

Central Iowa Community Services Region FY2022 Annual Report



CICS
Supporting Individuals. Strengthening Communities.

SUBMITTED 11/30/22

Geographic Area: *Boone, Cerro Gordo, Franklin, Greene, Hamilton, Hancock, Hardin, Jasper, Madison, Marshall, Poweshiek, Story, Warren, Webster, and Wright Counties.*

Approved by CICS Governing Board: 11/17/22

Reviewed by CICS Advisory Committees: 11/4/22

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Introduction

Central Iowa Community Services (CICS) was formed under Iowa Code Chapter 28E to create a Mental Health and Disability Service Region in compliance with Iowa Code 331.390. The annual report is a component of the Management Plan which includes three parts: Annual Service and Budget Plan, Annual Report, and Policies and Procedures Manual in compliance with Iowa Administrative Code 441.25.

Cerro Gordo, Hancock, Webster, and Wright counties joined CICS effective 7/1/21, bringing CICS to 15 member counties. During FY2022 CICS took steps to move toward a single employer of record with Franklin County effective 7/1/22. CICS also took steps for all mental health and disability service funds maintained locally by member counties to be transferred to the CICS fiscal agent, Story County, at the end of FY2022.

The FY2022 Annual Report covers the period of July 1, 2021, to June 30, 2022. The annual report includes documentation of the status of service development; services actually provided; individuals served; designated intensive mental health services; a financial statement including revenues, expenditures, and levies; and specific regional outcomes for the year.

CICS Management Plans are available on the CICS Website www.cicsmhds.org and the Department of Human Services (DHS) Website <https://dhs.iowa.gov>.

The CICS Governing Board Directors for FY2022 were:

Erich Kretzinger – Boone County

Chris Watts – Cerro Gordo County

Mike Nolte - Franklin County

Dawn Rudolph - Greene County

Jerry Klobberdanz – Hamilton County

Gary Rayhons – Hancock County

BJ Hoffman - Hardin County

Brandon Talsma - Jasper County

Phil Clifton - Madison County

Bill Patten - Marshall County

Diana Dawley - Poweshiek County

Lisa Heddens - Story County

Darren Heater – Warren County (ended 12/31/21)

Aaron DeKock - Warren County (began 1/1/22)

Mark Campbell – Webster County

Karl Helgevold – Wright County

JD Deambra - Individual who Utilizes Mental Health and Disability Services or is an Actively Involved Relative of such an Individual

Julie Smith - Ex-officio, non-voting Provider Representative

Allie Wulfekuhle - Parent/Actively Involved Relative of a Child who Utilizes Children’s Behavioral Health Services

Kendra Alexander – The Education System

Andrea Dickerson – Ex-officio, non-voting Children’s Behavioral Health Services Provider

The CICS Adult Advisory Committee members for FY2022 were:

Individual who Utilizes Mental Health and Disability Services or is an Actively Involved Relative of such an Individual:

Brandon Greenfield
Deb Williams (ended 4/22)
JD Deambra
Jody Eaton
Kathy Hanzek
Leatha Slauson

Provider Representative:

Anthony Wubben (ended 12/21)
Beth Colby Plautz (began 3/22)
Breon Gardner (began 1/22)
Brittany Palmer
Heidi Metz (began 2/22)
Jeff Vance (ended 12/21)
Jennifer Ellis
Julie Smith
Kara Anderson (began 1/22)
Kelly Kratz
Mary Nelson (ended 12/21)
Nikki Fischer (ended 9/21)
Rachel Fletcher (began 1/22)
Sharon Swope

Governing Board Ex-Officio Non-Voting Members:

BJ Hoffman
Diana Dawley

The CICS Children's Behavioral Health Advisory Committee Members for FY2022 were:

Allie Wulfekuhle - Parent/Actively Involved Relative of a Child who Utilizes Children's Behavioral Health Services
Joy Meinders - Parent/Actively Involved Relative of a Child who Utilizes Children's Behavioral Health Services
Andrea Dickerson - Children's Behavioral Health Service Provider
Clarissa Thompson - Child Welfare Advocate
Keith Halleland - Child Welfare Advocate
Kelly Moore - Early Childhood Advocate
Lori Price - Early Childhood Advocate
Rita Baker - Early Childhood Advocate
Dejah Roman - Child Care Provider
Karie Foster - The Education System
Kendra Alexander - The Education System

Chief Rob Burdess - Local Law Enforcement
 Matthew Benson - Local Law Enforcement
 Emilea Lundberg - The Juvenile Court System
 Shirley Faircloth - The Juvenile Court System
 Dr. Jack Swanson - Pediatrician
 Dawn Rudolph - Regional Governing Board
 Lisa Heddens - Regional Governing Board

The CICS Annual Report provides an opportunity to reflect on the past year's accomplishments. CICS did see an increase in funding for services and number of individuals served which had declined in FY2020 and FY2021 with the coronavirus disease 2019 (COVID-19) pandemic. Throughout FY2022 CICS continued to partner with regions and service providers for development of intensive mental health services. This report will feature the array of services that CICS funds along with facts regarding utilization and the outcomes of these programs.

