

**MAAC MATERIALS
FULL COUNCIL MEETING
August 6, 2019**

1. Agenda of Meeting for August 6, 2019
2. May 7, 2019 Full Council Meeting Minutes
3. June 11, 2019 Executive Committee Meeting Minutes
4. Division XVIII of House File 766
5. Draft Administrative Rules

AGENDA
Medical Assistance Advisory Council Meeting

Tuesday, August 6, 2019
Time: 1:00 P.M. – 4:00 P.M.
Iowa Utilities Board
Conference Rooms 1 and 2
1375 East Court Avenue
Des Moines, IA
Dial: 1-866-685-1580
Code: 000-999-0232#

- 1:00 Introduction and roll call – **Sarah Reisetter**
- 1:05 Approval of Minutes – **Sarah Reisetter**
- Full Council Meeting Minutes: **May 7, 2019**
 - Executive Committee Meeting Minutes: **June 11, 2019**
- 1:10 Election of the Public Co-Chair – **Sarah Reisetter**
- 1:30 Determining Staggered Terms for Business and Professional Members – **Sarah Reisetter**
- 1:45 Review and Approve Administrative Rules- **Sarah Reisetter**
- 2:20 Update from the Medicaid Director – **Mike Randol**
- 2:50 Updates from the MCOs – **MCOs**
- Amerigroup Iowa (10 minutes)
 - Iowa Total Care (10 minutes)
- 3:15 Open Comment (Open Comment Opportunity for Members) – **Co-Chairs**
- 4:00 Adjourn

This meeting is accessible to persons with disabilities. (If you have special needs, please contact the Department of Human Services (515) 281-5452 two days prior to the meeting.) Note: Times listed on agenda for specific items are approximate and may vary depending on the length of discussion for preceding items. Please plan accordingly.

**Full Council
Summary of Meeting Minutes
May 7, 2019**

Call to Order and Roll Call

Gerd called the roll call at 1:02 P.M. Full Council attendance is as reflected in the separate roll call sheet. A quorum was achieved.

Approval of Previous Full Council Minutes

Gerd called for the council to read through the meeting minutes of February 19, 2018, May 3, 2018, August 9, 2018, November 8, 2018, and February 5, 2019. Gerd stated he would accept any suggested changes and entertain the motion to approve the minutes as a block of five. Steve Bowen moved to approve the minutes, Dave Beaman seconded the motion. The motion carried and the minutes were approved.

MAAC Full Council Attendance

Gerd discussed the attendance for the Full Council. In the past two years 31 organizations had attended three or fewer meetings. Letters were sent to 29 of these organizations alerting them to this fact. Gerd stated that the feedback he and Jason received from the letters were that in many cases an organization had supplied a representative, but that representative was not the one whose name was called for the roll. Going forward the procedure will be to call the name of the organization rather than the name of the listed representative.

Public Forum on Iowa Health and Wellness Plan and Dental Wellness Plan

Kevin Kirkpatrick gave an overview of the Iowa Health and Wellness Plan and the Dental Wellness Plan and alerted the Full Council to the public forums where public feedback regarding these plans will be gathered. The forums will be held on May 21, 2019 at the Hoover State Offices building and on May 22, 2019 at the Coralville Public Library.

Medicaid Director's Update

MCO Transition

Iowa Total Care onboarding continues. Readiness reviews were completed at the beginning of May. Areas reviewed included: Information Technology; claims; provider relations; and member relations. IME leadership and staff were onsite at Iowa Total Care's facilities for the readiness review. Director Randol stated Iowa Total Care continues to be on track for July 1, 2019. Iowa Total Care will be participating in the Annual Provider Training later this month, and will have staff available to answer questions from providers.

When UnitedHealthcare leaves the market Iowa Total Care will receive roughly half the Medicaid population. IME is trying to accomplish equitable distribution of members between Iowa Total Care and Amerigroup, there may be some slight difference due to member choice. Director Randol stressed that no members will be losing any benefits as a result of UnitedHealthcare leaving the market. IME determines Medicaid benefits, not the MCO's. UnitedHealthcare members can continue to see their providers through June 30. Director Randol stated the most important aspect of UnitedHealthcare's exit is that members receive continuity of care. To that end the IME is tracking case managers as they move from UnitedHealthcare to either Iowa Total Care or Amerigroup in order to facilitate choice for any members who wish to follow their case manager from one MCO to another. Members will have until September 30, 2019 to make their choice.

