

Mental Health Planning Council
January 18, 2023, 9:00 am to 2:30 pm
Zoom
Meeting Minutes – Approved 3/15/2023

MENTAL HEALTH PLANNING COUNCIL MEMBERS PRESENT:

Teresa Bomhoff	Christina Maulsby
Rachel Cecil	Katie McBurney
Linda Dettmann	Ed Murphy
Jim Donoghue	Hannah Olson
Jen Gomez	Brad Richardson
Theresa Henderson	Dr. Shaad Swim
Vienna Hoang	Lorraine Uehling-Techel
Michael Kaufman	Monica Van Horn
Todd Lange	Patricia Whitmarsh
Megan Marsh	Edward Wollner

MENTAL HEALTH PLANNING COUNCIL MEMBERS ABSENT:

Kenneth Briggs	Heaven Lorenz
Sen. Nate Boulton	Rep. Ann Meyer
Leslie Carpenter	Todd Noack
Kyra Hawley	Amy Robasse
Rep. Bob Kressig	Kristin Rooff

OTHER ATTENDEES:

Theresa Armstrong	Patti Manna
Kathleen Buckwalter	Devon McClurken
Kate Carico	Denise Rathman
Jennifer Day	Libby Reekers
Wendy DePhillips	Flora Schmidt
Maggie Ferguson	Shannon Zehr
Laura Larkin	

Materials Referenced:

November 16, 2022, IMHPC Meeting Minutes – DRAFT

2023 Legislative Priorities for Jan 18 Meeting

Attachment to Agenda

Geriatric Mental Health Presentation #1 – NASEM Report

Geriatric Mental Health Presentation #2 – IGEC & GWEP

Geriatric Mental Health Presentation #3 – Csomay Center

Geriatric Mental Health Presentation #4 – Changing Population of Clients & Healthcare Professionals in the Future

Welcome

Teresa Bomhoff called the meeting to order at 9:05 am. Quorum was established with 20 members attending. Teresa introduced herself and led introductions of Council members asking them to what seat they represent on the Council, where they live and/or work in the State, and something interesting about themselves.

Review and Approval of Meeting Minutes

Teresa Bomhoff entertained a motion to approve the November 16, 2022, meeting minutes. Rachel Cecil motioned to approve the minutes. Jen Gomez seconded the motion. There was no discussion, the motion passed, and the minutes were approved.

Nominations Committee Report

Jen Gomez stated that the Nominations Committee had received and reviewed an application from Mary McKinnell from Waterloo, for one of the Public/Private vacancy on the Iowa Mental Health Planning Council. Jen noted that the Nominations Committee recommended Mary's application for approval by the full Council. There was no additional discussion on the application. Jen Gomez motioned to approve Mary McKinnell's application to the Planning Council. Brad Richardson seconded the motion. There was no discussion, and the motion was approved.

Jen also noted that three new members had been reviewed and recommended by the Nominations Committee and approved by the full Council via email vote in December 2022. These three individuals were Amy Robasse who fills one of the individuals in recovery vacancies, Ed Wollner who fills the other vacancy for an individual in recovery, and Patti Whitmarsh who fills the seat for a parent of a child with SED. Patti will be considered a provider as she is the Program Manager for Family and Professional Partnerships at the University of Iowa Child Health Specialty Clinics (CHSC.) Jen indicated that Ed and Patti were at today's meeting.

Jen Gomez stated that there were three members who were in jeopardy of losing their seat due to three consecutive absences. Jen noted all these members were contacted and notified about their status, and that they planned to attend the next meeting. With these additions to the Planning Council the remaining vacancies include one Family Member of an Adult with SMI, one Parent of a Child with SED, two "Other", and one Public/Private which was being held for the nomination from a state agency (HHS) for staff with a specialty in substance use disorders. This person would replace Michele Tilotta who accepted a different position within HHS.