A. Services Provided and Individuals Served

This section includes:

- The number of individuals in each diagnostic category funded for each service
- Unduplicated count of individuals funded by age and diagnostic category
- Regionally designated Intensive Mental Health Services

Table A. Number of Individuals Served for Each Service by Diagnostic Category

MI – Mental Illness

A – Adult

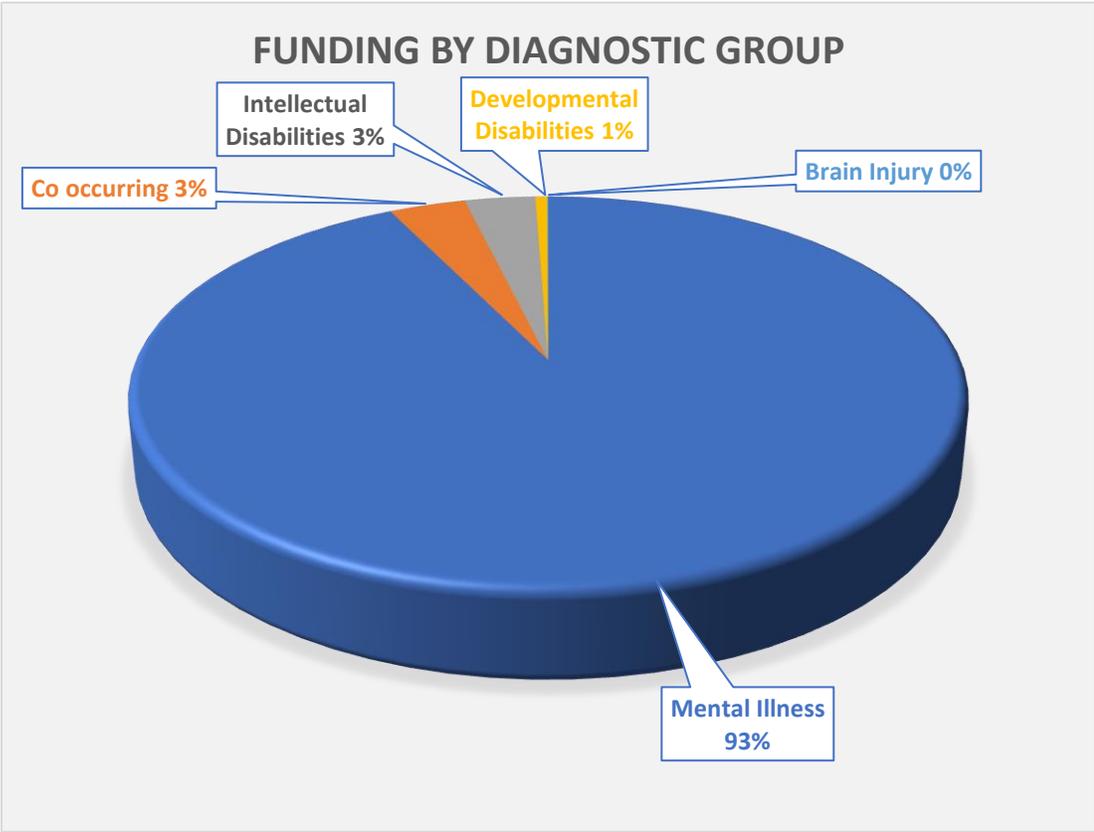
DD – Developmental Disability

C – Child

ID – Intellectual Disability

BI – Brain Injury

FY 2022 Actual GAAP	Central Iowa Community Services MHDS Region	Diagnosis										Total	
		MI (40)		ID (42)		DD (43)		BI (47)		Other			
		A	C	A	C	A	C	A	C	A	C		
	Comprehensive Facility and Community Based Treatment												
Core	Treatment												
42305	Psychotherapeutic Treatment - Outpatient	66	7										73
42306	Psychotherapeutic Treatment - Medication Prescribing	55											55
71319	State MHI Inpatient - Per diem charges	20											20
73319	Other Priv./Public Hospitals - Inpatient per diem charges	5											5
	Basic Crisis Response												
44301	Crisis Evaluation	1160	447	10	1			2					1620
44305	24 Hour Crisis Response	1											1



The chart (left) shows funding for residents in the Mental Illness disability group account for 93% of those funded, while residents in the Intellectual Disability group account for 3%.

B. Regionally Designated Intensive Mental Health Services

The region has designated the following provider(s) as an **Access Center** which has met the following requirements:

- Immediate intake assessment and screening that includes but is not limited to mental and physical conditions, suicide risk, brain injury, and substance use.
- Comprehensive person-centered mental health assessments by appropriately licensed or credentialed professionals.
- Comprehensive person-centered substance use disorder assessments by appropriately licensed or credentialed professional.
- Peer support services.
- Mental health treatment.
- Substance abuse treatment.
- Physical health services.
- Care coordination.
- Service navigation and linkage to needed services.

<u>Date Designated</u>	<u>Access Center</u>
12/16/21	GuideLink Access Center, Iowa City, IA
12/16/21	Infinity Health, Osceola, IA
12/16/21	Mental Health Access Center of Linn County, Cedar Rapids, IA
12/16/21	North Iowa Regional Services, Waterloo, IA
12/16/21	Zion Integrated Behavioral Health/Safe Harbor, Woodward, IA

The region has designated the following **Assertive Community Treatment (ACT)** teams which have been evaluated for program fidelity, including a peer review as required by subrule 25.6(2), and documentation of each team’s most recent fidelity score.

