

# MENTAL HEALTH AND DISABILITY SERVICES COMMISSION

July 19, 2018 - 9:30 am to 3:00 pm  
Polk County River Place, Room 2  
2309 Euclid Ave, Des Moines, Iowa  
MEETING MINUTES

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## MHDS COMMISSION MEMBERS PRESENT:

Thomas Bouska (phone)	Brett McLain
Thomas Broeker	Mary Meyers
Dennis Bush	John Parmeter
Jody Eaton	Rebecca Peterson
Kathryn Johnson	Rick Sanders
Betty King	Richard Whitaker
Sharon Lambert	
Geoffrey Lauer	

## MHDS COMMISSION MEMBERS ABSENT:

Marsha Edgington	Senator Liz Mathis
Senator Mark Costello	Russell Wood
Representative David Heaton	Lorrie Young
Representative Scott Ourth	

## OTHER ATTENDEES:

Hannah Beach	Legislative Services Agency
Kris Bell	Legislative Services Agency
Cynthia Bishop	Eyerly Ball Community Mental Health Center
Teresa Bomhoff	Iowa Mental Health Planning and Advisory Council
Diane Breckt	Penn Center Care Facility
Erin Cubit	Iowa Hospital Association
Connie Fanselow	MHDS, Community Services & Planning
Natalie Ginty	Legislative Services Agency
John Hedgecoth	Amerigroup
Jan Heikes	MHDS, Community Services & Planning
Sandi Hurtado-Peters	Department of Management
Charlene Joens	Disability Rights Iowa
Linda Kellen	Department of Inspections and Appeals
Bob Lincoln	County Social Services
Julie Maas	MHDS, Community Services & Planning
Katie Peck	Easter Seals
Flora Schmidt	Iowa Behavioral Health Association
Rick Shults	Division Administrator of Mental Health and Disability Services
Heather Strachan	NAMI Iowa/Office of Consumer Affairs
Kelsey Thien	Legislative Services Agency

## Welcome and Call to Order

John Parmeter called the meeting to order at 9:35 am and led introductions. Quorum was established with thirteen members present and one participating by phone. No conflicts of interest were identified.

### **Approval of Minutes**

Rick Sanders made a motion to approve the June 21, 2018 meeting minutes. Kathy Johnson seconded the motion. The motion passed unanimously.

### **County Social Services Regional Plan and Budget Amendment**

Jan Heikes from MHDS and Bob Lincoln the CEO of the County Social Services MHDS Region introduced themselves and reviewed the CSS policies and procedures and budget summary of changes document. The changes include updating local county offices and access points, change in partners for the multi-system collaboration, changes to vision statement, and updated HCBS waiver wait list policies to align with other regions.

There was discussion on what services would be provided to individuals on a waiver wait list. Services will be more restrictive but essential services will still be provided.

There was discussion on counties in the CSS Region breaking off to form a new region and how that would impact the CSS Region. Bob Lincoln said that DHS is helping to facilitate conversations with the region which has been helpful. The counties have until November 15<sup>th</sup> to make their decision known to the rest of the region.

Geoff Lauer made a motion to make a recommendation to the Director of the Department of Human Services to approve the CSS policy and procedures and budget amendment. Rick Sanders seconded the motion. The motion passed unanimously.

### **Cost Increase Recommendation Letter for Director Foxhoven**

Tom Broeker presented the Commission with a draft of the Cost Increase Recommendation Letter for Director Foxhoven. Tom reviewed each recommendation with the Commission.

There was discussion on the HCBS waiver waiting lists and the process for releasing slots. There was discussion on counties lowering their levies and the impact that SF 504 and the complex needs legislation had on counties and regions. There was discussion on the importance of incorporating that information into the letter before it was sent to Director Foxhoven.

There was discussion on the importance of the legislative interim committee taking into consideration the county budget process and incorporating that information into the recommendation.

Rick Sanders made a motion to authorize and send final copy of the Cost Increase Recommendation Letter to Director Foxhoven and send an electronic copy to the Commission. Geoff Lauer seconded the motion. The motion passed unanimously.

### **Administrative Rules Regarding 441 – Chapter 25, “Disability Services Management”**

Rick Shults and Connie Fanselow from MHDS introduced themselves. Rick stated they were presenting the proposed Chapter 25 rules package for the Commission to vote on approving them for public comment in the Iowa Administrative Bulletin. Rick said the proposed rule package was the result of significant effort from members of the Commission, MHDS staff, and also involved regional CEOs. Rick thanked all the Commission members who participated on the committees and provided input on the rule package.