2019 Annual Provider Training and Town Hall Meetings

Starting May 8, Iowa Medicaid will be conducting town hall meetings across the state. IME leadership will be present at all town hall meetings. The first will be held at Polk County River place in Des Moines. Meetings will also be held in Waterloo, Sioux City, Council Bluffs, Cedar Rapids, and Davenport. The town halls will each have two sessions, a provider specific session and a member specific session. Director Randol stated he thought it important that the IME have interaction with the public to answer any questions providers and members have.

Medicaid Quarterly Report

Liz Matney presented the Quarterly Performance Report for Quarter 2 SFY 2019 made available in the materials packet. One issue of note is the increasing levels of enrollment in the Iowa Health and Wellness Plan which is occurring at historically low levels of unemployment. Other topics discussed include: Level of Care Assessments completion metrics; Service Plan update metrics; Service Level information for Medicaid call centers; and claim payment timeliness.

Iowa Medicaid Managed Care Quality Assurance System and Iowa Medicaid Dental Pre-Ambulatory Health Plan Quality Assurance System

Liz presented the Iowa Medicaid Managed Care Quality Assurance System and Iowa Medicaid Dental Pre-Ambulatory Health Plan Quality Assurance System reports to the council. These reports will eventually be sent to the Centers for Medicare and Medicaid after receiving comments from the Medical Assistance Advisory Council and from the public. Liz asked that members submit their comments back to IME staff by Friday May 31, 2019.

Updates from MCOs

Iowa Total Care

Mitch Wasden, CEO and plan president for Iowa Total Care, gave an update on Iowa Total Care's onboarding progress. Iowa Total Care is actively building their presence in the market, with 30 contractors working to contract with providers. Iowa Total Care has 812 employees ready for July 1, 2019. Iowa Total Care feels that its readiness audits went very

well over the past months, and is working with a third party group to perform auxiliary readiness audits including claims testing and payment systems testing. Iowa Total Care is working very closely with Amerigroup and UnitedHealthcare to achieve a smooth transition.

Amerigroup Iowa, Inc.

John McCauly provided operational updates for Amerigroup. John spoke briefly on flood disaster response recovery, member retention and choice period, operational excellence, and work Amerigroup is doing in building capacity in social determinants of health. Case managers are working closely with members in communities that have been affected by flooding, Amerigroup has briefly lifted pharmacy refill restrictions to allow members to refill prescriptions that may have been lost in the flood. John stated that having gone through a member transition period previously, Amerigroup is confident in their ability to ensure a smooth transition of care for members. Amerigroup recently rolled out a new program designed to improve quality of care for pregnant members and members with newborn children. Amerigroup is committed to social determinants of health work, sponsoring several programs around the state that support nutrition and shelter for citizens of Iowa.

UnitedHealthcare Plan of the River Valley, Inc.

Paige Pettit gave an update on UnitedHealthcare. Paige stated that there is a difference between the exit of Amerihealth Caritas from the Iowa Medicaid program and the exit of UnitedHealthcare from the Iowa Medicaid program. Specifically, UnitedHealthcare is maintaining a presence in the state of Iowa in parallel markets to the Medicaid program. UnitedHealthcare expects to maintain relationships with providers and members and leave the Medicaid program in a responsible manner. UnitedHealthcare will be present at the town halls and provider trainings scheduled for later in the month of May. Paige thanked the council for the privilege of being a participant for the past several years.

Open Discussion

Senator Bolkcom stated that a legislative colleague of his was concerned about whether or not a Pharmaceutical Benefit Management raised a question of whether the state of Iowa was being over-charged for pharmaceutical billing, and whether or not an audit should be initiated looking into this issue. Director Randol stated that the state cannot be over-charged in this manner due to the structure of capitated rates.

Amy Shriver stated that only one metric in the Quarterly Report separates out children from adults and that this makes it harder to understand what opportunities there are to improve services for children. Director Randol stated that the operational metrics, such as claims paid, may not be relevant, but that he would look at including data from the child core data set.

Open Discussion (cont.)

Steve Bowen urged the council to consider how professional and business entities will maintain a voice in the council, as the voting membership will be reduced to five. Director Randol stated that he appreciated that point, and that meetings will remain public.

