

**Missouri Women’s Health Council
Meeting Minutes
March 6, 2020**

Members Present	Karlyle Christian Ritter, Colleen Coble, Karen Edison, Sue Kendig, Bridget McCandless, Mary McLennan, Melissa Terry. Via phone Sandra Jackson, Denise Willers, Rachel Winograd
Members Absent	Paula Baker, Wendy Doyle, Eboni January, Sherry Maxwell, Katie Towns, Emily van Schenkhof, Denise Wilfley
Department of Health and Senior Services (DHSS) Staff	Randall Williams, Karen Kliethermes, Mindy Laughlin, Tracy Henson
Department of Social Services Staff (DSS)	Jessica Dresner, Josh Moore
Guests	Michelle Trupiano, Susan Nagel

Topic/Presenter	Discussion
Welcome	Sue Kendig welcomed everyone and asked for introductions. Introductions followed.
Department of Health and Senior Services Update	<p>Dr. Williams gave an update on COVID-19. He indicated we are well prepared here in Missouri. Less than about 20 people have been checked to date, and they all have tested negative. He indicated the State Public Health Laboratory is capable of testing within six hours. He stated that starting on Monday the test will be commercially available. The Trust for America’s Health does an independent assessment of states which give them rankings, and Missouri is in the top 25. The first case was reported in the state of Washington on January 21st. Dr. Williams was on a conference call on January 26th with all the state health directors. On January 27th the Department activated its incident management team, and they have been meeting every day since then. Dr. Williams was at the White House and met with staff. He reported the President will sign a \$8.3 billion COVID-19 response bill, of which Missouri will receive approximately \$9 million. There is not a vaccine currently, and there are no antivirals. Dr. Williams indicated it is incredibly important to wash your hands for at least 20 seconds, the equivalent of singing Happy Birthday to yourself twice. People should stay home if they are sick. He recommended practicing social distancing. Dr. Williams indicated it would be a good time to quit smoking and vaping. Dr. Williams talked about symptoms and the biology of the disease.</p> <p>Beginning next week, Dr. Williams announced the Department would implement a COVID-19 hotline for Missouri. He asked Mindy to share the number and website with the Council. He indicated that the virus has 20 times the mortality of the flu; 1 in 1,000 people die from the flu, 2 out of 100 die from COVID-19 and it is twice as infectious as the flu.</p> <p>Action Items:</p> <ul style="list-style-type: none"> • Mindy will send the information to the Council for the 1-800 number for COVID-19 and website.

Department of Social Services Update

Jessica Dresner updated the Council on work DSS is doing with Civilla around improving MO HealthNet enrollment application eligibility processes. She indicated that Civilla is close to finishing their work and will have a final report to DSS with some recommendations.

She also gave an update on the Maternal Opioid Misuse (MOM) grant. The MOM grant coordinator position has been filled, and Jessica plans to bring the individual to a future Council meeting. There was a discussion on the neonatal abstinence syndrome Extension for Community Healthcare Outcomes (ECHO). Sue talked about the model that St. Mary's has for this. Sue will ask St. Mary's to send her data to share with the Council.

Sue Kendig commented regarding the budget meeting last week when MO HealthNet Director Richardson presented on the MOM grant, that there were questions regarding how this impacted black maternal mortality. Sue learned that data is not being disaggregated. People who are collecting data around maternal health, and hospitals that are collecting data, may or may not disaggregate that data. She wanted to bring this to the Council's attention if they are looking at disparities and maternal health across the board.

Sue asked Jessica if she could give an update on the Substance Use Disorder (SUD) waiver and highlight some of the questions, and asked if there is anything that would be helpful. Jessica said Centers for Medicare & Medicaid Services (CMS) had their waiver for a while. Then CMS told them that it was not complete and it was sent back. Jessica indicated the wavier was completed and sent back to CMS. CMS has formally responded to them and told them that the wavier was complete. They will be doing weekly phone calls to see where they are with the wavier. A question was asked at what point they should go to their politicians. Jessica will talk with Director Richardson to see if he has had conversations with CMS and will report back to the Council.

A question was asked on kids' reenrollments who were dropped and how the outreach is going. Jessica indicated she did not have any additional updates on that since the last meeting. Jessica indicated that Family Support Division (FSD) has worked with schools (for back to school fairs, etc.) to get information out, but the school boards said it would be great if school nurses could enter information directly into the portal. Jessica spoke with Kim Evans on this and they talked about building a portal where they can go in and enter information, the community health workers or nurses, whoever the school deems appropriate. They could also upload documents, not for just change of address, but any change of circumstance. FSD has undertaken the work to get started on building the portal.