Monitoring and Oversight Committee Report

Theresa Henderson indicated that the Monitoring and Oversight Committee met with Julie Maas, HHS, in December to review the Center of Excellence for Behavioral Health (CEBH) contract. The CEBH provides training and fidelity review for community providers on evidence-based practices (EBPs). Currently the three EBPs are Assertive Community Treatment (ACT), Individual Placement & Support (IPS) and Permanent Supportive Housing. The CEBH has conducted a landscape analysis to determine how EBPs are being used in the state, submitted plans, and are looking at implementing a training plan. IPS is the current focus of the Center, and as this EBP is not as well-known they are looking at additional funding. The CEBH is currently funded through COVID supplemental and American Rescue Plan Act (ARPA) funding, which will expire in March 2025. It was noted that Permanent Supportive Housing is the EBP that most community providers struggle with implementing.

Theresa stated that committee met with Julie Maas, HHS, in January to review the Community Mental Health Centers contracts. It was noted that one of the big changes with the new contracts were the addition of a workforce deliverable that allows CMHCs to pay for supervision of an intern or for professional licensing, which has been beneficial in helping address workforce issues. Julie noted that all contract deliverables must be EBPs or a promising practice with evidence of significant research. CMHCs are currently in the first quarter of the contract, and everything has been on track. There have been some staffing issues that have interfered with being able to send staff to trainings, which is one of the ways that CMHC utilize block grant dollars. However, contract deliverables can be changed if or when necessary.

There was some discussion regarding how block grant dollars are divided amongst the different programs/contracts. It was noted that off the top five percent is allocated for crisis, and ten percent for First Episode Psychosis (FEP). After those allocations are removed, five percent is then allocated to

administration and 70 percent of the remaining funds are allocated to the CMHCs per Iowa law, with the final 25 percent going to state contracts.

Council Policy & Bylaws Workgroup

Michael Kauffman indicated that upon review of the Council Policy and Council Bylaws by Jim Donoghue and himself there were no substantive changes to either document, with the main change being the references to the Department of Human Services (DHS) being changed to the Department of Health and Human Services (HHS).

Michael noted that the Bylaws document can be amended at any time. He also indicated that he made some grammatical and formatting changes to the Bylaws document as well as some clean up to Section 5, E. Voting Rights, but again, no substantive changes. Michael notified the Council that this was the first reading of the documents, and there would need to be a second reading prior to voting. Michael indicated that he would make necessary changes based on discussion and send these documents out to all the Council for review so that they could vote on changes to the documents at the March meeting.

Legislative Priorities

Teresa Bomhoff reviewed the Legislative Priorities document, including the purposes for the Iowa Mental Health Planning and Advisory Council for discussion and input from the full Council. Teresa noted she included comparisons to the Governor's Condition of the State Report. Teresa stated that the table of contents page could be a one-pager that could be shared with state legislators.

There was discussion regarding changes to the document, including moving the bullet for peer support to immediately follow direct care (Workforce Crisis & Training) as these both have a lot in common as well as the addition of employment support providers (job developers, job coaches). There was discussion regarding adding rate relief for employment support services, as well as FPL percentage for eligibility and whether this percentage should be increased and consistent across regions. Currently regions must fund individuals at or below 150% FPL, but regions can choose to fund up to 500% FPL. It was noted that 150% FPL still leaves many without assistance as the work to be economically independent.

Teresa indicated some key legislators that need to receive the priorities including Sen. Jeff Edler, Rep. Joel Fry, and Rep. Ann Meyer, and that the Council should request a 30-minute session with them to review. It was noted that these individuals are also all part of the HHS Appropriations Subcommittee. Teresa recommended that Council members review the document closely, and if they had any suggestions to send them to Teresa for addition to the document.