Dave Beaman asked the Director when he thought another MCO would enter the program. Director Randol stated that would likely not happen for another year as the program needs stability and he didn't want to disrupt vulnerable populations.

Adjournment

Meeting adjourned at 3:16 P.M.

Submitted by,
Michael Kitzman
Recording Secretary
mk

Need Quorum Approval

**Executive Committee
Summary of Meeting Minutes
June 11, 2019**

EXECUTIVE COMMITTEE MEMBERS	DEPARTMENT OF HUMAN SERVICES
Gerd Clabaugh – present	Jerry Foxhoven -
Jason Haglund – present	Michael Randol – present
Dennis Tibben – present	Julie Lovelady -
Dan Royer – present	Liz Matney -
Shelly Chandler – present	Kevin Kirkpatrick – present
Cindy Baddeloo – present	Lindsay Paulson –
Casey Ficek – present	Sean Bagniewski –
Lori Allen –	Michael Kitzman - present
Marsha Fisher – present	Adrian Olivares – present
Thomas Broeker – present	Marissa Eyanson -
Marcie Strouse –	

Call to Order and Roll Call

Gerd called the roll call at 3:00 P.M. Executive Committee attendance is as reflected above, quorum was met.

Approval of the Executive Committee Meeting Minutes of April 9, 2019

A vote was taken to approve the May 21, 2019 meeting minutes: the minutes were approved.

Mandatory Reporter Training Changes

Janee Harvey reviewed changes to Mandatory Reporter Child Abuse and Dependent Adult Abuse Reporting requirements as a result of the passing of House File 731. Iowa Department of Public Health is no longer responsible to review and approve mandatory reporter trainings and accompanying curricula. Iowa Department of Human Services (DHS) must now create, produce, and publically host child abuse and dependent adult abuse mandatory reporter trainings online. The house file permits employers to provide supplemental training, but not replace the core training created by DHS. Additionally, the house file separates out the child abuse and dependent adult abuse mandatory reporter training into two curriculum that are each two hours long. Prior to House File 731 mandatory reporters were expected to take these trainings every five years, this has been reduced to every three years. After the initial core training a mandatory reporter is only required to take a one hour refresher course, as long as the refresher course is taken within the three year

time period. All mandatory reporters who take their training before June 30, 2019 will be considered to be in good standing for the next five years. The training will be hosted on the DHS website, allowing 24 hours- 7 days a week- access.

MAAC Restructuring

Gerd followed up on the discussion from the last executive committee meeting regarding recently passed House File 766, which changes the structure of the MAAC beginning July 1, 2019. A draft set of administrative rules was submitted to committee members for their review. Gerd called for questions and comments on the draft set of administrative rules. The committee discussed how to stagger terms of Professional and Business Entities representatives so that an election would occur every year. Director Randol suggested a simple coin flip between elected representatives to determine which entity would have an initial three year term versus a two year term. All terms would be for a period of two years after the initial term. These staggered terms would allow for an election from among the Business and Professional entities every year.

Concerns were raised about implementing these revised rules, specifically provisions for elections, ahead of their official adoption by the Council on Human Services. Official adoption of rules can take as long as six months. If the MAAC waited for these rules to be officially adopted before meeting the MAAC would not be able to meet until February 2020. It was therefore determined that the MAAC should adopt a set of revised administrative rules ahead of the official adoption by the Council on Human Services.

Gerd proposed that IME staff circulate a ballot to Professional and Business entities in time for an election to occur ahead of the August 6, 2019 MAAC meeting. Staff would contact elected members to confirm they wish to serve and communicate the results of the election to the council at large. The election of the public co-chair will occur at the August 6 meeting if all five public members have been appointed by the Governor's office at that time.

Gerd proposed that Department staff communicate Professional and Business Entity representative attendance to each organization once a year at the start of the new fiscal year. It was recommended that this be communicated to the full council as well as the Governor.

