



2020 UNITYPOINT HEALTH CHILDREN'S LEGISLATIVE AGENDA

POLICY PRIORITIES

Medicaid and Hawki

Medicaid and the Healthy and Well Kids in Iowa Program (Hawki) provide a critical safety net for the health and well-being of Iowa's children. Over half (55 percent) of the 635,000 Iowans enrolled in Medicaid and Hawki are children, yet children account for only 20 percent of Medicaid spending. These two programs cover the essential health care needs for two in five children in Iowa. In rural Iowa, 35 percent of all children are covered by Medicaid and Hawki. Under Iowa's current Medicaid eligibility structure, combined with employer-based health care plans, 97 percent of Iowa children have health care coverage.

In comparison to uninsured children, those covered by Medicaid and Hawki are more likely to have better health outcomes as adults, have better school attendance and academic achievement, graduate from high school and attend college, and achieve economic success as an adult (such as increased wage earning and contribution to the tax base).

Policy Recommendation: UnityPoint Health supports innovative Medicaid policies which address the unique developmental needs of children, and protect children's health care coverage by opposing any Medicaid cost containment or administrative requirements that would negatively impact children.

Children's Mental Health

Mental health is an important part of overall health for children as well as adults. One in five children have a mental health disorder. One-fourth of lifelong cases of mental illness start by age 14. For a young person with symptoms of a mental illness, the earlier treatment is started, the more effective it can be. Early treatment can help prevent more severe, lasting problems as a child grows up. Yet 80 percent of children who need mental health interventions never receive treatment. Barriers to accessing treatment impact all children in Iowa, but especially children living in rural communities.

Policy Recommendations: UnityPoint Health supports the development of a comprehensive, statewide children's mental health system which:

- Expands funding for programs which support prevention, early identification and early intervention for children's social and emotional development.
- Supports the recommendations of the Children's Behavioral Health System State Board to fix the current patchwork of children's behavioral health services by providing adequate funding.

Maternal Health

Rising rates of maternal mortality in the United States have more than doubled since 1987 and many women have more complications during and after pregnancy, including 1 in 10 women who experience pregnancy-related depression. The causes of maternal mortality and morbidity are multifaceted and complex. Shortages of obstetrics workforce throughout Iowa, but especially rural Iowa, racial disparities in health care, and social determinants of health (such as the lack of transportation) all play a role in the ability of Iowa women to access appropriate health care during and after their pregnancy. Additionally, Iowa's increased rates of obesity, diabetes and hypertension among all populations, including women of childbearing age, complicate maternal and infant health outcomes.

There is strong evidence that maternal stress and Adverse Childhood Experiences (ACES) can have a significant impact on maternal and infant health. The Pregnancy Risk Assessment Monitoring System (PRAMS) surveys new mothers in Iowa. Their responses provide insight into health, attitudes, behaviors, and stressors Iowa mothers are experiencing. The stressors include domestic violence, substance use, depression, divorce, or incarceration of a partner or self. 67 percent of Iowa mothers reported at least one stressor in the 12 months before giving birth, and nearly 27 percent have experienced three or more stressors. States can impact the lifelong health of women and children if maternal stress and adversity are identified and treated early.

Policy recommendation: UnityPoint Health supports the expansion of evidence-based home visiting programs to include prenatal support for pregnant women and new parents. Such programs are shown to improve maternal-child health outcomes by identifying potential health risks, addressing the social determinants of health and reducing maternal stress.

APPROPRIATION PRIORITIES

Iowa Poison Control Center (IPCC)

Poisoning is the leading cause of death due to injury in the United States. Self-poisoning is now the leading cause of suicide attempts among adolescents, especially girls. The IPCC provides the people of Iowa with poison information and treatment advice through a 24-hour helpline, 1-800-222-1222. Staffed by nurses, pharmacists and physicians, the IPCC manages approximately 30,000 cases a year involving medicines, household products, snake and spider bites, and plants and chemicals in the home and workplace.

The IPCC saves lives and improves patient care by providing expert medical recommendations to health care providers treating drug overdoses and poisonings. Nearly 90 percent of the cases involving children under age six are managed safely at home, saving Iowans at least \$12 million each year in unnecessary emergency department visits and ambulance transports. 44 percent of IPCC cases are from participants in the Medicaid program, saving \$5.5 million for Iowa's Medicaid Program from avoided health care costs.

Appropriation Request: Increase the state appropriation for the IPCC by \$100,000 – for a total appropriation of \$600,000 – to provide state matching funds necessary to draw down the maximum federal funding authorized under the Children's Health Insurance Program (CHIP). This will help achieve an enhanced level of pharmacy expertise to optimize management of the complex and critically poisoned patient.

Child Protection Center Grant Program

In 2018 in Iowa, 11,568 children were confirmed as being abused by a parent or caregiver, a 3 percent increase from the previous year. Iowa's Child Protection Centers (CPCs) provide a nationally accredited service model to assess and treat the medical and emotional needs of these children. Through this multidisciplinary team approach, the CPCs served 3,463 children in FY 2019.

This public-private, multidisciplinary team partnership results in coordinated efforts between the Iowa Department of Human Services, local law enforcement agencies, prosecuting attorneys, victim advocates and medical and mental health professionals serving abused children, providing proven savings of \$1,047 per case.

Legislative Request: Increase the state appropriation by \$250,000 for a total of \$1.908 million to expand the Child Protection Center Grant Program to address the rising need for specialized medical evaluation and forensic interview expertise in the assessment of abused and neglected children in Iowa.

Foster Care Centers of Excellence Grant Program

The American Academy of Pediatrics (AAP) has classified children in foster care as a population with special health care needs and recommends that children be seen early and more often to assess and treat the impact of trauma and adversity. Up to 80 percent of children entering foster care have at least one unmet medical or mental health need that may potentially continue to be unaddressed even once they enter foster care. Youth in foster care are:

- Twice as likely to have a learning disability or developmental delay
- Twice as likely to have asthma
- Three times as likely to be diagnosed with ADD/ADHD
- Three times as likely to have a hearing or vision problem
- Five times as likely to experience anxiety
- Six times as likely to experience behavioral problems
- Seven times as likely to experience depression

– *Medical & Physical Health of Children in Foster Care*, Turney & Wildeman, Pediatrics (November 2016)

Iowa's Foster Care Clinic model is derived from the nationally recognized Rees-Jones Center for Foster Care Excellence in Dallas, Texas. The public-private partnership model utilizes a multidisciplinary approach, serving children of all ages who are placed outside of the home whether in kinship care, foster care, or a group care setting. The Foster Care Centers of Excellence offer both primary care/medical home and mental health services in one convenient location for children in, or transitioning from, foster care. Pediatric health and mental health experts at the centers have an understanding of Iowa's complex child welfare system and work with biological, foster and adoptive families to ensure children in foster care receive high quality, coordinated care to improve their long-term health outcomes and future success.

Legislative Request: Invest in a \$300,000 state appropriation for the establishment of a Foster Care Centers of Excellence Grant Program to meet the medical, mental health and developmental needs of children in and transitioning from Iowa's foster care system.