<u>Date Designated</u>	<u>ACT Teams</u>	<u>Fidelity Score</u>
12/16/21	Eyerly Ball Community Mental Health Services, Ames, IA	97
12/16/21	UnityPoint Health – Berryhill Center, Fort Dodge, IA	129

Eyerly Ball CMHS did not have a peer review completed in FY2022, CICS is working with the provider to have this completed in FY2023. CICS intends to designate Prairie Ridge Integrated Behavioral Healthcare for ACT services once program fidelity has been evaluated.

The region has designated the following **Subacute** service providers which meet the criteria and are licensed by the Department of Inspections and Appeals.

<u>Date Designated</u>	<u>Subacute</u>
12/16/21	Infinity Health, Osceola, IA
12/16/21	Mary Greeley Medical Center Transitional Living Center – Subacute Care, Ames, IA
12/16/21	North Iowa Regional Services, Waterloo, IA

The region is currently working with 43 North Iowa for the development of Intensive Residential Services, CICS will designate this provider once the provider meets the following **Intensive Residential Service** requirements:

- Enrolled as an HCBS 1915(i) habilitation or an HCBS 1915(c) intellectual disability waiver supported community living provider.
- Provide staffing 24 hours a day, 7 days a week, 365 days a year.
- Maintain staffing ratio of one staff to every two and one-half residents.
- Ensure that all staff have the minimum qualifications required.
- Provider coordination with the individual’s clinical mental health and physical health treatment, and other services and support.
- Provide clinical oversight by a mental health professional
- Have a written cooperative agreement with an outpatient provider.
- Be licensed as a substance abuse treatment program or have a written cooperative agreement.
- Accept and service eligible individuals who are court-ordered.
- Provide services to eligible individuals on a no reject, no eject basis.
- Serve no more than five individuals at a site.
- Be located in a neighborhood setting to maximize community integration and natural supports.
- Demonstrate specialization in serving individuals with an SPMI or multi-occurring conditions and serve individuals with similar conditions in the same site.

C. Financials

Table C. Expenditures

FY 2022 Accrual	Central Iowa Community Services MHDS Region	MI (40)	ID (42)	DD (43)	BI (47)	Admin (44)	Total
Core Domains							
COA	Treatment						
42305	Mental health outpatient therapy	\$ 28,270.14					\$ 28,270.14
42306	Medication prescribing & management	\$ 28,609.03					\$ 28,609.03
43301	Assessment & evaluation	\$					\$
71319	Mental health inpatient therapy-MHI	\$ 207,852.29					\$ 207,852.29
73319	Mental health inpatient therapy	\$ 665.87					\$ 665.87
Crisis Services							
32322	Personal emergency response system						\$ -
44301	Crisis evaluation	\$ 707,139.62	\$ 4,350.00		\$ 580.00		\$ 712,069.62
44302	23 hour crisis observation & holding						\$ -
44305	24 hour access to crisis response	\$ 489.82					\$ 489.82
44307	Mobile response	\$ 1,124,949.66	\$ 852.45				\$ 1,125,802.11
44312	Crisis Stabilization community-based services	\$ 223,283.82					\$ 223,283.82
44313	Crisis Stabilization residential services	\$ 2,859,571.66					\$ 2,859,571.66
44396	Access Centers: start-up / sustainability						\$ -
Support for Community Living							
32320	Home health aide						\$ -
32325	Respite		\$ 2,704.00	\$ 6,170.89			\$ 8,874.98
32328	Home & vehicle modifications						\$ -
32329	Supported community living	\$ 453,069.03	\$ 44,599.53	\$ 126,762.10	\$ 36,322.44		\$ 660,753.10
42329	Intensive residential services						\$ -
Support for Employment							
50362	Prevocational services		\$ 5,152.49	\$ 5,107.45			\$ 10,259.94
50364	Job development						\$ -
50367	Day habilitation	\$ 6,985.59	\$ 31,004.12	\$ 45,743.70	\$ 40,262.70		\$ 123,996.11
50368	Supported employment	\$ 8,051.05	\$ 55,005.73	\$ 71,463.04			\$ 134,519.82
50369	Group Supported employment-enclave	\$ 934.92	\$ 717.36	\$ 14,698.91			\$ 16,351.19
Recovery Services							
45323	Family support	\$ 52,470.00					\$ 52,470.00
45366	Peer support	\$ 3,718.80					\$ 3,718.80
Service Coordination							
21375	Case management						\$ -
24376	Health homes						\$ -
Sub-Acute Services							
63309	Subacute services-1-5 beds						\$ -

