

**MATERNAL AND CHILD HEALTH ADVISORY BOARD**  
**DRAFT MINUTES**  
**August 7, 2020**  
**9:00 AM**

The Maternal and Child Health Advisory Board (MCHAB) held a public meeting on August 7, 2020, beginning at 9:00 A.M. at the following locations:

Call in Number: 1-877-336-1831

Access Code: 62214424

Video: <https://nevadawic.zoom.us/j/97810909207>

**BOARD MEMBERS PRESENT**

Veronica (Roni) Galas, RN, Chair  
Tyree G. Davis, D.D.S  
Fred Schultz  
Linda Gabor, MSN, RN  
Fatima Taylor, M.Ed.  
Marsha Matsunaga-Kirgan, MD

**BOARD MEMBERS NOT PRESENT**

Senator Patricia Farley  
Assemblywoman Amber Joiner  
Noah Kohn, MD  
Keith Brill, MD  
Melinda Hoskins, MS, APRN, CNM, IBCLC

**DIVISION OF PUBLIC AND BEHAVIORAL HEALTH (DPBH) STAFF PRESENT**

Karissa Loper, MPH, Deputy Bureau Chief, Children, Family and Community Wellness (CFCW)  
Vickie Ives, MA, Section Manager, Maternal, Child, and Adolescent Health (MCAH)  
Andrea Rivers, MS, Health Program Manager II, Office of Analytics, Department of Health and Human Services (DHHS)  
Laura Urban, Food Security and Wellness Manager, Chronic Disease Prevention and Health Promotion (CDPHP)  
Mitch DeValliere, DC, Program Manager, Title V Maternal and Child Health (MCH), MCAH  
Evelyn Dryer, Program Manager, Maternal, Infant, and Early Childhood Home Visiting (MIECHV), MCAH  
Tami Conn, Health Program Specialist II, State Systems Development Initiative, MCAH  
Kagan Griffin, MPH, RD, MCH Epidemiologist, MCAH  
Eileen Hough, MPH, Program Coordinator, Adolescent Health and Wellness, MCAH  
Yesenia Pacheco, Program Coordinator, Rape Prevention and Education (RPE), MCAH  
Jazmin Sarmiento, Program Coordinator, Personal Responsibility and Education Program, MCAH  
Larissa White, MPH, MPH, CPH, Program Coordinator, Children and Youth with Special Health Care Needs (CYSHCN), MCAH  
Jie Zhang, MS, Biostatistician II, Office of Analytics, DHHS  
Marjorie Singh, Health Resource Analyst I, MCAH  
Lawanda Jones, Grants and Project Analyst and PRAMS Coordinator, MCAH  
Lisa Light, Accounting Assistant III, Immunization Program and MCAH  
McKenna Bacon, Administrative Assistant IV, Bureau Office Manager, CFCW  
Desiree Wenzel, Administrative Assistant III, Office Manager, MCAH  
Jonathan Figueroa, Administrative Assistant II, Teen Pregnancy Prevention Program (TPP), MCAH  
Stephanie Camacho, Administrative Assistant II, Early Hearing Detection and Intervention (EHDI), MCAH  
Madisson Jacobs, Administrative Assistant I, Nevada Home Visiting, MCAH

## **OTHERS PRESENT**

Sara Chalhagian, Executive Director, Patient Protection Commission (PPC), Office of the Governor  
Theresa Bohannon, MPH, Patient Advocate, Commissioner, PPC  
Lezlie Mayville, Administrative Assistant/Policy Coordinator, PPC, Office of the Governor  
Yarleny Roa-Dugan, RN, Patient Advocate, Commissioner, PPC  
Heidi Parker, MA, Executive Director, Immunize Nevada  
Allison Genco, Ferrari Public Affairs for Dignity Health  
Tasha Choi, MBA, CHW, Statewide MCH Coalition Program Manager, Nevada MCH

### **1. Call to Order- Roll Call and Introductions**

Chair Veronica (Roni) Galas called the meeting to order at 9:20AM.

Roll call was taken, and it was determined a quorum of the MCHAB was present.

### **2. Approval of draft minutes from May 8, 2020 meeting – Veronica Galas, RN, BSN; Chair.**

Linda Gabor stated the minutes say, “Public meeting held at following locations” and asked if there should be wording the meeting was held online. She also indicated the third paragraph on page four was missing the end of the sentence.

**DR. TYREE DAVIS ENTERTAINED A MOTION TO APPROVE THE MAY 8, 2020, MEETING MINUTES WITH CORRECTIONS. FRED SCHULTZ SECONDED THE MOTION WHICH PASSED UNANIMOUSLY WITHOUT PUBLIC COMMENT.**

### **3. Presentation and possible recommendations on the Patient Protection Commission - Sara Chalhagian, Executive Director, Patient Protection Commission (PPC), Office of the Governor**

Sara Chalhagian indicated she attended to help foster collaboration between the Patient Protection Commission (PPC) and the MCHAB.

