MEDICAID AND HAWKI

Medicaid and Hawki provide a critical safety-net for the health and well-being of Iowa’s children. Over half (52%) of the 754,000 Iowans enrolled in Medicaid and Hawki are children, yet children account for only 20% of the Medicaid spending. These two programs cover the essential health care needs for 2 in 5 children in Iowa. An estimated 22,000 Iowa children were uninsured in 2019. In Iowa, children of Hispanic ethnicity (5.7%) are nearly twice as likely to be uninsured compared to non-Hispanic children (3%). In comparison to uninsured children, those covered by Medicaid and Hawki are more likely to have better health outcomes as adults; to have better school attendance and academic achievement; to graduate from high school and attend college or participate in post-secondary training; to achieve economic success as an adult such as increased wage earnings and contribution to the tax base.

POLICY RECOMMENDATION: Support innovative Medicaid policies which address the unique developmental needs of children, and policies which ensure health equity for all 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 problems as a child grows to adulthood. Yet 80% of children who need mental health interventions never receive treatment. Barriers to access impacts all children in Iowa, but especially children living in rural communities and from underserved populations. The pandemic has contributed to a rise in the number of children reporting anxiety, depression and suicidal ideation, and the severity of the mental health concerns. Nationally, Emergency Departments have seen a 45% increase in the number of children presenting with a mental health crisis in 2021.

POLICY RECOMMENDATION: Ensure the continued development of Iowa's Children’s Behavioral Health System to meet the unique developmental needs of children including programs which support prevention, early identification and early intervention services.

POLICY RECOMMENDATION: Recruit and retain the behavioral health workforce by ensuring competitive Medicaid reimbursement rates and offering incentives for direct care and behavioral health providers such as loan forgiveness and low interest loan consolidation programs.

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**MATERNAL HEALTH**

Maternal mortality is higher in the United States compared to any other developed nation. Racial disparities persist as the maternal mortality rates for non-Hispanic Black women are 3 to 4 times higher than the rates for White women. The causes of maternal mortality and morbidity are multifaceted and complex. However, two-out-of-three pregnancy-related deaths are considered preventable. By addressing the upstream risk factors while also improving the quality of maternity and postpartum care, maternal health outcomes can be dramatically improved.

There is strong evidence that maternal stress and Adverse Childhood Experiences (ACES) can have a significant impact on maternal and infant health. Stressors mothers report include financial, domestic violence, substance use, depression, divorce, or incarceration of a partner or self. Policymakers can improve the lifelong health outcomes of women, infants and children if maternal stress is appropriately identified and treated.

**POLICY RECOMMENDATION:** Extend postpartum Medicaid coverage for mothers from 60 days to 12 months to reduce barriers to accessing health, mental health and substance use disorder treatment.

**POLICY RECOMMENDATION:** Expand access to evidence-based home visiting programs including prenatal support.

**CHILDHOOD IMMUNIZATIONS**

Immunizations are a safe, effective way to protect children from disease, including some cancers, as well as hospitalization, disability, and death. Immunizations have led to a significant decrease in rates of vaccine-preventable diseases and have made a substantial impact on the health of children. It is especially important during a pandemic or other public health emergency to maintain routine immunizations to prevent further outbreaks.

The American Academy of Pediatrics strongly recommends immunizations as the safest and most cost-effective way of preventing disease, disability, and death. The AAP calls for the on-time, routine immunization of all children and adolescents. The AAP supports regulations and laws requiring immunizations to attend childcare and school, with exemptions for specific immunizations only when medically contraindicated for an individual child.

Children who are philosophically exempted from vaccination not only are at greater risk of developing vaccine-preventable disease but also put vaccinated children and medically exempt children who live in the same area at risk.

**POLICY RECOMMENDATION:** Protect and promote policies which support Iowa’s high rate of childhood immunizations to ensure the health of infants, children and adolescents.

**APPROPRIATION PRIORITIES**

**CHILD PROTECTION CENTER GRANT PROGRAM**

In 2020, a total of 10,539 children were confirmed as being abused by a parent or caregiver in Iowa. Iowa’s Child Protection Centers (CPCs) provide a nationally accredited service model to assess and treat the medical and emotional needs of abused children. The CPCs served 3,693 children in FY 2021. The isolation of children and their caregivers, associated with the financial and emotional stress of the pandemic, have a direct link to increased substance abuse, child abuse and family violence.

Iowa’s Child Protection Centers are nationally accredited, utilizing a multidisciplinary team model to coordinate efforts between the Iowa Department of Human Services, law enforcement agencies, prosecuting attorneys, victim advocates, medical and mental health professionals. Serving abused children in this manner has a proven savings of $1,047 per case.

**APPROPRIATION REQUEST:** Increase the state appropriation by $300,000 for a total of $1.958 million to expand the Child Protection Center Grant Program to address the need for increased child abuse and neglect evaluation and treatment services.

**IOWA POISON CONTROL CENTER (IPCC)**

The complexity and severity of poisoning and overdose cases is increasing in Iowa. The IPCC provides Iowans with poison information and treatment advice through a 24-hour helpline. Staffed by nurses, pharmacists and physicians, the IPCC manages approximately 26,000 cases a year involving medicines, household products, snake and spider bites, plants and chemicals in the home and workplace.

Calls to the IPCC regarding intentional overdoses have risen, along with accidental exposures to cleaning products and disinfectants during the COVID-19 pandemic. Self-poisoning is now the leading cause of suicide attempts among adolescents, especially girls. 86% of accidental pediatric poisoning cases are treated at home with poison center advice and follow-up. This results in an annual net savings of over $15 million in avoided health care costs in Iowa and helps to reduce the burden on our health care systems responding to the pandemic.

**APPROPRIATION REQUEST:** Increase the state appropriation for the IPCC by $240,000 for a total appropriation of $740,000 to provide the increased expertise needed for poisoning and overdose and accidental childhood poisoning cases in Iowa exacerbated by the COVID-19 pandemic. The state appropriation leverages the necessary investment to draw down the maximum federal funding authorized under the Children’s Health Insurance Program (CHIP).