hospital nurses become certified in lactation support for their communities. Additionally, they have implemented best-practice standards through purchasing AWHONN POEP (Perinatal Orientation Education Program) which standardizes care and reducing variation, which is proven to produce the best outcomes for all patients. They have defined the role of a Community Liaison to drive alignment of all services from clinic, to hospital, to the community. Through this project, UnityPoint Health plans to equip their defined rural service area with telehealth services and equipment. Through this vitally important telehealth work, they will develop care pathways and increase access to specialty care in rural Iowa (i.e. Perinatology, Mental Health specialist). There is a critical need in Marshall county for additional public health support for post-partum home visits. UnityPoint Health will work with Grinnell Regional Medical Center leadership to allocate dollars for a temporary position and pilot an innovative approach to filling this community need. Their overall goal is to improve access and resources by providing the best care for all patients, while designing an innovative program that will meet the needs of all Iowa's rural communities.



**Both Center of Excellence projects have a focus on maternal health.**

## St. Anthony Regional Hospital's Center of Excellence Project

The Birth Place at St. Anthony Regional Hospital's Center of Excellence project is focusing on obstetrical (OB) care across the continuum to look at ways to address the OB desert of the region. Their model emphasizes the importance of close-to-home prenatal care and delivery with the development of a "hard-wired" process of getting families reconnected with their primary care provider and resources within the communities they live. The Center of Excellence Coordinator works on identifying contacts and developing relationships with public health, other area hospitals and clinics, mental health providers, and other service providers in the region. The St. Anthony Center of Excellence model allows for development of Community Outreach. The Birth Place is hosting community events in collaboration with local public health departments and community service providers. This allows for enhanced relationships and demonstrates a united front for care of the patient. During these events, educational topics on pregnancy, infant care and safety, feeding methods, and what to expect during delivery are introduced. The over-arching goal is to connect event participants to more formal sources of education (i.e. in-person classes, home visitation, or online resources). Events like these show joint collaboration and are key in creating a full circle care coordination process where the care of the patient is returned to their local community for support services well as to their local care provider after delivery.



Outreach and education is an important focus of their project. Within a 45 mile radius of Carroll, there are only two other hospitals offering OB services. With this limited access to OB care, it is likely that deliveries are going to happen outside of the hospital or at a facility that does not offer OB services. Their Center of Excellence model has a focus on training and education to other medical providers in their service area that may find themselves in a delivery situation. Through this model, a dedicated nurse educator is trained in NRP (neonatal resuscitation) and S.T.A.B.L.E. (Stabilization of the newborn for transfer), allowing St. Anthony to provide a local education option for NRP, S.T.A.B.L.E. , and a Newborn Fellowship course (newborn assessment, stabilization, common complications and treatments, care of preterm and term babies, along with hands on skills and practice via simulation.) All of these opportunities are being offered to surrounding hospitals and EMS teams.

Another important focus of their project is recruitment and retention of nursing and medical staff, including recruitment of an additional OB/GYN to the area. One example of how they are implementing this by enhancing nurse competency through specialty certification. With a limited number of hospitals in the area with OB services, having a hospital with skilled and competent staff is vital. Four nurses will be completing coursework and sitting for their Advanced EFM (Electronic Fetal Monitoring) certification. Additionally, two nurses will complete coursework and sit for certification in Lactation Consultation. Equipment upgrades and facility updates are also part of this effort as having the necessary tools and equipment available to treat the patient are vital.

## Medicaid

### Iowa DHS Dashboard Initiative's Interactive Reports



The Iowa Department of Human Services (DHS) is committed to continuous improvement, transparency, and accountability for results. To that end, DHS has launched informational dashboards (interactive reports) to share up-to-date, accurate data with the public to increase awareness of our programs and performance. The vision for this initiative is to increase comfort and confidence in the quality of services provided by DHS. Stakeholders are encouraged to use this data to help drive conversations and inform decisions that affect the health, well-being and prosperity of Iowans. DHS will continually deliver enhancements to these reports to share additional information and details including targeted performance measures used to evaluate progress. All dashboards are updated regularly.