64309	Subacute services-6 and over beds	\$ 351,198.82					\$ 351,198.82
	Core Evidenced Based Treatment						
04422	Education & Training Services - provider competency						\$ -
32396	Supported housing						\$ -
42398	Assertive community treatment (ACT)	\$ 139,414.26			\$ 290.00		\$ 139,704.26
45373	Family psychoeducation						\$ -
	Core Domains Total	\$ 6,196,674.38	\$ 144,385.68	\$ 269,946.18	\$ 77,455.14		\$ 6,688,461.38
	Mandated Services						
46319	Oakdale						\$ -
72319	State resource centers						\$ -
74XXX	Commitment related (except 301)	\$ 276,496.70	\$ 435.55				\$ 276,932.25
75XXX	Mental health advocate	\$ 277,972.57					\$ 277,972.57
	Mandated Services Total	\$ 554,469.27	\$ 435.55	\$ -	\$ -		\$ 554,904.82
	Additional Core Domains						
	Justice system-involved services						
25xxx	Coordination services	\$ 299,131.00					\$ 299,131.00
44346	24 hour crisis line**						
44366	Warm line**						
46305	Mental health services in jails	\$ 133,361.75					\$ 133,361.75
46399	Justice system-involved services-other						\$ -
46422	Crisis prevention training	\$ 1,732.21					\$ 1,732.21
46425	Mental health court related costs						\$ -
74301	Civil commitment prescreening evaluation						\$ -
	Additional Core Evidenced based treatment						
42366	Peer self-help drop-in centers	\$ 627,236.67	\$ 162,660.19	\$ 17,508.52	\$ 6,903.46		\$ 814,308.84
42397	Psychiatric rehabilitation (IPR)	\$ 17,134.32					\$ 17,134.32
	Additional Core Domains Total	\$ 1,078,595.95	\$ 162,660.19	\$ 17,508.52	\$ 6,903.46		\$ 1,265,668.12
	Other Informational Services						
03371	Information & referral	\$ 908.82					\$ 908.82
04372	Planning and/or Consultation (client related)						\$ -
04377	Provider Incentive Payment						\$ -
04399	Consultation Other						\$ -
04429	Planning and Management Consultants (non-client related)	\$ -					\$ -
05373	Public education	\$ 173,759.97	\$ 275.00	\$ 275.00			\$ 174,309.97
	Other Informational Services Total	\$ 174,668.79	\$ 275.00	\$ 275.00			\$ 175,218.79
	Community Living Supports						
06399	Academic services						\$ -
22XXX	Services management	\$ 1,630,261.47	\$ 27,888.91	\$ 29,070.25	\$ 1,725.16		\$ 1,688,945.79
23376	Crisis care coordination						\$ -
23399	Crisis care coordination other						\$ -
24399	Health home other						\$ -
31XXX	Transportation	\$ 224,746.19	\$ 5,900.67	\$ 2,312.65			\$ 232,959.51

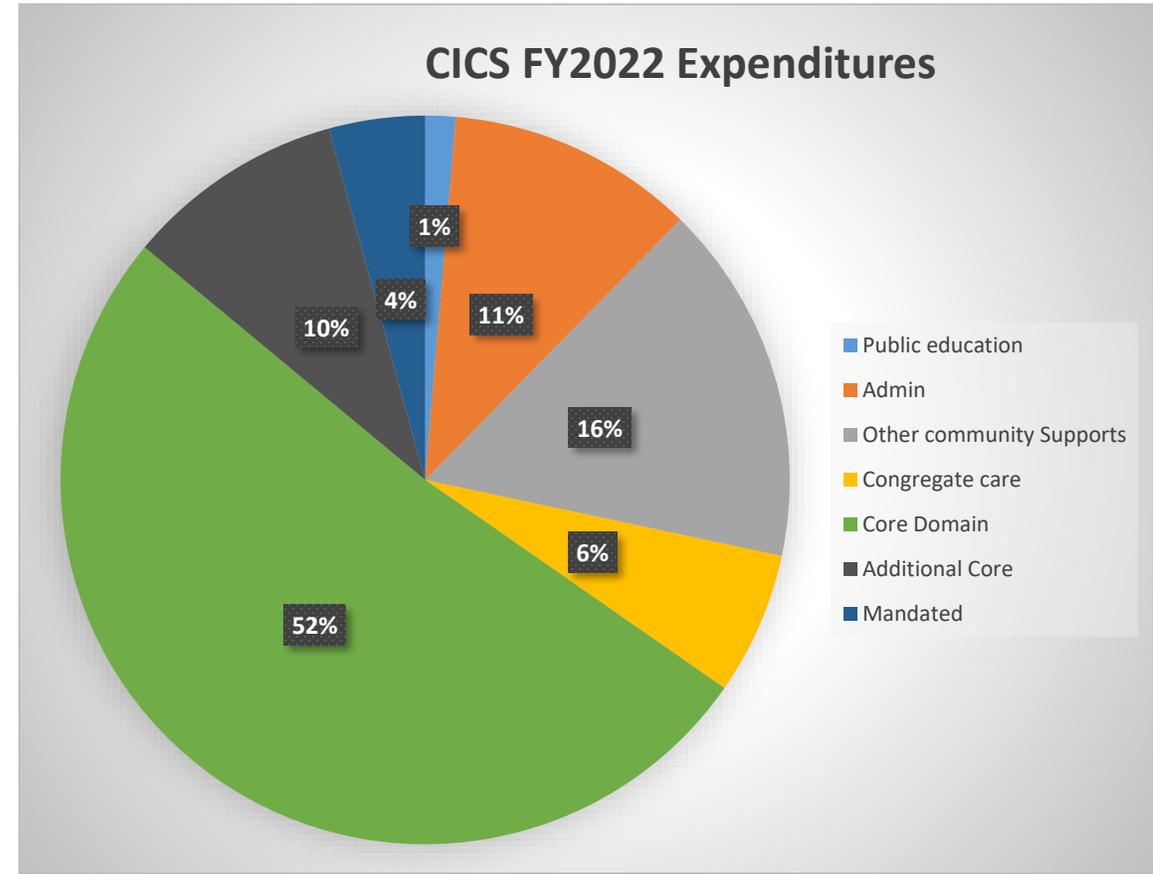
32321	Chore services						\$ -
32326	Guardian/conservator	\$ 300.00					\$ 300.00
32327	Representative payee	\$ 8,361.00	\$ 1,536.00				\$ 9,897.00
32335	CDAC						\$ -
32399	Other support						\$ -
33330	Mobile meals						\$ -
33340	Rent payments (time limited)	\$ 34,354.71	\$ 450.00				\$ 34,804.71
33345	Ongoing rent subsidy	\$ 770.00					\$ 770.00
33399	Other basic needs	\$ 30,123.37					\$ 30,123.37
41305	Physiological outpatient treatment	\$ 50.00					\$ 50.00
41306	Prescription meds	\$ 2,700.07					\$ 2,700.07
41307	In-home nursing						\$ -
41308	Health supplies						\$ -
41399	Other physiological treatment						\$ -
42309	Partial hospitalization						\$ -
42310	Transitional living program	\$ 44,023.20					\$ 44,023.20
42363	Day treatment						\$ -
42396	Community support programs	\$ 530.61					\$ 530.61
42399	Other psychotherapeutic treatment						\$ -
43399	Other non-crisis evaluation						\$ -
44304	Emergency care						\$ -
44399	Other crisis services						\$ -
45399	Other family & peer support						\$ -
46306	Psychiatric medications in jail	\$ 40,872.31					\$ 40,872.31
50361	Vocational skills training						\$ -
50365	Supported education						\$ -
50399	Other vocational & day services						\$ -
63XXX	RCF 1-5 beds (63314, 63315 & 63316)						\$ -
63XXX	ICF 1-5 beds (63317 & 63318)						\$ -
63329	SCL 1-5 beds						\$ -
63399	Other 1-5 beds						\$ -
	Community Living Supports	\$ 2,017,092.93	\$ 35,775.58	\$ 31,382.90	\$ 1,725.16		\$ 2,085,976.57
	Other Congregate Services						
50360	Work services (work activity/sheltered work)						\$ -
64XXX	RCF 6 and over beds (64314, 64315 & 64316)	\$ 647,111.06					\$ 647,111.06
64XXX	ICF 6 and over beds (64317 & 64318)	\$ 26,435.65					\$ 26,435.65
64329	SCL 6 and over beds	\$ 150,917.67					\$ 150,917.67
64399	Other 6 and over beds						\$ -
	Other Congregate Services Total	\$ 824,464.38					\$ 824,464.38
	Administration						
11XXX	Direct Administration					\$ 1,363,756.69	\$ 1,363,756.69
12XXX	Purchased Administration					\$ 67,985.64	\$ 67,985.64
	Administration Total	\$ -				\$ 1,431,742.33	\$ 1,431,742.33