Connie Fanselow reviewed the schedule for the proposed rules package and said that if the Commission votes to notice the rules will be published in the August 15<sup>th</sup> Administrative Bulletin

for public comment. The public comment period ends on September 4<sup>th</sup> and all comments will be reviewed and considered by the Department. The Department will respond to each comment on why or why not the comment was incorporated into the rule package. Connie said the rules will then go to the Administrative Rules Review Committee (ARRC) before coming back to the Commission in September for adoption. Connie said the Commission will receive in their September rule package a copy of all the public comments with responses. If the Commission adopts the rules in September, they will be published in the October Administrative Bulletin and go back to the ARRC for a final review in November. If all that happens, the rules will go into effect January 1, 2019.

Connie said the rules were written because of direction given in HF2456 which included specific requirements for some of the services. The Commission had five subcommittees. Each subcommittee reviewed one of the services including access centers, assertive community treatment (ACT), crisis and subacute services, intensive residential service homes, and commitment prescreening. Connie said that all of the committees received a copy of the entire rule package to review after their feedback incorporated. Connie said that six services were moved from noncore to core services which includes ACT, mobile response, 23 hour observation and holding, crisis stabilization residential, and subacute residential and community based services.

Connie said that ACT rules currently exist in IAC 441-77 and IAC 441-78 which are Medicaid rules but will be moved to IAC 441-25. Connie said IME will be revising their rules to reference back to Chapter 25. There was discussion on the impact this could have on providers who may not be able to meet the new rules. Rick said that this change will have to be planned out and done with caution. Rick said that providers can follow the exception to policy process for staffing the same way they did for crisis services.

Connie said access centers and intensive residential services homes were two new services added to the core services and commitment prescreening and transportation were added to noncore services.

Connie said that HF2456 directed there be a minimum of twenty-two ACT teams, six access centers, and 120 intensive residential service beds statewide. The rules allow and encourage regions to work together to share services so they are available statewide. Connie said additional changes made were to update the regional annual plan, rescind exempting counties from joining regions which expired in 2014, rescind subacute designation rules, and adding definitions.

There was discussion on who would enforce the minimum number of ACT teams, access centers and intensive residential service beds and how they would be strategically located. Connie said that the rules include access standards that the regions would be responsible for meeting.

There was discussion on the difficulty of finding providers willing to take on the new services especially with the no eject no reject requirement. There was discussion on the concern about funding for the services being enough to incentivize providers. Rick said that DHS will have to work with the regions and the MCOs on sustainable funding. Rick said that not every provider is expected to meet these requirements and only a few providers who are interested are needed and then comes determining what they need to be successful.

There was discussion on the requirement of no eject no reject for access centers and intensive residential service homes. Connie said that it is a requirement from HF2456 and the rules make the eligibility criteria clear and no eject no reject doesn't apply if an individual doesn't meet the eligibility criteria.

There was discussion on community based subacute services being equated to ACT. Rick said that community based subacute services were never defined and instead of defining a whole new set of services they chose a model that fits the service and is already being provided.

There was discussion on access centers being required to serve individuals with mental health or substance abuse. Connie said that language is from HF2456.

There was discussion on incorporating brain injury screening and services into all the services and if it was possible to make revisions to the rule at the Commission meeting. Rick said that during the public comment period was the appropriate time to submit comments as DHS would review and respond to all comments and there was no mechanism for making changes to the rules at the meeting.

There was discussion on the eligibility requirements for intensive residential service homes and if it is too high. There was discussion on how the individuals that will be served in the homes are already being served in the community and the rules will allow providers to serve them better.

Rick Sanders made a motion to approve the proposed rules package for public notice in the Iowa Administrative Bulletin. Richard Whitaker seconded the motion. The motion passed unanimously.

### **Public Comment**

Ken Minkoff said that he had helped with implementing co-occurring services in Iowa for 5-6 years and it looks like the legislation tried to create a system where everyone across the state has access to services including individuals with complex needs. Ken said that he believes the rules need to be reviewed before being implemented as they do not take into account how the success of the rules relies on the partnership between DHS, the regions, and the MCOs. Ken expressed concern about the rules not addressing funding and there being several areas where the clinical requirements set unintended barriers for providers and individuals.

Bob Lincoln said that they are the START model in the CSS Region which builds community capacity and uses braided funding. Bob said they have seen success from this model and it aligns with the region's mission.

Teresa Bomhoff expressed concern about the Commission voting to notice the rules package. Teresa said she believes there are too many barriers to move forward and the regions won't be able to accomplish what is being required of them. Teresa said she believes it is better to hold the rules and work on rewriting them before noticing them.

