

COUNCIL ON HUMAN SERVICES

MINUTES

April 12, 2017

COUNCIL

Mark Anderson
Phyllis Hansell (via phone)
Alexa Heffernan
Kimberly Kudej
Guy Richardson (absent)
Kim Spading
Sam Wallace

EX-OFFICIO LEGISLATIVE MEMBERS

Representative Joel Fry (absent)
Representative Lisa Heddens (absent)
Senator Mark Segebart (absent)
Senator Amanda Ragan (absent)

STAFF

Chuck Palmer
Sandy Knudsen
Nancy Freudenberg
Sally Titus
Jean Slaybaugh

Amy McCoy
Mikki Stier
Liz Matney
Ryan Page

GUESTS

Tony Leys, Des Moines Register
Natalie Koerber, Amerigroup Iowa

CALL TO ORDER

Mark Anderson, Chair, called the Council meeting to order at 10:00 a.m.

Anderson noted that Guy Richardson will not be able to attend today's meeting due to a conflict. Richardson stated in an email to staff how much he enjoyed serving on the Council and will miss the friendships he established with Council members and staff.

ROLL CALL

All Council members were present with the exception of Richardson. All Ex-officio legislative members were absent.

RULES

Nancy Freudenberg, Bureau of Policy Coordination, presented the following rules to Council:

R-1 Amendments to Chapter 58, Emergency Assistance. Amendments restructure the emergency assistance programs managed by the Department. Specifically, these amendments update definitions to the Iowa Individual Disaster Aide Grant Program and update damage assessment criteria and amounts. In addition, these amendments implement the Iowa Disaster Case Management Program.

A motion was made by Wallace and seconded by Heffernan. MOTION CARRIED UNANIMOUSLY.

R-2 Amendments to Chapters 77, 78, and 79, Medicaid, regarding changes to multiple references to comprehensive function assessment tools under the waiver programs is not ready for review.

Noticed Rules:

N-1 Amendments to Chapter 7, Appeals. Amendments clarify that appeals related to health care decisions made by a managed care organization must follow a different process than other DHS appeals. These amendments establish a new appeals process for MCO-related appeals.

N-2 Amendments to Chapter 75, Medicaid. Amendment increases premiums for applicants and recipients under the Medicaid for Employed People with Disabilities (MEPD) program with income over 150% of the federal poverty level (FPL).

N-3 Amendments to Chapters 109, 110, and 120, Child Care. Amendments revise administrative rule requirements on reporting serious injuries in child care settings.

N-4 Amendments to Chapters 109, 110, and 120, Child Care. Amendments require child care centers, Homes, and Development Homes to have written emergency plans for response to food or allergic reactions. Amendments also revise administrative rules to include the preservice/orientation training component of child development. These amendments clarify the intent of

substitute requirements for essential child care training that is federally mandated. All of the aforementioned amendments are federally mandated as a result of the federal Child Care and Development Block Grant (CCDBG) reauthorization. Finally, these amendments provide technical updates to administrative rules for child care regarding first aid/CPR requirements.

N-5 Replacement of Chapter 170, Child Care Assistance. Amendment update the child care assistance fee chart to be in compliance with federal poverty levels (FPL). These amendments also update rules regarding job search for new applications to allow three months of job searching instead of one month.

A motion was made by Wallace and seconded by Kudej to approve the noticed rules. MOTION CARRIED UNANIMOUSLY.

APPROVAL OF MINUTES

A motion was made by Wallace and seconded by Heffernan to approve the minutes of March 8, 2017. MOTION CARRIED UNANIMOUSLY.