	Regional Totals	\$ 10,845,965.70	\$ 343,532.00	\$ 319,112.60	\$ 86,083.76	\$ 1,431,742.33	\$ 13,026,436.39
	(45XX-XXX)County Provided Case Management						\$ -
	(46XX-XXX)County Provided Services						\$ -
	Regional Grand Total						\$ 13,026,436.39

Transfer Numbers and Acceptable Encumbrance (Expenditures should only be counted when final expenditure is made for services/administration). Transfers are eliminated from budget to show true regional finances. Accrual Fund Balance as of 6/30/22 shall exclude encumbered amounts.

13951	Distribution to MHDS regional fiscal agent from member county	\$ 11,604,935.54
14951	MHDS fiscal agent reimbursement to MHDS regional member county	\$ -
N/A	Accepted amount to be considered encumbered	\$ 7,182,900.00

** 24 hour crisis line and warm line are transitioning from additional core to state wide core services with state funding.



In FY2022 funding for core services accounted for 52% of CICS expenditures, additional core accounted for 10% of expenditures, and other community supports accounted for 16% of expenditures.

Table D. Revenues

FY 2022 Accrual	Central Iowa Community Services MHDS Region		
Revenues			
	FY21 Annual Report Ending Fund Balance		\$ 11,786,371
	Adjustment to 6/30/21 Fund Balance		\$ (124,075)
	Audited Ending Fund Balance as of 6/30/21 (Beginning FY22)		\$ 11,662,296
	Local/Regional Funds		\$ 10,265,613
10XX	Property Tax Levied	7,689,613	
12XX	Other County Taxes	8,059	
16XX	Utility Tax Replacement Excise Taxes	239,473	
25XX	Other Governmental Revenues	1,995,430	
4XXX-5XXX	Charges for Services	-	
5310	Client Fees	11,734	
60XX	Interest	20,353	
6XXX	Use of Money & Property	-	
8XXX	Miscellaneous	300,951	
9040	Other Budgetary Funds (Polk Transfer Only)	-	
	State Funds		\$ 7,499,385
21XX	State Tax Credits	374,633	
22XX	Other State Replacement Credits	166,851	
24XX	State/Federal pass thru Revenue	-	
2644	State Regional Service Payments	6,952,009	
29XX	Payment in Lieu of taxes	842	
92XXX	Other	5,050	
	Federal Funds		\$ -
2345	Medicaid	-	
	Other	-	
	Total Revenues		\$ 17,764,998

Total Funds Available for FY22	\$ 29,427,294
FY22 Actual Regional Expenditures	\$ 13,026,436
Acceptable Encumbrance	\$ 7,182,900
Accrual Fund Balance as of 6/30/22	\$ 9,217,958

D. Status of Service Development in FY2022

CICS worked with Eyerly Ball Community Mental Health Services to expand mobile crisis response and crisis stabilization community based services (CSCBS) to Webster and Wright Counties effective July 1, 2021, and also Kossuth, Winnebago, and Worth Counties in the Care Connections of Northern Iowa region. Access to telehealth medication management services through CSCBS is available to all these counties through Integrated Telehealth Partners.