### **Continued Discussion on Administrative Rules Regarding 441 – Chapter 25, “Disability Services Management”**

Geoff Lauer made a motion to hold the rules for a month and bring them back to the next Commission meeting. Sharon Lambert seconded the motion.

There was discussion on why Geoff made the motion to hold the rules and how hearing concerns from fellow Commission members prompted him to make the motion.

There was discussion about how noticing the rules provides the opportunity for the entire public to comment and give feedback on the rules.

There was discussion on the Commission having a committee to review the public comments and DHS's response to the comments prior to the rules coming back to Commission.

Geoff Lauer made a motion to withdraw his motion to hold the rules for a month. Sharon Lambert seconded the motion.

Geoff Lauer made a motion that the chair appoint a committee to work with DHS staff to engage and review public comments and their consideration and justification to acceptance and rejection prior to the Commission receiving the final rule package. Rick Sanders seconded the motion. The motion passed unanimously.

John Parmeter appointed Geoff Lauer, Jody Eaton, Sharon Lambert, Kathy Johnson, and Lorrie Young to the committee.

### **Public Comment**

Flora Schmidt asked if DHS makes significant changes to the rule package if the process will start over. Connie Fanselow said that the process doesn't necessarily have to start over but they will stay in close contact with the attorney general.

Teresa Bomhoff encouraged the Commission to delay noticing the rules for thirty days and come back with a better set of rules before noticing them for public comment. Rick said that moving forward with noticing the rules gives all of the public the ability to comment on the rules even if they weren't able to attend the Commission meeting.

The Commission broke for lunch at 12:30 pm and reconvened at 1:03 pm

### **Regional Jail Services**

Annie Uetz from Polk County Health Services thanked the Commission for inviting her to present on Polk County's jail services. Annie reviewed a power point on the jail services and outcomes as well as the stepping up initiative.

There was discussion on a standardized assessment for jails. The Iowa Administrative Code lays out the basic requirements for the assessment that each jail must follow but jails can go above those requirements. Polk County Jail has a three part assessment that includes a brief mental health screening that is nationally recognized and includes a suicide risk assessment.

Annie said that Polk County Health Services has been going out to law enforcement and hospitals to train on the commitment process which is found in IC 229 and how to streamline the process. Annie said that Broadlawns has a substance abuse and psychiatric urgent care that usually has a 45 minute wait and is connected to their crisis observation center.

There was discussion on the Bridges of Iowa substance abuse treatment program. Annie said that individuals can't go straight from jail to the program because they need to be with an MCO and they can't get an MCO for 30-60 days after release. This creates a gap and Bridges has seen a decrease in individuals receiving treatment because of it.

Jody Eaton handed out a resource packet of regional services.

### **DHS/MHDS Report**

Rick Shults thanked the Commission for their timeliness with the Cost Increase Recommendation Letter and stated that the Department is currently working on their budget and the letter will be helpful. Rick said the Department currently has two workgroups going one on tertiary care hospitals and one on commitment processes. Rick said that the Commission will receive meeting notices for each of the meetings which are open to the public.

Rick gave an update on the Children's System State Board. Rick said the Children's Mental Health and Well-Being Advisory Committee put together a packet off all their recommendations from the last several years which they presented to the co-chairs of the State Board. There was discussion on how many board members fit the role of parents of children with a serious emotional disturbance. Rick said that the Department is putting together a document of the board member's background to help familiarize the public with the group.

Rick said it was announced that there will be a legislative interim committee to review and discuss sustainable funding for the MHDS Regions but the members have not been announced.

Rick said MHDS has started discussions with the Department of Public Health on a statewide crisis line. Rick said the MHDS Regions need to be involved to ensure that the work they are accomplishing with their crisis lines isn't interrupted.

Rick said that Iowa is one of the few states to have a statewide inpatient psychiatric bedtracking system and he presented on it to SAMHSA. Rick said hospitals are reporting twice a day and gender and age are now being reported.

Rick said the Department is also charged with doing an internal review of the reimbursement rate for ACT and providing recommendations to the General Assembly. Rick said the Department also put in an application to SAMHSA for an ACT grant that if awarded is \$678,000 a year for up to five years.

There was discussion on the IHH review. Rick said that he did not have any information to provide but would provide an update at the next meeting.

The Commission broke into committees at 2:00pm and reconvened at a group at 2:30pm.

### **Planning for Future Meetings**

The Commission asked for presentations from ISAC on their proposed funding strategy for mental health and disability services and priorities, discussion on combining mental health and substance use disorder services, and the state resource center barriers report.

### **Public Comment**

None

The meeting adjourned at 2:54 pm

Minutes respectfully submitted by Julie Maas.