Medicaid Director's Update

Director Randol stated the focus of the IME over the past several months has been the exit of UnitedHealthcare and the onboarding of Iowa Total Care. Member redistribution notices have been sent to all Iowa Health Link members regarding the July transition. The Member Open Choice period that begins July 1, 2019 will end September 30, 2019. Notices regarding the Open Choice period will be sent to Hawki members later this week. IME staff are maintaining a roster of the case managers that work for Iowa Total Care and for Amerigroup Iowa, Inc. Members who wish to follow their case managers may contact IME Member Services to see which MCO their case manager has gone to. Passive enrollment will go into effect July 1, 2019, which will greatly benefit Long Term Services and Supports (LTSS) members as they will no longer have a waiting period before being

assigned to an MCO. With this immediate assignment LTSS members can begin their service plan evaluations immediately. The IME continues to onboard Iowa Total Care. IME staff meets with Iowa Total Care staff daily. Director Randol meets with Iowa Total Care senior leadership every Wednesday for two hours. Iowa Total Care has formally submitted their readiness review results. Director Randol noted there were some opportunities for improvements, particularly in operational areas of the readiness review, but that Iowa Total Care has submitted a plan of action to correct for these opportunities. Director Randol is confident Iowa Total Care will be ready to go live on July 1, 2019.

Shelly Chandler noted that she was extremely impressed with the responsiveness from Iowa Total Care staff. Her one area of concern was that provider's contracts are coming back, but that the Iowa Total Care website notes that the credentialing process is ongoing for these providers. Director Randol is aware of this issue, and has had confirmed that Iowa Total Care will make sure these providers are treated as in-network.

Open Discussion

The issue of multiple procedure payment reduction (MPPR) was raised, specifically if services are provided by three different disciplines in a day whether each subsequent service is reduced by 10% for each discipline or if services are reduced by 10% for each code subsequent code by discipline. Director Randol clarified that the intent is to reduce by discipline, for example if a member sees a speech therapist and then an occupational therapist the speech therapist would bill at 100% and the occupational therapist would bill at 90%.

Adjournment

Meeting adjourned at 4:01 P.M.

Submitted by,
Mike Kitzman
Recording Secretary
mk

by striking the subsection.

Sec. 89. 2005 Iowa Acts, chapter 117, section 4, subsection 3, is amended by striking the subsection.

DIVISION XVIII

MEDICAL ASSISTANCE ADVISORY COUNCIL

Sec. 90. Section 217.3, subsection 4, Code 2019, is amended to read as follows:

4. Approve the budget of the department of human services prior to submission to the governor. Prior to approval of the budget, the council shall publicize and hold a public hearing to provide explanations and hear questions, opinions, and suggestions regarding the budget. Invitations to the hearing shall be extended to the governor, the governor-elect, the director of the department of management, and other persons deemed by the council as integral to the budget process. The budget materials submitted to the governor shall include a review of options for revising the medical assistance program made available by federal action or by actions implemented by other states as identified by the department, the medical assistance advisory council ~~and the executive committee of the medical assistance advisory council~~ created in section 249A.4B, and by county representatives. The review shall address what potential revisions could be made in this state and how the changes would be beneficial to Iowans.

Sec. 91. Section 249A.4B, Code 2019, is amended to read as follows:

249A.4B Medical assistance advisory council.

1. A medical assistance advisory council is created to comply with 42 C.F.R. §431.12 based on section 1902(a)(4) of the federal Social Security Act and to advise the director about health and medical care services under the medical assistance program. The council shall meet no more than quarterly. The director of public health and a public member of the council selected by the public members of the council ~~specified in subsection 2, paragraph "b"~~, shall serve as co-chairpersons of the council.

2. a. The council shall consist of the following voting members:

(1) Five professional or business entity members selected

by the entities specified pursuant to subsection 3, paragraph "a".

(2) Five public members appointed pursuant to subsection 3, paragraph "b". Of the five public members, at least one member shall be a recipient of medical assistance.

b. The council shall include all of the following nonvoting members:

(1) The director of public health, or the director's designee.

(2) The director of the department on aging, or the director's designee.

(3) The long-term care ombudsman, or the long-term care ombudsman's designee.

(4) The dean of Des Moines university - osteopathic medical center, or the dean's designee.

(5) The dean of the university of Iowa college of medicine, or the dean's designee.

(6) A member of the hawk-i board created in section 514I.5, selected by the members of the hawk-i board.

(7) The following members of the general assembly, each for a term of two years as provided in section 69.16B:

(a) Two members of the house of representatives, one appointed by the speaker of the house of representatives and one appointed by the minority leader of the house of representatives from their respective parties.