Chair Roni Galas asked Ms. Chalhagian to discuss some highlights of focus areas of the PPC.

Ms. Chalhagian stated the PPC has three Bill Draft Requests (BDRs), provide robust recommendations to the Governor and Legislature, and meet at the pleasure of the Committee. Regarding telehealth, the PCC is looking to make permanent current COVID-19 telehealth allowances post COVID-19 and parity between telehealth and in-person care. They need to put together the language in a manner to make sure not to violate the Nevada single subject rule. She said the PPC welcomes any feedback at the next meeting on the 17<sup>th</sup> of this month. Ms. Chalhagian also mentioned the transparency BDR related to mandatory reporting of health care data. Everything needs to be reported including all drug costs, hospital prices, health care entity ownership mergers, consolidations and enclosures. Discussed broadly were those who would report including healthcare providers, insurance companies, hospitals, pharmacy benefit managers, pharmaceutical companies, labor unions and the state. The PCC will model health care costs with a goal of enhancing healthcare and state outcomes.

Ms. Chalhagian asked if PPC members had anything else to add and welcomed feedback from the Board.

Theresa Bohannon added the PPC is looking at expanded services such as prenatal care and home visiting. She asked how can the PPC can support MCH populations with the expanded services of telehealth.

Chair Galas asked if there were any further questions for Ms. Chohagian.

Dr. Davis asked if teledentistry is included in expanded services and inquired about reimbursement rates.

Ms. Chohagian responded teledentistry was not discussed or directly referenced during the meeting.

Dr. Davis stated teledentistry is new and he did not know if many can afford it but noted teledentistry is a safe place to access care. He asked if the PPC could help with the reimbursement rates as Medicaid does not pay for the time involved.

Ms. Chohagian noted the comment and can consider it at the next PPC meeting. One of the items under consideration was to broadly expand services. She stated she will bring it up with the Committee to garner interest and offered to meet with Dr. Davis individually.

Chair Galas asked if there were any other questions from the Board and clarified if a goal was increasing access to telehealth from homes, not just secondary sites, as part of codifying the COVID-19 telehealth allowances.

Ms. Chohagian responded yes, that is exactly the focus in ensuring the ability to access care.

Yarleny Roa-Dugan asked for the Board members' suggestions regarding telehealth for MCH populations given children were not physically in schools.

Ms. Gabor responded providing children and youth with special health care needs with physical therapy, occupational therapy, and speech therapy maintenance via telehealth to minimize going to therapy in person at this time would help students.

Dr. Davis added patient broadband internet access within their homes has been a challenge because of connectivity and that telehealth calls can be just over the phone, but in teledentistry, they need video to diagnose.

Ms. Chohagian stated broadband internet access is absolutely a component of the BDR.

Chair Galas asked if any other Board members have any question or any thoughts to share.

Eileen Hough stated she would share resources from a presentation on telehealth including disparities.

Chair Galas noted provider bias comes into play by doctors being able to see into patient homes and noted this can have a negative outcome and stressed the importance of expanding telehealth but minimizing bias. She stated she appreciated Ms. Hough for bringing up the patient disparities.

Vickie Ives asked if any remote monitoring tools are a part of the discussion in relation to prenatal care.

Ms. Chohagian responded she does not believe any monitoring components have been discussed but could be included in some draft language and offered to review possible wording.

Ms. Bohannon added she has often been the voice of the patient and the Board should include a deep dive into examining telehealth to ensure it is being accessed equally by all different patients who have different problems. The data on disparities confirm the need to ensure telehealth is patient-centered.

Chair Galas asked if there were any other comments and thanked the presenters.

No Public Comment

**4. Presentation and possible recommendations on Maternal and Child Health (MCH) COVID-19 Data and Resources – Andrea Rivers, MS, Office of Analytics Section Manager, Division of Public and Behavioral Health**

Andrea Rivers provided a presentation with the latest COVID-19 data and information pertaining to MCH populations; she indicated the data were preliminary and subject to change.

Chair Galas stated the presentation was very informative and noted the pregnancy and hospitalization data.

Ms. Rivers responded the state is focusing on limiting the spread of COVID-19 among the elderly and focusing on any vulnerable populations.

Chair Galas asked if there were any other questions and indicated she will solicit this as an agenda item for the next meeting.

No Public comment

**5. Presentation and possible recommendations on COVID-19 and MCH populations – Heidi Parker, MA, Executive Director, Immunize Nevada**

Heidi Parker thanked the Board for having her present an update on childhood immunizations.

Chair Galas asked if there were any questions from the Board.

Dr. Davis stated the ability to get children into clinics is still a challenge as there are still fears about bringing kids to clinics due to COVID-19.

Chair Galas thanked Dr. Davis for the comment and indicated moving forward with non-traditional partners could be helpful. She indicated patients are asked about their last dental and eye appointments and was interested to know if dentists asked patients about their last well visit or HPV shot.