Jessica introduced Josh Moore, Director of Pharmacy at MO HealthNet who has been in this position for six months. Josh gave some background and history on their long-acting reversible contraception (LARC) policy. It was mentioned there was an issue with reimbursement if a provider is not part of a hospital. If a provider is in a hospital, the provider receives rates for buying the devices that are \$200 to \$300 cheaper than an independent practitioner receives. Josh indicated pharmacy pricing is updated continuously. A couple of years ago they switched to National Average Drug Acquisition Cost (NADAC). Josh asked to have these invoices sent to him and the pharmacy department at MO HealthNet to review. Jessica said that Mindy has her contact information and they can send the invoices

to her and she will get them to Josh. Mindy will send Jessica’s contact information to the Council. A question was asked about how many women are on LARCs in the Medicaid program. Josh took a count of the number of claims they saw every month. The claim count average for last October through December of 2019 was 592 claims per month. Earlier in 2019, it was 794 claims per month. The three-year LARC is the most common and the claims for that were 262, Merina was second at 165 claims, and the other four were between 30 and 7.

Josh also talked about Zolgensma for newborn babies with Spinal Muscular Atrophy (SMA). It’s a gene therapy that is injected intravenously, and it is a genetic cure that cost \$2.125 million. MO HealthNet has their third patient that is receiving it. He indicated that these are patients that if they didn’t get this medication, they would die by the time they were two or three years old. The manufacturer was able to talk to legislatures across the country and get them to add the screening to the newborn screening panel. It has been on Missouri’s newborn screening panel for a year or two. Josh indicated there is another drug that treats adults with a less severe form of SMA called Spinraza. Spinraza for adults is \$750,000 for the first year and \$350,000 a year thereafter.

Josh talked about Zulresso for postpartum depression. Zulresso is a 60-hour infusion that is highly effective, and the mother must be closely monitored during the infusion. The minimum cost is \$35,000 for treatment depending on the patient’s weight. The cost is just for the drug.

Oral birth control is covered up to a year at a time. Suboxone is MO HealthNet’s preferred Medication Assisted Treatment (MAT), and it does not require prior authorization (PA). Rachel Winograd asked if MO HealthNet still requires a PA to go up to 32 mg for pregnant women. Josh indicated that they would need a PA as it has shown not to be more effective than 24 mg, and they would need a reason why they would need to go up from the standard. Rachel also asked if they were noticing any issues with folks, or if they were receiving any calls regarding the dosing limits or not being able to get the generic version. Josh said MO HealthNet prefers the brand name as it is the lowest cost for them, and they do not get a lot of calls. April 2nd is when MO HealthNet will implement their MAT, and they did add Probuphine, which is a long-acting injection. Rachel asked Josh to share information on Probuphine, so she could share with others.

Josh stated that they will start covering continuous glucose monitors for Type I Diabetes. The physician or prescriber will be the one filling out the paperwork, and it should be online soon. There will be a list of questions to ensure diabetics meet the criteria. Once the PA is done, the patient will be able to go to the pharmacy to receive the device and transmitter.

Action Items:

- Sue will ask St. Mary’s to send her their data to share with the Council.
- Mindy will send Jessica’s contact information to the Council.
- Josh to share Probuphine information with the Council.

MU Institute for Women’s Health Research

Karen Edison introduced Susan Nagel, Director of the University of Missouri’s Institute for Women’s Health Research. Susan has been at the University of Missouri for about 15 years. Susan presented a PowerPoint presentation describing

	<p>the Institute for Women’s Health Research and the work of the researchers. Susan will send her contact information to Tracy to share with the Council.</p> <p>Action Items:</p> <ul style="list-style-type: none"> • Susan will send her contact information to Tracy to share with the Council.
Reproductive Health	<p>Sue Kendig introduced Michelle Trupiano, Executive Director of the Missouri Family Health Council (MFHC). Michelle gave a PowerPoint presentation detailing the work of MFHC and the current landscape of family planning in Missouri.</p>
2020 Priorities Document	<p>Sue Kendig asked the Council to read over the 2020 Women’s Health Council Priorities document. A discussion followed. Tracy Henson will make the suggested changes to the document and send to Bridget McCandless for final approval.</p> <p>Action Items:</p> <ul style="list-style-type: none"> • Tracy will make suggested changes to the document and send to Bridget for final approval.
Other Items	<p>Sue Kendig asked to revisit the June meeting agenda. She wanted to see if the Council was interested in having Reggie Rideout present on the Women’s Health Network. The Council agreed, and Sue will ask Reggie to attend the June meeting.</p> <p>Colleen Coble gave an update on a couple legislative items. A diverse collection of people came to the Capitol that focused on the domestic violence gun loophole. She indicated there is a bill that will be coming up in a week and a half to create a telehealth program for sexual assault forensic evidence exams. There is a bill that is moving that would set up a state-wide storage for completed, but not yet reported, forensic examination kits.</p> <p>Bridget McCandless gave updates on outlawing shock devices for kids with behavior issues and updating HIV criminalization language in state statute, She mentioned continuous eligibility is getting some hearings, and transgender received a lot of testimony from doctors saying if kids come forward who had dysphoria they need to be thinking about their therapy.</p>
Medicaid Expansion	<p>Bridget McCandless reported the signature gathering to add Medicaid expansion to the November ballot is going well, and they will be turning in the signatures in the next several weeks.</p>
Adjourn	<p>The meeting was adjourned at 1:00 p.m.</p>
Next Meeting	<p>June 10, 2020, Harry S Truman Building, Room 400, 9:00 a.m.-1:00 p.m.</p>