(b) Two members of the senate, one appointed by the president of the senate after consultation with the majority leader of the senate and one appointed by the minority leader of the senate.

~~2.~~ 3. The voting membership of the council shall include all of the following voting members be selected or appointed as follows:

a. The five professional or business entity members shall be selected by the entities specified under this paragraph "a". The five professional or business entity members selected shall be the president, or the president's representative, of each of the following professional or business entities entity, or a member of each of the following professional or business entities, selected entity, designated by the entity+.

- (1) The Iowa medical society.
- (2) The Iowa osteopathic medical association.
- (3) The Iowa academy of family physicians.
- (4) The Iowa chapter of the American academy of pediatrics.
- (5) The Iowa physical therapy association.
- (6) The Iowa dental association.
- (7) The Iowa nurses association.
- (8) The Iowa pharmacy association.
- (9) The Iowa podiatric medical society.
- (10) The Iowa optometric association.
- (11) The Iowa association of community providers.
- (12) The Iowa psychological association.
- (13) The Iowa psychiatric society.
- (14) The Iowa chapter of the national association of social workers.
- (15) The coalition for family and children's services in Iowa.
- (16) The Iowa hospital association.
- (17) The Iowa association of rural health clinics.
- (18) The Iowa primary care association.
- (19) Free clinics of Iowa.
- (20) The opticians' association of Iowa, inc.
- (21) The Iowa association of hearing health professionals.
- (22) The Iowa speech and hearing association.
- (23) The Iowa health care association.
- (24) The Iowa association of area agencies on aging.
- (25) AARP.
- (26) The Iowa caregivers association.
- (27) Leading age Iowa.
- (28) The Iowa association for home care.
- (29) The Iowa council of health care centers.
- (30) The Iowa physician assistant society.
- (31) The Iowa association of nurse practitioners.
- (32) The Iowa nurse practitioner society.
- (33) The Iowa occupational therapy association.
- (34) The ARC of Iowa, formerly known as the association for retarded citizens of Iowa.
- (35) The national alliance on mental illness.
- (36) The Iowa state association of counties.

(37) The Iowa developmental disabilities council.

(38) The Iowa chiropractic society.

(39) The Iowa academy of nutrition and dietetics.

(40) The Iowa behavioral health association.

(41) The midwest association for medical equipment services or an affiliated Iowa organization.

~~b. The five public members shall be public representatives which may include members of consumer groups, including recipients of medical assistance or their families, consumer organizations, and others, appointed by the governor for staggered terms of two years each, none of whom shall be members of, or practitioners of, or have a pecuniary interest in any of the professional or business entities specifically represented under paragraph "a", and a majority of whom shall be current or former recipients of medical assistance or members of the families of current or former recipients.~~

~~c. A member of the hawk-i board created in section 514I.5, selected by the members of the hawk-i board.~~

~~3. The council shall include all of the following nonvoting members:~~

~~a. The director of public health, or the director's designee.~~

~~b. The director of the department on aging, or the director's designee.~~

~~c. The long-term care ombudsman, or the long-term care ombudsman's designee.~~

~~d. The dean of Des Moines university — osteopathic medical center, or the dean's designee.~~

~~e. The dean of the university of Iowa college of medicine, or the dean's designee.~~

~~f. The following members of the general assembly, each for a term of two years as provided in section 69.16B:~~

~~(1) Two members of the house of representatives, one appointed by the speaker of the house of representatives and one appointed by the minority leader of the house of representatives from their respective parties.~~

~~(2) Two members of the senate, one appointed by the president of the senate after consultation with the majority leader of the senate and one appointed by the minority leader~~

~~of the senate.~~

~~4. a. An executive committee of the council is created and shall consist of the following members of the council:~~

~~(1) Five of the professional or business entity members designated pursuant to subsection 2, paragraph "a", and selected by the members specified under that paragraph, as voting members.~~

~~(2) Five of the public members appointed pursuant to subsection 2, paragraph "b", and selected by the members specified under that paragraph, as voting members. Of the five public members, at least one member shall be a recipient of medical assistance.~~

~~(3) The director of public health, or the director's designee, as a nonvoting member.~~

~~b. The executive committee shall meet on a monthly basis. The director of public health and the public member serving as co-chairperson of the council shall serve as co-chairpersons of the executive committee.~~

~~e. 4. Based upon the deliberations of the council and the executive committee, the executive committee council shall make recommendations to the director regarding the budget, policy, and administration of the medical assistance program.~~

5. For each council meeting, other than those held during the time the general assembly is in session, each legislative member of the council shall be reimbursed for actual travel and other necessary expenses and shall receive a per diem as specified in section 7E.6 for each day in attendance, as shall the members of the council ~~or the executive committee~~ who are recipients or the family members of recipients of medical assistance, regardless of whether the general assembly is in session.