#### The dashboards include:

- Fiscal
- Child Care
- Child Support
- Child Welfare
- Facilities
- Supplemental Nutrition Assistance Program (SNAP)
- Family Investment Program (FIP)
- Health Programs (Medicaid)
- Social Determinants of Health

If you have questions about the dashboards or suggestions for improvement, please send them to [dashboards@dhs.state.ia.us](mailto:dashboards@dhs.state.ia.us).

#### ✓Iowa MCO Quarterly Reports

Performance monitoring and data analysis are critical components in assessing how well Iowa's MCO's are maintaining and improving the quality of care delivered to members. The [quarterly reports](#), with a number of elements required through oversight legislation, are comprehensive and focus on compliance areas, as well as health outcomes over time.

#### ✓Iowa Medical Assistance Advisory Council (MAAC)

The purpose of MAAC is to "Advise the Director of the Department of Human Services about health and medical care services under the medical assistance program." MAAC is mandated by federal law and further established in Iowa Code. All MAAC meetings are open to the public. For more information and to view the meeting schedule, visit: [https://dhs.iowa.gov/ime/about/advisory\\_groups/maac](https://dhs.iowa.gov/ime/about/advisory_groups/maac).

#### ✓Iowa Council on Human Services

DHS coordinates the Iowa Council on Human Services, which acts in a policymaking and decision-making capacity on matters within the jurisdiction of DHS. For more information and meeting dates visit <http://dhs.iowa.gov/about/dhs-council>.

#### ✓Iowa Managed Care Ombudsman Reports

The [Managed Care Ombudsman Program](#) advocates for the rights and needs of Medicaid managed care members in Iowa who live or receive care in a health care facility, assisted living program, or elder group home, as well as members enrolled in one of Medicaid's [seven](#) home and community-based services waiver programs. The Managed Care Ombudsman Program develops monthly and quarterly reports which can be accessed [here](#).

#### ✓Hawki Board

The Hawki Board is a group of people and directors of other state agencies who are appointed by the Governor or who are members of the Legislature. The Hawki Board was established to provide direction to the Iowa Department of Human Services on the development, implementation, and ongoing administration of the Hawki program. Anyone may attend and observe a Board meeting. During the meeting, there is time for the public to make comments and ask questions. For more information and to view the meeting schedule, visit: <https://dhs.iowa.gov/hawki/hawkiboard>.



*DHS will continually deliver enhancements to these reports sharing additional information and performance measures.*



## Health Insurance Marketplace



### HHS Releases State of the ACA Report, for ACA 12-Year Anniversary

On March 23, 2022, the U.S. Department of Health and Human Services (HHS) released a report titled “State of the ACA,” published by the Centers for Medicare & Medicaid Services (CMS). The report shows that the Affordable Care Act (ACA) is at the strongest it has ever been given to investments through the American Rescue Plan (ARP), indicating that, nationwide, 2.8 million more consumers are receiving tax credits in Plan Year (PY) 2022 compared to PY 2021.

Concurrently, HHS also released two reports published by the Office of the Assistant Secretary for Planning and Evaluation (ASPE). The first ASPE report shows that more Americans have gained coverage during PY 2021, as the ARP and other Administration policies took effect. The report further shows that, absent the ARP, the average monthly premium after Advanced Premium Tax Credit (APTC) for [HealthCare.gov](https://www.healthcare.gov) enrollees would have been \$59 per month higher, or 53 percent higher. The second ASPE report shows that an estimated 3.4 million Americans currently insured in the individual market would lose coverage and become uninsured if the ARP’s premium tax credit provisions are not extended beyond PY 2022. To view the press release, please visit: <https://www.cms.gov/newsroom/press-releases/12-year-anniversary-affordable-care-act-new-hhs-report-shows-ways-biden-harris-administrations>.