Public Safety Workgroup

Brad Richardson noted that the Public Safety Workgroup had not met recently. Brad noted that Iowa Code Chapter 229 on Hospitalization of Persons with Mental Illness could benefit from changes. Brad referenced an article by Michael Judge regarding the right to die in Iowa. The article, which will appear in the February MindSpring newsletter, is about a veteran who was approached by law enforcement several times to go to the hospital or shelter. The individual refused and ultimately froze to death. Brad noted that there needs to be allowance for help to occur if it is in the person's best interest. There was discussion regarding potential speakers or presentation topics, including SolutionPoint+ who teach Crisis Intervention Training and de-escalation, mental health courts, and medication monitoring. Some county jails do not allow individuals to bring in medication. Polk County does allow medications to be brought in.

There was discussion regarding what project the workgroup should be working on. Topics of interest included continuity of services for individuals when discharged from the Department of Corrections or the development of a civil forensic unit as there is a need for facilities that can handle individuals who are experiencing aggressive behaviors. There was discussion regarding Intensive Residential Service

Homes and how they will function as a no eject/no reject service. Teresa Bomhoff noted that the workgroup should meet to discuss and determine what project they want to work on.

Mental Health Block Grant (MHBG) Discussion

Laura Larkin, HHS introduced herself noting that she was the State Block Grant Planner for the Mental Health Block Grant (MHBG). Laura reviewed the process for the MHBG, noting that the allocation for last year was approximately \$6.5 million as well as separate supplemental funds. Laura noted that the state must apply for block grant dollars annually. However, every other year was a full application that included an assessment of the mental health system, priorities, etc. The opposite year the application was a short report noting that the state was applying for block grant funds.

Laura provided a high-level of the current MHBG plan, which was submitted in September 2021. The Planning Council participates in identifying system strengths as well as gaps and concerns by participating in the MHBG Planning Workgroup along with the state planner with HHS. The workgroup also works to identify priorities for the application period. Teresa inquired who would like to participate in the MHBG Planning Workgroup for the 2024-2025 Application and Plan. Teresa Bomhoff, Theresa Henderson, Monica Van Horn, and Brad Richardson all volunteered for the workgroup. Teresa noted that Jim Donoghue served on this workgroup last time but was unsure if he would like to serve on the workgroup again. Teresa noted that any interested individuals should let her know as soon as possible, as the group will begin meeting this Spring. There was discussion about the combination of the MHBG and the Substance Abuse Block Grant (SABG) with the alignment of the Department of Health and Human Services.

Teresa, using the agenda attachment document, reviewed the FY22-23 MHBG Priorities with Laura Larkin providing updates on their status. Teresa reflected these updates in the agenda attachment. Teresa also reviewed the priorities for the SABG, the 2021-2022 recommendations from the IMHPC, specifically notes on the priority regarding marginalized populations, the 2022-2023 IMHPC recommendations, the record of the MHBG allocations and which programs, were funded by the MHBG regular and supplemental funds.

There was discussion regarding the dollars allocated through the COVID supplemental, which expire in March 2024 and ARPA, which expire September 2025, and the sustainability of these projects. It was noted that the carry over for peer run organization, Systems of Care programs, Center of Excellence for Behavioral Health (CEBH) are in the HHS ARPA plan as well as 988 implementations.

Iowa Mental Health Planning and Advisory Council took a break at 12:05 p.m. and reconvened at 12:34 p.m.

Geriatric Mental Health

Kathleen "Kitty" Buckwalter, PhD, RN, FAAN, University of Iowa, College of Nursing provided a presentation on Geriatric Mental Health, including topics on the NASEM nursing home report "The National Imperative to Improve Nursing Home Quality – Consensus Study Report", the Iowa Geriatric Education enter and the Geriatrics Workforce Enhancement Program at the University of Iowa, the Barbara and Richard Csomay Center for Gerontological Excellence at the University of Iowa, and the changing population of clients and healthcare professional in the future. Kitty referenced the Iowa Supreme Court's Guardianship and Conservatorship Reform Task Force (2015-2017), and reform legislation in 2019 that incorporated and reflected the reforms of this task force.