CICS partnered with Mary Greeley Medical Center for the development of subacute services in Ames, IA; the service became available August 1, 2021, and has an eight-bed capacity.

CICS participated in meetings with 43 North Iowa, One Vision, Managed Care Organizations, and Home and Community Based Waiver Specialist regarding possible intensive residential service options. In April 2022, CICS let a Request for Proposal for intensive residential services, one proposal was received from 43 North Iowa. One Vision has determined they are unable to pursue this service at this time. CICS entered into a contract with 43 North Iowa for development of this service in Mason City, IA; the provider anticipates having this service available in Spring 2023 with the capacity to serve four individuals at a time. CICS intends to continue to work toward building capacity of this service.

CICS is entered into a multi-year contract with YSS for funding of up to \$10 million for the development of Ember Youth Recovery Campus near Cambridge, IA. YSS will have 70 beds available at this new location to provide crisis stabilization residential services, emergency shelter, and residential addiction treatment services for youth. CICS has been approved to encumber \$7,182,900 for this project, these funds shall be expended by June 30, 2023. YSS anticipates drawing down all the funds from CICS in February 2023 with the campus to open in the summer of 2023. If any encumbered funds are not expended by the end of FY2023, the remaining funds shall be included in CICS' FY2023 ending fund balance.

CICS took steps to add funding for Behavioral Health Intervention Services (BHIS) to the CICS Management Plan Policies and Procedures Services Matrix effective 7/1/22.

CICS partnered with Optima Life Services for expansion of supported community living services and medication management services in Warren County.

E. Outcomes/Regional Accomplishments in FY2022

This section includes:

- Service progress and availability of Core, Additional Core, Other Informational Services, Community Living Supports
- Region Program Outcomes
- Other Community Living Support Services
- Regional Collaboration with Providers, Stakeholders, and Regions

Service Progress and Availability of Core, Additional Core, Other Informational Services, and Community Living Supports

Core Services

Treatment

Mental Health Outpatient Therapy: CICS continues to consider Provider Network Enrollment Applications to expand outpatient mental health services within the region. CICS will also honor host region contracts for outpatient mental health services. CICS continues to make available a Licensed Independent Social Worker (LISW) incentive policy for onboarding and access for providers that hire or increase LISW hours in service areas of the region that have an identified need. CICS added Psychologist to this incentive and expanded the incentive to include tele-counseling services.

Medication Prescribing & Management: CICS continues to work to ensure this service is available throughout the CICS region. CICS continues to make available a Psychiatric Prescriber incentive policy for onboarding and access for providers that hire or expand existing psychiatric prescriber services in service areas of the region that have an identified need. CICS expanded this incentive to include telepsychiatry services.

Assessment & Evaluation: This service provided by Community Mental Health Centers (CMHCs) and providers is available in each county in the region.

Mental Health Inpatient Therapy (private/public hospital): CICS contracts with Mary Greeley Medical Center and MercyOne North Iowa Medical Center and will also honor host region contracts for inpatient behavioral health services.

Crisis Services

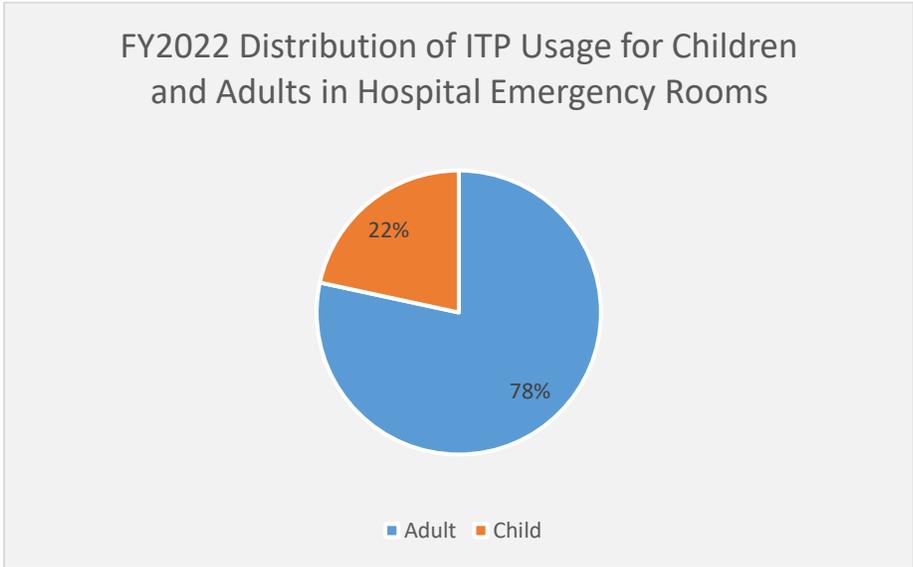
Personal Emergency Response System: Service options are available in CICS.

Crisis Evaluation: CICS continued to contract with Community Mental Health Centers and providers for a select number of crisis therapy and crisis psychiatric appointments to be held available by the CMHC or provider allowing for quicker access. CICS continued to guarantee payment for crisis therapy and crisis psychiatric appointments that were not filled and/or not billable through third-party payers.