6. The department shall provide staff support and independent technical assistance to the council ~~and the executive committee.~~

7. The director shall consider the recommendations offered by the council ~~and the executive committee~~ in the director's preparation of medical assistance budget recommendations to the council on human services pursuant to section 217.3 and in implementation of medical assistance program policies.

441—79.7 (249A) Medical assistance advisory council.

79.7(1) Officers.

a. The public co-chairperson's term of office shall be two years. A public co-chairperson shall serve no more than two consecutive terms.

b. The public co-chairperson shall have the right to vote on any issue before the council. The public health director co-chairperson serves as a nonvoting member of the council.

c. The position of public co-chairperson shall be held by one of the five public council members. Ballots will be distributed to the public council members at the quarterly meeting closest to the beginning of the next state fiscal year and will be collected in paper and electronic format and administered by department of human services staff. The initial ballot following July 1, 2019 will be distributed by email prior to the first meeting in that fiscal year in order to identify the public co-chairperson prior to the Council's first meeting.

d. The co-chairpersons shall appoint members to other committees approved by the council.

e. Responsibilities.

(1) The co-chairpersons shall be responsible for development of the agendas for meetings of the council. Agendas will be developed and distributed in compliance with the advance notice requirements of Iowa Code section 21.4. Agendas will be developed in consultation with the staff and director of human services, taking into consideration the following:

1. Workplans. Items will be added to the council's agenda as various tasks for the council are due to be discussed based on calendar requirements. Council deliberations are to be conducted within a time frame to allow the council to receive and make recommendations to the director and for the director to consider those recommendations as budgets and policy for the medical assistance program are developed for the review of the council on human services and the governor, as well as for the upcoming legislative session.

2. Requests from the director of human services.

3. Discussion and action items from council members. The co-chairpersons will review any additional suggestions from council members at any time, including after the draft agenda has been distributed. The agenda will be distributed in draft form five business days prior to the council meeting, and the final agenda will be distributed no later than 24 hours prior to the council meeting.

(2) The co-chairpersons shall preside over all council meetings, calling roll, determining a quorum, counting votes, and following the agenda for the meeting.

(3) The co-chairpersons shall consult with the department of human services on other administrative tasks to oversee the council and shall participate in workgroups and subcommittees as appropriate.

79.7(2) Membership. The membership of the council and shall be as prescribed at Iowa Code 249A.4B

a. Council membership.

(1) Council membership of professional and business entities shall number five and be identified from a vote among those entities outlined in Iowa Code section 249A. Professional and business entities shall vote every year to identify the entities and their subsequent representatives that will represent the body of professional and business stakeholders on the council. Professional and business entities will also report their contact information to the department of human services.

1. An initial election of five business and professional members shall be held. From this initial election of five members: three members shall serve a three year term and two members shall serve a two year term. Once these members have served their initial term the length of term for all following elected members shall be two years.

2. Elections shall be organized along the following guidelines.

a. Ballots will be distributed at the quarterly meeting closest to the beginning of the next state fiscal year and will be collected in paper and electronic format and counted by department of human services staff.

b. The five entities that receive the most votes shall serve on the council.

3. Should any vacancy occur on the council, the entity that received the sixth most votes in the most recent election shall serve on the council.

4. If a voting entity's representative does not attend more than three consecutive meetings, the department of human services will notify the entity and representative and verify whether an alternative contact is needed. If a fourth consecutive meeting is missed after the notification the voting entities seat will be considered vacant and will be filled as outlined in 79.7(2)(a)(1)“3”.

(2) Council membership of public representatives shall consist of five representatives, of which one must be a recipient of medical assistance. All five public members will be appointed by the governor for staggered terms of two years each. All five public representatives will be voting members of the council.

