

# BLANK CHILDREN'S HOSPITAL LEGISLATIVE PRIORITIES

# 2023



## POLICY PRIORITIES

### MEDICAID AND HAWKI

Medicaid and Hawki provide a critical safety-net for the health and well-being of Iowa's children. Over half (51%) of the 807,413 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 1 out of 2 children and 40% of all pregnancies in Iowa.

#### 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. However, 63.2% of pregnancy-related deaths are considered preventable. The 2021 Iowa Maternal Mortality Review Committee Report found 53% of all maternal deaths in Iowa occurred within 12 months postpartum (26.6% after 60 days postpartum). By addressing the upstream risk factors while also improving the quality of maternity and postpartum care, maternal health outcomes can be dramatically improved.

**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.

### CHILDREN'S MENTAL HEALTH

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 health care access impacts all children in Iowa, but especially children living in rural communities and from underserved populations. Currently, children with Medicaid attempting to access outpatient mental health services wait an average of 10-12 weeks for care, while children with commercial insurance only wait an average of 2-4 weeks. This is due to the low Medicaid reimbursement rates and significant administrative burdens experienced by mental health providers who accept patients with Medicaid. Many providers cap the number of Medicaid members they will serve or simply refuse to accept patients with Medicaid coverage due to these challenges.

**POLICY RECOMMENDATION:** Ensure the development of a strong children's mental health system in Iowa by adequately funding behavioral health services under Medicaid.

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## 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.

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

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

## CHILD PASSENGER SAFETY

Motor vehicle accidents are one of the leading causes of death and injury for children in Iowa. When car seats and booster seats are installed and used correctly, fatal childhood injuries can be reduced by as much as 71%. Current Iowa Child Passenger Safety laws fall short of recommended safety practices, and of the laws in our neighboring states of Illinois, Kansas, Minnesota, Missouri and Nebraska.

Discrepancies in state laws also cause confusion for parents and caregivers who live near bordering states. For example, a family with an 18-month-old child living in Council Bluffs would be required to have their child in a front facing car seat in Iowa, but in a rear facing car seat if they drive into Nebraska.

**POLICY RECOMMENDATION:** Strengthen Iowa's Child Passenger Safety laws by requiring a child ride in a properly secured in a child safety seat under age 8, and in a rear-facing car seat under the age of 2 years old or until the child reaches the maximum height or weight limit for their car seat.

## YOUTH GUN SAFETY

Gun-related injuries (accidental shooting, suicide, and homicide by firearms) is now the leading cause of death of children under the age of 18 in the United States. In Iowa, both intentional and unintentional firearm deaths have trended upwards for over the last 10 years, reaching an all-time high in 2020 of 353 deaths. Yet, we have little understanding of the impact gun-related deaths and injuries to children in Iowa because the data has not been disaggregated by age and published since 2002. The first step in preventing gun-related injuries to Iowa children is to review and better understand current data trends to make evidence-supported policy recommendations.

**POLICY RECOMMENDATION:** An interim study committee should be established to gather the existing Iowa pediatric gun-related injury and death data and coordinate a data sharing agreement to allow for review by the University of Iowa's Injury Prevention Center.

## APPROPRIATION PRIORITIES

### CHILD PROTECTION CENTER GRANT PROGRAM

Increase the state appropriation to a total of \$2.058 million to expand the Child Protection Center Grant Program to address the increased need for expertise to evaluate and treat child abuse and neglect in Iowa.

### IOWA POISON CONTROL CENTER (IPCC)

Increase the state appropriation for the IPCC to provide the increased expertise needed for overdose and accidental poisoning cases in Iowa. The state appropriation leverages the necessary investment to draw down the maximum federal funding authorized under the Children's Health Insurance Program (CHIP).

### FOSTER CARE CENTERS OF EXCELLENCE

Establish a new statewide grant program to develop and support Iowa Centers for Foster Care Excellence, an integrated primary care model, to meet the unique health and mental health needs of children in foster and kinship care to begin a path of healing and hope.