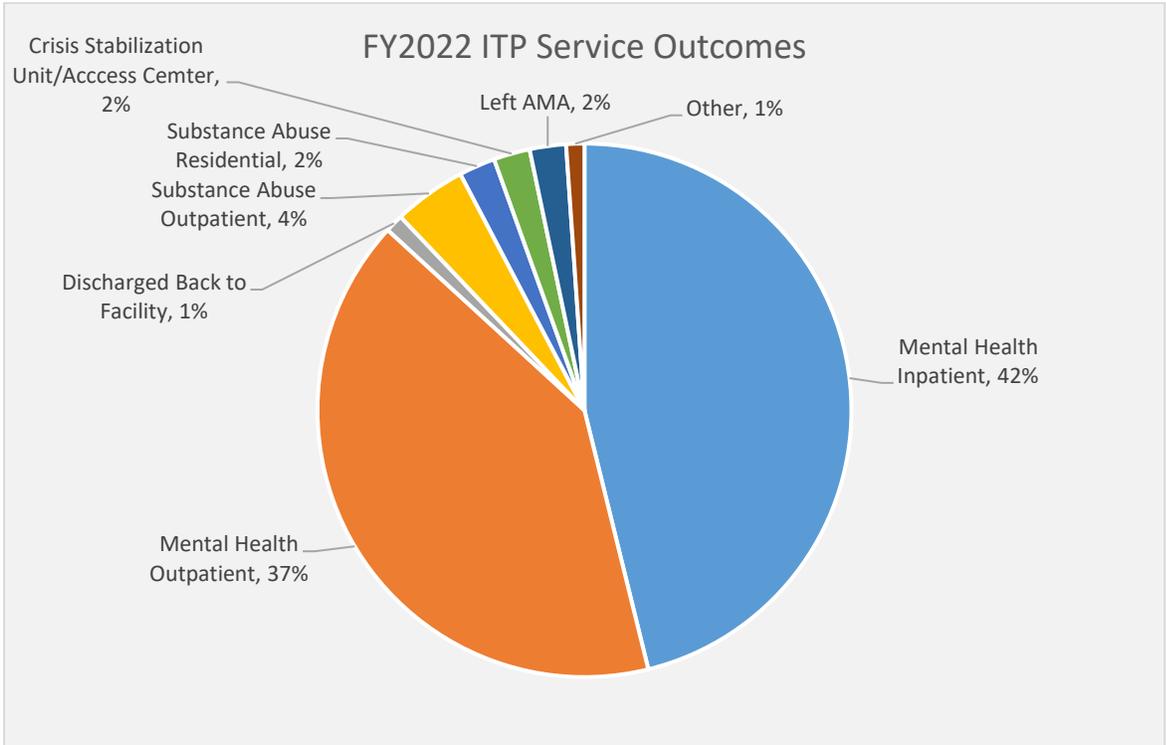
CICS continued to financially support access to telepsychiatry at participating local hospital emergency rooms with this service provided by Integrated Telehealth Partners (ITP). At the end of FY2022, ITP was operational in the following hospital emergency rooms located in the counties identified (Warren County does not have a hospital):

- Boone - Boone County Hospital
- Franklin - Franklin General Hospital
- Greene - Greene County Medical Center
- Hamilton - Van Diest Medical Center
- Hancock – Hancock County Health System
- Jasper – MercyOne Newton Medical Center

- Madison - Madison County Health Care System
- Hardin - Hansen Family Hospital
- Marshall - UnityPoint Health – Marshalltown Hospital
- Poweshiek - Grinnell Regional Medical Center
- Story - Story County Medical Center
- Webster – UnityPoint Health – Trinity Medical Center
- Wright – Iowa Specialty Hospital – Belmond
- Wright – Iowa Specialty Hospital – Clarion



Within the CICS region ITP had a total of 2,588 cases in hospital emergency rooms. The chart (left) reflects the utilization of ITP services for children and adults and the chart below reflects the service outcome for individuals.



23 Hour Crisis Observation and Holding: On the fourth quarterly report Mary Greeley Medical Center (MGMC) was identified as a provider for 23 hour crisis observation and holding services; MercyOne North Iowa Medical Center and Zion Integrated Behavioral Health Services/Safe Harbor were and continue to be providers of this service and Mary Greeley Medical Center no longer has this service available.

24 Hour Access to Crisis Response Services: The CMHCs have trained health professionals available by phone 24 hours per day, as well as walk-in access during business hours. Toward the end of FY2022, CICS implemented funding for two crisis therapy appointments for any resident within the CICS region, waiving application requirements as well as income and resource criteria for a limited time.

Mobile Response: Eyerly Ball Community Mental Health Services provides this service throughout the CICS region, serving children and adults. Eyerly Ball CMHS provides case management follow-up within 24 hours of the service being dispatched and continues to provide case management for up to 30 days. Mobile response services are accessed by calling the Your Life Iowa Crisis Line answered by Foundation 2 Crisis Services. Foundation 2 Crisis Services triages the call and dispatches the mobile response team when determined appropriate.

Crisis Stabilization Community Based Services: Eyerly Ball Community Mental Health Services provides this service in all CICS counties and Integrated Telehealth Partners provides telepsychiatry services as needed for individuals accessing crisis stabilization community based services.