(3) A member of the hawki board, created in Iowa Code section 514I.5, selected by the members of the hawki board, shall be a member of the council. The hawki board member representative will be a non-voting member of the council.

(4) Council membership shall also consist of state agency and medical school partners, including representatives from the department of public health, the department on aging, the office of the long-term care ombudsman, Des Moines University and the University of Iowa College of Medicine.

1. Partner agency and medical school representatives will be nonvoting members of the council.

2. If an agency's or school's representative does not attend more than three consecutive meetings, the department of human services will notify the agency or school.

3. Partner agencies and medical schools shall determine the length of appointment of their representatives. The department of human services will confirm each representative's participation every two years.

(5) The following members of the general assembly shall be members of the council, each for a term of two years as provided in Iowa Code section 69.16B. Members appointed from the general assembly will serve as nonvoting members of the council.

1. Two members of the house of representatives, one appointed by the speaker of the house of representatives and one appointed by the minority leader of the house of representatives from their respective parties.

2. Two members of the senate, one appointed by the president of the senate after consultation with the majority leader of the senate and one appointed by the minority leader of the senate.

79.7(3) Responsibilities, duties and meetings. The responsibility of the medical assistance advisory council is to provide recommendations on the medical assistance program to the department of human services.

a. Recommendations. Recommendations made by the council shall be advisory and not binding upon the department of human services or the professional and business entities represented. The director of the department of human services shall consider the recommendations in the director's preparation of medical assistance budget recommendations to the council on human services, pursuant to Iowa Code section 217.3 and implementation of medical assistance program policies.

b. Council. The council shall be provided with information to deliberate and provide input on the medical assistance program. The council will use that input in making final recommendations to the department of human services.

(1) Council meetings.

1. The council will meet no more than quarterly.
2. Meetings may be called by the co-chairpersons; upon written request of at least 50 percent of members; or by the director of the department of human services.
3. Meetings shall be held in the Des Moines, Iowa, area unless other notification is given. Meetings will also be made available via teleconference, when available.
4. Written notice of council meetings shall be electronically mailed at least five business days in advance of the meeting. Each notice shall include an agenda for the meeting. The final agenda will be distributed no later than 24 hours prior to the meeting.
 - (2) The council shall advise the professional and business entities represented and act as liaison between them and the department.
 - (3) The council shall perform other functions as may be provided by state or federal law or regulation.
 - (4) Pursuant to 2016 Iowa Acts, chapter 1139, section 93, the council shall regularly review Medicaid managed care. The council shall submit an executive summary of pertinent information regarding deliberations during the prior year relating to Medicaid managed care to the department of human services no later than November 15 annually.
 - (5) Pursuant to 2016 Iowa Acts, chapter 1139, section 94, the council shall submit to the chairpersons and ranking members of the human resources committees of the senate and house of representatives and to the chairpersons and ranking members of the joint appropriations subcommittee on health and human services, on a quarterly basis, minutes of the council meetings during which the council addressed Medicaid managed care.

79.7(4) Procedures.

- a. A quorum shall consist of 50 percent (5 persons) of the current voting members.
- b. Where a quorum is present, a position is carried by two-thirds of the present voting council members.
- c. Minutes of council meetings and other written materials developed by the council shall be distributed by the department to each member of the council.
- d. In cases not covered by these rules, Robert's Rules of Order shall govern.

79.7(5) Expenses, staff support, and technical assistance. Expenses of the council, such as those for clerical services, mailing, telephone, and meeting place, shall be the responsibility of the department of human services. The department shall arrange for a meeting place, related services, and accommodations. The department shall provide staff support and independent technical assistance to the council.

a. The department shall provide reports, data, and proposed and final amendments to rules, laws, and guidelines to the council for its information, review, and comment.

b. The department shall present the annual budget for the medical assistance program for review and comment.

c. The department shall permit staff members to appear before the council to review and discuss specific information and problems.

d. The department shall maintain a current list of members on the council.

e. The department shall be responsible for the organization of all council meetings and notice of meetings.

f. As required in Iowa Code section 21.3, minutes of the meetings of the council will be kept by the department. The council will review minutes before distribution to the public.

[ARC 8263B , IAB 11/4/09, effective 12/9/09; ARC 3006C , IAB 3/29/17, effective 6/1/17]