

Off to a Good Start

2009 Policy Recommendations



Young children's health care critically impacts their healthy growth, educational, and social success. Children need a health care system that ensures they receive regular, preventive, and comprehensive evidence-based health services.

Over the last five years, Iowa has become a leader in developing a comprehensive child health system. To continue to lead, the Off to a Good Start Coalition offers specific policy recommendations to improve Iowa's child health services across six goal areas. The policies outlined in this document are research and evidence-based and demonstrate successful health outcomes for children if implemented. These policies are needed to ensure young children's health, reduce health disparities, and achieve long-term cost savings and health benefits.

Off to a Good Start Coalition Members:

Center for Disabilities and Development	Iowa Department of Public Health
Child and Family Policy Center	Iowa Empowerment Board
Child Health Specialty Clinics	Iowa/Nebraska Primary Care Association
Children's Hospital of Iowa	Iowa Prevention of Disabilities Policy Council
Delta Dental of Iowa	Maternal Child Health Advisory Council
Early Childhood Iowa	Medical Home System Advisory Council
Every Child Counts	State Public Policy Group
Iowa Association of Nurse Practitioners	The University of Iowa College of Public Health, Institute for Public Health Practice
Iowa Chapter of the American Academy of Pediatrics	Visiting Nurse Services

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Goal One: Increase access to and use of quality social, emotional and mental health services.

1. Assure that all primary health care providers have the knowledge and skills to incorporate developmental and behavioral screening into their practices by identifying a source of state match for the Healthy Child Development Provider Training Initiative.
2. Build community systems of care to identify and link young, at-risk children and families to appropriate services by expanding Iowa's **1st Five** Healthy Mental Development Initiative.
3. Develop a statewide network of behavioral health providers skilled in treating young children with challenging behaviors and families with multiple risks by identifying training strategies and securing funding to give providers the necessary skills.
4. Require all insurers to cover developmental and behavioral services for children.

Goal Two: Increase access to and use of preventive health services.

1. Secure additional funding to build upon the **1st Five** Healthy Mental Development Initiative.
2. Develop and adopt child health quality measures to ensure that children receive appropriate preventive health services.
3. Incorporate nutrition and physical activity counseling as part of primary care coverage for young children under Medicaid and **hawk-i** (healthy and wells kids in Iowa, Iowa's State Children's Health Insurance Program, now CHIP program).
4. Allow Medicaid primary health care providers to be reimbursed for providing preventive (well-child) care on the same day as a "sick child" visit.

Goal Three: Increase the number of children with a medical home.

1. Continue to develop and sustain the Iowa Medical Home System Advisory Council to promote the medical home concept as a standard of care for all Iowa children.
2. Engage health care providers (including but not limited to: physicians, dentists, pharmacists, nurse practitioners, physician assistants, nurses, dental hygienists, chiropractors, dietitians, and physical therapists), their professional organizations, and public and private insurers to support the development of medical homes across Iowa.
3. Build and support a patient-centered medical home system that integrates and connects clinical practices, (including primary and specialty care), other community-based services, and families so as to deliver the highest quality of care in the most efficient manner.

Goal Four: Increase the number of children with a dental home.

1. Maintain funding for I-Smile to improve local public health infrastructure through use of dental hygienists within Title V to create systems for treatment referrals, preventive dental services, health care provider trainings, and education for underserved children and their families.
2. Promote state health care reform policy to include a stand alone **hawk-i** dental plan that prevents children with medical insurance from becoming eligible for **hawk-i** dental benefits.
3. Seek a legislative commission to review national examples of alternative dental workforce models with the potential to expand oral health services within Iowa rural communities, and increase use of the dental hygiene workforce, including development of minimum standards to work as public health professionals with less restrictive supervision requirements.

Goal Five: Increase the number of children with health care coverage.

1. Expand coverage under Medicaid and **hawk-i** to income-qualifying immigrant children.
2. Develop streamlined and presumptive eligibility and simplified re-enrollment programs under Medicaid and **hawk-i**.
3. Create a "wrap around" premium assistance program for **hawk-i** to complement employer-sponsored coverage for **hawk-i** eligible families.
4. Ensure affordable child health coverage for all families that offers comprehensive benefits.
5. Create a dental coverage-only option under **hawk-i**.

Goal Six: Increase access to and use of preventive health services and prenatal care services for women and men of reproductive age.

1. Extend Medicaid coverage to low-income non-pregnant women through family planning or other waivers and/or through **hawk-i**.
2. Include a Medicaid waiver for women with post partum depression or other behavioral health problems in Iowa.
3. Secure coverage for tobacco-use screening and cessation counseling for all women of reproductive age.
4. Improve access to nurse midwives and doulas for low risk pregnant women.