Dr. Davis spoke about the dental home and indicated it would be helpful if dentists could give immunizations since they have mobile units and was wondering how dentists can get more involved in immunizations.

Ms. Parker responded Oregon recently passed legislation for dentists to administer vaccines.

Chair Galas noted this as interesting and a way to maximize practices.

Ms. Parker added she has been in conversation with pharmacies, because families want to use them but many of the large chain pharmacies have age requirements that are too high for the younger kids, so families are struggling to find vaccines for their younger children. Many pharmacy age requirements are between 3-4 years old, but Walmart has an age limit of 8 years and their pharmacists are trying to get the age limit lowered. Walgreens age restriction is set at age 4 years, and Target, CVS, and Smiths is at age 3 years.

Chair Galas stated this was good advocacy and asked if there were any additional comments.

Ms. Hough stated she was excited about the direction being taken to ensure we are protecting Nevada's children.

No Public Comment

**6. Presentation and possible recommendations on highlights of the Title V MCH Block Grant Application and Report Federally Available Data (FAD) – Kagan Griffin, MPH, RD, MCH Epidemiologist, Division of Public and Behavioral Health**

Kagan Griffin presented the highlights of the Title V MCH Block Grant Federally Available Data. She mentioned much of the data refer to *Healthy People 2020* because *Healthy People 2030* had yet to be released.

Dr. Davis asked about data related to pregnant women's access to dentistry as a factor in low weight birth rates as related to periodontal disease.

Ms. Griffin was not certain if the data were stratified with prenatal care and periodontal disease but will investigate it as this is a great point.

Chair Galas thanked Ms. Griffin for highlighting the successes as well as needed improvements. She asked if there were any questions or public comments.

Tami Conn offered to research state data in relation to low weight birth rates and periodontal disease.

No Public Comment.

**7. Updates and possible recommendations on Alliance for Innovation on Maternal Health (AIM) and the Maternal Mortality Review Committee (MMRC) – Vickie Ives, MA, Maternal, Child and Adolescent Health Section Manager, Division of Public and Behavioral Health.**

Ms. Ives stated a contract had been executed with the American College of Obstetricians and Gynecologists (ACOG) for Nevada AIM and MCAH staff are currently meeting about data system design. Once the data system construction is completed, the goal is to launch the AIM initiative in the

late fall working with birthing hospitals statewide. She noted the MMRC has begun receiving reporting for required records and the Centers for Disease Control and Prevention (CDC) has launched a maternal mortality media campaign called *Hear Her* to share information on warning signs related to maternal mortality and severe maternal morbidity.

Chair Galas thanked Ms. Ives, and added she cannot wait to see the fruits of this campaign within the upcoming year.

No public comment

**8. Presentation and possible recommendations on agendas of the Interim Legislative Committee on Health Care – Mitch DeValliere, DC, Title V MCH Program Manager, Division of Public and Behavioral Health**

Dr. Mitch DeValliere stated information on the Interim Legislative Committee on Health Care will continue as an agenda item and noted the Committee will post their agenda and meeting minutes online.

Chair Galas asked if the Board will consider how they might want to coincide with what may be happening legislatively next year [in 2021].

Ms. Gabor thanked Dr. DeValliere for the update and the MCH team's hard work. She added it would be helpful to be able to review the information on the Committee's agenda(s).

No public comment.

**9. Presentation and possible recommendation on the Title V MCH Block Grant Application and Report – Mitch DeValliere, DC, Title V MCH Program Manager, Division of Public and Behavioral Health**

Chair Galas stated she was curious why data about children getting vaccines was not added.

Dr. DeValliere responded there is a section which focuses solely on vaccines.

Chair Galas asked if any motion was needed from the Board.

Dr. DeValliere responded not at this time and commented Title V MCH will continue to share information at MCHAB meetings, including the link to the final report and application.

No public comment.

**10. Discussion and Possible Recommendations on Reports and MCH Updates – Mitch DeValliere, DC, Title V MCH Program Manager, Division of Public and Behavioral Health**

Dr. DeValliere stated MCH ran a media campaign for the Medical Home Portal (MHP) which resulted in a significant increase in many more families using the MHP to see what types of providers and

resources were available in their areas/which meet their specific needs.

Ms. Gabor added the Go Before You Show campaign is successful.

Ms. Ives noted MCAH subawards include promotion of Go Before You Show and Nevada 211 and MCH staff provide at least four trainings a year to NV 211 staff.

Ms. Hough stated she receives quarterly data from Nevada 211.

Chair Galas stated the word has been getting out there for Nevada 211.

Ms. Hough added Clark County residents use Nevada 211 the most and demographic data is reported for callers.

Chair Galas asked for any comments from the Board. She mentioned the next MCHAB meeting is November 6, 2020 and Board members are encouraged to send potential agenda items to Dr. DeValliere at least 30 days ahead of time.

No Public comment.

## **11. Adjournment**

Meeting adjourned at 11:19 AM