### HHS Releases Final PY 2022 OE Report and Final PY 2022 OE PUFs



On March 23, 2022, HHS released the Final PY 2022 Open Enrollment (OE) report and the Final PY 2022 OE Public Use Files (PUFs). The Final PY 2022 OE report summarizes health plan selections through the individual Marketplaces nationwide during the 2022 Open Enrollment Period (2022 OEP), including OE data for the 33 states with Marketplaces that use the [HealthCare.gov](https://www.healthcare.gov) eligibility and enrollment platform for PY 2022, as well as for the 18 State-based Marketplaces (SBMs) that use their own eligibility and enrollment platforms. The Final PY 2022 OE PUFs provide additional data on individual Marketplace activity nationwide, including numbers of consumer applications submitted for health insurance coverage, Qualified Health Plan (QHP) selections, and stand-alone dental plan (SADP) selections. The PUFs also include demographic characteristics of consumers who made a plan selection.

- To view the Final PY 2022 OE report, please visit: <https://www.cms.gov/files/document/health-insurance-exchanges-2022-open-enrollment-report-final.pdf>.
- To view the Final PY 2022 OE PUFs, please visit: <https://www.cms.gov/research-statistics-data-systems/marketplace-products/2022-marketplace-open-enrollment-period-public-use-files>.

### CMS Announces New SEP for Consumers at or Below 150% FPL Now Available Online through HealthCare.gov

CMS recently announced in February a new [HealthCare.gov](https://www.healthcare.gov) Special Enrollment Period (SEP) that would be made available to consumers with an estimated annual household income at or below 150% Federal Poverty Level (FPL), and who aren’t eligible for Medicaid or Children’s Health Insurance Program (CHIP), which allows them to enroll in Marketplace coverage in Federally-facilitated Marketplaces (FFMs) and State-based Marketplaces on the Federal Platform (SBM-FPs).

CMS announced at the time that consumers would not be able to enroll through this SEP at [HealthCare.gov](https://www.healthcare.gov) until late March and until then, CMS would be contacting consumers who previously applied for Marketplace coverage and didn’t qualify, but now may be eligible, by phone or email letting them know they may qualify and to contact the Marketplace Call Center for further help. Beginning this week, eligible consumers can now enroll through this SEP online on [HealthCare.gov](https://www.healthcare.gov). Additionally, CMS has posted a new [tip sheet](#) regarding the new SEP. As a reminder, SBMs may similarly implement an SEP for consumers who have an estimated annual household income at or below 150% FPL and who aren’t eligible for Medicaid or CHIP. Therefore, consumers residing in SBM states should check with their SBM regarding whether they are offering this SEP and any actions consumers may need to take.

**Eligible consumers can now enroll through this SEP online on [HealthCare.gov](https://www.healthcare.gov).**

## Resources & Reports

### Health Equity Roadmap



The American Hospital Association (AHA) has recently launched a [Health Equity Roadmap](#), a framework to help hospitals and health care systems chart their own paths toward transformation – thus becoming more equitable and inclusive organizations. The road map consists of three parts: an equity transformation assessment, a customized action plan and a virtual community of peers. The resource is meant to meet providers where they are in their equity journey, the organization said in a press release. The AHA vision is of a just society of healthy communities, where all individuals reach their highest potential for health. Through its Institute for Diversity and Health Equity, the AHA seeks to eliminate structural barriers that compromise diversity, equity and inclusion in hospitals and health care systems.

### RWJF Roadmap for an Equity-Centered Public Health Data Infrastructure

The COVID-19 pandemic laid bare the gaps in public health and health data infrastructure and illuminated the many ways in which they perpetuate vast health inequities. To work toward a modernized health data system, the Robert Wood Johnson Foundation (RWJF) established a first-of-its-kind National Commission to [Transform Public Health Data Systems](#) to reimagine how data are collected, shared, and used, and identify investments needed to improve health equity. The Commission released its [recommendations to the nation](#), calling on government at all levels, business, community-based organizations, philanthropy, and others to take specific action to transform the public health data system. The Foundation also announced \$50 million in grant-making toward that goal.