There was discussion regarding solutions that other countries have implemented. There was discussion regarding issues that China is having due to their one-child policy as well as the communities centered around gerontological care in the Netherlands. There was discussion regarding what age is considered "geriatric", noting that it was dependent on the situation as many think it is age 65, while the work that

Kitty does defines it as age 55. There was discussion regarding senior peer support services, noting that they are not as widespread as they need to be. It was noted that there is a good peer program for caregivers for individuals with dementia.

HHS Update

HHS Legislation

Theresa Armstrong informed the Council that HHS has submitted an omnibus bill this legislative session. Theresa noted the bill consists of four sections. One section is focused on Mental Health Institutes and bed specialization, another section is focused on forensics and Iowa Code 812 competency and competency restoration. Theresa noted that Dr. Derek Hess worked extensively with various stakeholders including the Department of Corrections and Mental Health and Disability Services Regions. Another section references the MHDS Regions Study Report and moves the law regarding the MHDS Regions from Chapter 331, County Home Rule Implementation to 225C, Mental Health and Disability Services as mental health services are now 100% state appropriation versus the county tax levy. It also asks for governance changes seeking broader stakeholder representation and caps county board of supervisors' representation to 49% of the regional governing board. It asks for community-based competency restoration to be added to required core services, increases the MHDS Regions' carry forward from 5% to 10% and eliminates HHS quarterly reporting, changing it to an annual report with dashboards. The fourth section is not related to Behavioral Health and Disability Services (BHDS) as it is a cleanup or technical change regarding Family First legislation.

HHS Alignment

Theresa Armstrong informed the Council that BHDS is building its table of organization and how best to align the work of the Division. It was also noted that the initial HHS website has launched, but there is a lot of work still to be done. Theresa noted that this is the first step in this change, as the main purpose up to this point was to ensure that information from the legacy websites was transferred to the new one. The next step will be a focus on making the website more accessible and user friendly. HHS will be gathering stakeholder input for this step.

Theresa discussed the Governor's Condition of State and the aligning of state government with the reduction of state departments from 37 to 16. Theresa noted that the Department of Human Rights and Volunteer Iowa are possible additions to HHS, along with the Iowa Department on Aging and Early Childhood Iowa which were already slated to join HHS later this year. Theresa also informed the Council that Disability Rights Iowa has filed a lawsuit against HHS regarding access to children's services. Theresa noted that she was unable to comment further on the lawsuit but wanted to ensure the Council was informed.

Certified Community Behavioral Health Clinics (CCBHCs)

Theresa informed the Council that the CCBHC Planning Grant has been submitted and that the Substance Abuse and Mental Health Services Administration (SAMHSA) will be announcing which states will be awarded a planning grant in March. It was noted that this was a very competitive grant with 40 states offering applications and only 15 states being awarded the grant to apply to be a demonstration state.

Transformation Transfer Initiative (TTI) Grant

Theresa informed the Council that BHDS was awarded a TTI grant in 2022 to create two crisis toolkits and training curriculum for crisis services provides specifically those who work with children and LGBTQ+ individuals. It was noted that TTI grants are awarded by National Association of State Mental Health Program Directors (NASMHPD) through funds provided by SAMHSA. Theresa noted that BHDS has received another TTI grant in 2023 to hire a contractor to do an expanded landscape analysis and provide recommendations and a roadmap to accessing behavioral health and crisis systems.

ASPIRE Grant

Theresa informed the Council that HHS has recently applied for an Advancing State Policy Integration for Recovery and Employment (ASPIRE) grant through the US Department of Labor, Office of Disability

Employment Policy (ODEP). HHS has received this grant in the past. There are no funds associated with this grant, as it is a technical assistance grant that provides training and technical assistance from subject matter experts, Westat is the contractor, on Individual Placements & Supports (IPS), which is an evidence-based practice for supported employment. Iowa currently has five ISP providers in the state and HHS would like to expand to additional providers. It was also noted the Center of Excellence for Behavioral Health is focused on IPS as one of the EBPs in their contract with the state.