BUDGET UPDATE

Jean Slaybaugh, Administrator, Division of Fiscal Management, provided a budget update for the Council. Highlights:

- The State Fiscal Year (SFY) 2017 budget was adjusted by \$28M. More than half of that adjustment was met by Medical Assistance funding. TANF (Temporary Assistance for Needy Families) surplus funds were also used to manage the shortfall.
- In the beginning of this legislative session, the Governor's initial budget recommendations included additional budget reductions for SFY 2018. Then in March, the Revenue Estimating Conference estimates for revenues was below what was anticipated. Some funds were borrowed from the State emergency fund for SFY2017 that will need to be made up in SFY2018 or SFY2019. The Department's total budget is about \$30M below SFY2017 - the majority being Medicaid funding.
- About \$35M cost containment initiatives are built into the Medicaid budget for SFY2018. There are basically three primary areas in cost containment: 1) eligibility, 2) services or benefits and 3) provider reimbursement. The initiatives moves lowa toward industry standards.
- In response to a question by Spading, Slaybaugh noted that the State is responsible for eligibility and for benefit plans, therefore the State has the authority to establish those rates and the managed care organizations have to comply. The state is not requiring MCOs provide less services,

but maintain the same level of services and the same benefits. The only change proposed is a change to retroactive eligibility.

MANAGED CARE UPDATE

Mikki Stier and Liz Matney, IME, reviewed the latest quarterly “Managed Care Organization (MCO)” report, published March 10, 2017 - focusing on specific areas:

- ‘Percentage and number of members receiving initial health risk assessments completed timely’ (page 11). The Department is working with the MCOs to ascertain what their barriers are and how to reach members more effectively.
- ‘Member grievances and appeals’ (page 42). Members may file a grievance with the MCOs for any dissatisfaction that is not related to a clinical decision. Progress is being made to get to the benchmarks.
- ‘Medicaid Claims Payment’ (page 50). The Department continues to monitor reimbursement accuracy through analysis, validation projects, and follow-up when the Department is made aware of provider concerns. Matney noted that the Department is trying to educate providers to work with the MCOs first - which will ultimately get the fastest results.

COUNCIL UPDATE

- Wallace noted that staff and Council should be proud of their work amidst a great deal of upheaval, and urged everyone not to be discouraged.
- Heffernan reported that she recently attended a meeting of the League of Women’s Voters where the topic was ‘Medicaid.’ She noted that there was a lot of misinformation given with no representation from DHS.
- Spading reported that people are sharing real concerns especially around the available beds issue. The University of Iowa Medical Center’s emergency room beds are full and family members are worn out. She noted the need to work together to make things better.

LEGISLATIVE UPDATE

Sally Titus provided a legislative update:

- Two of the Department’s bills have passed both legislative chambers and are awaiting the Governor’s signature: 1) Sharing information on child’s death and 2) IRS record checks

- Other bills to be addressed include: definition of foster care/clean up language, drug endangered children, terminating parental rights, federal block grant bills.
- The Department's appropriation bill is currently being worked on.
- Once bills are enacted, one of the department's roles is to read each bill carefully to be sure that language is technically correct. The Legislature relies on the department and the Legislative Services Agency to assure the intent is written correctly.

DIRECTOR REPORT

Palmer noted that many of the problems the Department, Council and Legislature deal with cannot be solved with single solutions. Mental health services, Affordable Care Act, and Managed Care are all complex issues. Many times too much energy is drawn to single solutions and don't address the complexities. One of the most pressing issues is the complexity of serving the dually diagnosed individual (an individual with both mental illness and substance abuse or other intellectual disabilities, or aggressive issues) and where the responsibility for care should reside. There may be open beds available in the system, but they may not be the most appropriate bed. After meeting with a number of stakeholders (including law enforcement, Iowa Hospital Association, National Association for Mental Illness, Judicial, Peer Supports, etc.) the Department put together working groups to draft a regional plan for continuum and continuity of care focusing on complex issues.

ADJOURNMENT

Council adjourned the meeting at 1:40 p.m.

The May 10, 2017 meeting is planned to be held at the Glenwood Resource Center.

*Submitted by Sandy Knudsen,
Recording Secretary*