### Child Opportunity Index Data Tool



The neighborhoods where children live, learn and play influence their later life outcomes, including their economic mobility, educational attainment and health. The Child Opportunity Index (COI) 2.0 measures neighborhood resources and conditions that matter for children's healthy development. COI 2.0 allows us, for the first time, to compare the level of opportunity that neighborhoods provide for children across the U.S. in a single metric. COI 2.0 is unique and distinct from other opportunity indices in its focus on contemporary child-relevant neighborhood features. It offers a summary measure of the quality of neighborhoods children experience every day across the U.S. COI 2.0 includes 29 indicators that measure neighborhood-based opportunities for children including but not limited to access and quality of early childhood education (ECE), high-quality schools, green space, healthy food, toxin-free environments, socioeconomic resources and more. The 29 indicators are grouped into three domains: education, health and environment and social and economic.

COI 2.0 is available for virtually all neighborhoods (census tracts) in the 50 U.S. states and Washington, D.C. for two time points, 2010 and 2015. It is accessible via an interactive web application that allows users to explore the COI 2.0 in their communities and across the U.S., as well as a downloadable database that provides a single, harmonized database of the composite index measures and individual indicators of child opportunity that comprise the index. To view the Child Opportunity Index 2.0, [click here](#).



### RAISE Act State Policy Roadmap for Family Caregivers

On September 23, 2021, the RAISE Act Family Caregiving Advisory Council delivered key recommendations to support family caregivers, including a call for financial and workplace security and expanding home and community-based services, among other actions. The goal of the [RAISE Act State Policy Roadmap for Family Caregivers](#) is to provide a roadmap for state officials to better understand the state policy landscape for supporting family caregivers of older adults and to identify opportunities for innovation in their own states. In alignment with the Council's work, the roadmap is organized into the following sections as a series:

- ✓ **Section 1:** Public Awareness and Outreach to Family Caregivers
- ✓ **Section 2:** Engagement of Family Caregivers in Healthcare Services and Systems
- ✓ **Section 3:** Services and Supports
  - Services and Supports for Family Caregivers
  - The Direct Care Workforce
- ✓ **Section 4:** Financial and Workplace Security for Employed Family Caregivers
- ✓ **Section 5:** Research, Data, and Evidence-Informed Practices

*The RAISE Act provides a roadmap to state officials to better understand the state policy and support family caregivers of older adults.*

## State Policy Strategies for Strengthening the Direct Care Workforce

Recognizing the urgency of the crisis in direct care, states are taking action — collaborating with diverse stakeholders to tackle entrenched workforce challenges in bold, innovative ways. To leverage this historic moment, PHI has compiled [24 specific policy strategies](#) — with concrete examples — for improving direct care job quality and stabilizing the workforce. The strategies are organized according to the eight comprehensive solutions outlined in PHI's signature report, [Caring for the Future: The Power and Potential of America's Direct Care Workforce](#).

*Strategies to improve direct care job quality and stabilizing the workforce are compiled in this report.*



## Free At-Home COVID-19 Tests

Every home in the U.S. is eligible to order two sets of four free at-home tests at [COVIDtests.gov](https://COVIDtests.gov). For those who have difficulty accessing the internet or need additional support placing an order, you can call **1-800-232-0233** to get help in English, Spanish, and more than 150 other languages. This call-line is open 8 a.m. to midnight ET, 7 days a week. There is also TTY line (**1-888-720-7489**) to support access by hearing impaired callers.



Free At-Home COVID-19 tests are available at [COVIDtest.gov](https://COVIDtest.gov) or call **1-800-232-0233**.



## ✓ Contact Information

For more information on the work of IDPH's Bureau of Policy and Workforce Services, visit <https://idph.iowa.gov/policy-and-workforce-services>