988

Theresa informed the Council that HHS has received an additional \$450K from SAMHSA for the implementation of 988. HHS will use these dollars for marketing, training, and technical assistance to 911 partners and mobile response warm handoffs. HHS is also looking how a centralized tracking for crisis services might operate. Theresa noted that MHDS Regions have begun collecting data related to crisis services beginning January 1, 2023, with all data going to the same place and MHDS Regions using the same definition. Theresa noted that 988 crisis lines are providing warm handoffs to mobile response dispatch. Theresa also stated that the crisis lines are seeing an increase in call, text, and chat. There was discussion regarding the need to market 988 to older adults and the alternative methods for marketing outside of online social media. Methods include using billboards, flyers in local bars, salons, libraries, etc., and print media. It was noted that this may help with marketing to the rural community. Theresa informed the Council that HHS will start a few pilot projects with 911 providers to work on coordination between 988 and 911.

DOJ Investigation

Theresa notified the Council that Director Kelly Garcia had recently attended a townhall meeting at Glenwood Resource Center (GRC) along with families and guardians. Themes of DOJ consent decree for GRC include establishing processes to ensure all services and care is consistent with current, generally accepted standards of care, monitoring effectiveness of all treatments, supports and interventions, use valid, reliable, and sufficient data to inform decision-making, utilize person-centered planning, and maintain detailed records of assessment, treatment, and diagnosis. Changes being made at GRC are also being implemented at Woodward Resource Center. While a report has been issued, a consent decree on the second part of the investigation regarding Americans with Disabilities Act (ADA) compliance has not been received. However, HHS continues to move forward with making changes for more community options.

However, HHS continues to work on community integration and the array of necessary services.

Medicaid Updates

Theresa noted that with the announcement that the Public Health Emergency (PHE) will end on May 11, 2023, Medicaid will begin returning to normal operating procedures or “unwinding”, which will entail individuals having to submit documentation and requalify for Medicaid services. During the PHE, members could not be removed from Medicaid and did not have to submit financial documentation. Theresa noted that Iowa Medicaid has released an Information Letter (IL) with more information. Molina Healthcare is currently doing onboarding and will begin as a third MCO on July 1, 2023. Iowa Medicaid will be sending letters to members to see who may be interested in opting to change to Molina from their current MCO. Iowa Medicaid has filed a state plan amendment (SPA) to make Functional Family Therapy and Multi-Systemic Therapy, two evidence-based practices for children, Medicaid funded services in Iowa. Theresa noted that a rate has been identified for these services. Theresa also noted that intensive inpatient psychiatric rates went into effect on January 1, 2023. There are two rates (general and intensive) for inpatient psychiatric care. Theresa also noted that the systems assessment being conducted by Mathematica was still in progress. Mathematica has provided some initial recommendations as well as a preliminary report, but the final report is not done. There was discussion regarding the waivers specifically the children’s mental health waiver and the need for one for kids with autism.

Agenda Attachment Review

Teresa Bomhoff reviewed the agenda attachment pages 6 to 13 with the Council making additions or deletions based on input from Theresa Armstrong. Teresa noted that she uses this document to track information for Council reference.

Additional Discussion/Planning for Future Meetings

Teresa Bomhoff noted that the next Planning Council meeting would be Wednesday, March 15, 2023.

Public Comment

- Shannon Zehr addressed the Planning Council indicating her possible interest in applying for the Council. Shannon expressed interest in if the state was tracking individuals who have left the State Resource Centers and other RCF/IDs to ascertain successful placement. Shannon spoke about a situation she has experienced as a guardian, concerns she has with the placement of her family member, lack of communication with the family by the provider, issues with telehealth providers and oversight.

Adjourn

The meeting adjourned at 3:27 p.m.