Crisis Stabilization Residential Services: For adult crisis stabilization residential services (CSRS), CICS has a Memorandum of Understanding (MOU) with County Rural Offices of Social Services, County Social Services, MH/DS of the East Central Region, and Heart of Iowa Community Services to honor the host region's contract with the CSRS provider. CICS has a contract with Plains Area Mental Health Center to access adult CSRS located in the Rolling Hills Community Services region. CICS contracts with YSS and Youth Shelter Care of North Central Iowa, Inc. for youth crisis stabilization residential services.

Support for Community Living

Home Health Aid: Service options are available in CICS.

Respite: Service options are available in CICS.

Home and Vehicle Modifications: Service options are available in CICS.

Supported Community Living: Supported community living (SCL) services are available in each county in the CICS region.

Intensive Residential Services: CICS is currently working with 43 North Iowa for the development of this service.

Support for Employment

Prevocational Services: Service options are available in CICS.

Day Habilitation: Service options are available in CICS.

Job Development, Supported Employment: Service options are available in each county in the CICS region.

Group Supported Employment – Enclave: Service options are available in CICS.

Recovery Services

Family Support and Peer Support: Family support and peer support are available with Integrated Health Home providers. Peer support is also available with Central Iowa Recovery and some drop-in centers. CICS continues to encourage employment of peer and/or family support specialists.

Service Coordination

Case Management: Case management is available through Iowa Department of Human Services and Managed Care Organizations.

Health Homes: This service continues to be available in each county in CICS.

Subacute Services

Subacute services 1-5 beds and 6 and over: This service is available through Mary Greeley Medical Center. CICS also has a MOU with County Rural Offices of Social Services and County Social Services to honor the host region's contract with two subacute providers, CICS did not have to use these two providers during FY2022.

Core Evidence Based Treatment

Education and Training Services – provider competency: CICS offered training in Trauma 101 and Recovery, Mental Health First Aid, Juvenile Mental Health First Aid, and C3 De-escalation. Community Mental Health Center (CMHC) Federal Block Grant funding has been used in a variety of ways by CMHCs for evidence based training and therapy practices such as: Eye Movement Desensitization Reprocessing (EMDR) training for therapists for adults and children, Mental Health First Aid (MHFA), Youth Mental Health First Aid, Question, Persuade, and Refer (QPR), and SafeTALK. Additionally, providers offer integrated treatment of co-occurring substance abuse and mental health disorders, positive behavioral supports (PBS), cognitive based therapy (CBT), EMDR, NAVIGATE (RESTORE), Motivational Interviewing, Systems Training for Emotional Predictability and Problem Solving (STEPPS), play therapy, Dialectical Behavior Therapy (DBT), Parent Child Interaction Therapy (PCIT) and WRAP.

Supported Housing: The Bridge Home in Story County is offering permanent supportive housing services in Boone, Story, and Marshall counties. CICS intends to let a Request for Proposal in FY2023 for regionwide permanent supportive housing services.

Assertive Community Treatment (ACT): This service is available in Hamilton and Webster counties through UnityPoint Health - Berryhill Center and in Story and Boone counties through Eyerly Ball Community Mental Health Services. Prairie Ridge Integrated Behavioral Health Services began providing this service in Cerro Gordo, Franklin, and Hancock counties in FY2022. CICS continues to explore implementation of ACT in additional CICS counties.

Family Psychoeducation: CICS continues to contract and collaborate with NAMI Central Iowa for outreach in the region, for guidance in the development of support groups, and educational opportunities.

Additional Core Services

Justice Involved Services

Coordination Services: Justice Coordination/Jail Diversion services have been implemented in all CICS counties. During FY2022, this service was provided in nine counties by a CICS Justice Involved Service Coordinator and in seven counties through four different contracted provider agencies.

24 hour Crisis Line: CICS began using the Your Life Iowa Crisis Line (855-581-8111) in January 2020 as this became the statewide crisis line. Any calls received on the CICS Crisis Line are rolled over to the Your Life Iowa Crisis Line. Additional communication options for crisis support are available for individuals to chat one-to-one online at yourlifeiowa.org or by texting 855-895-8398.

Warm Line: Abbe Center for Community Mental Health, Inc. provides warm line services (1-844-775-9276) throughout the CICS region.

Mental Health Services in the Jails: CICS fully funds telepsychiatry services with ITP in nine county jails, including Boone, Greene, Hamilton, Hardin, Jasper, Madison, Poweshiek, Story, and Wright. Center Associates provides telehealth services to the Marshall County Jail, in-person services are available in the Cerro Gordo County jail through Iowa Family Health Care PLC and Community Health Center of Fort Dodge in the Webster County jail. In FY2022 Hancock, Warren, and Franklin counties did not have jails; since the close of FY2022, Warren County has opened a new jail and CICS provided coordination of therapy services to be available upon opening. CICS funding is available for therapy evaluations and individual and group therapy for individuals with a mental health or co-occurring substance use diagnosis. Service Coordination staff are available to each jail to assist with referrals for telepsychiatry, therapy services, jail diversion services, and other services/resource supports.

Crisis Prevention Training: CICS funded for an officer to attend CIT training in Minnesota in FY2022, this officer also completed CIT train the trainer training in FY2023. CICS is partnering with other MHDS regions to offer Crisis Intervention Training (CIT) through SolutionPoint+, training occurred at Iowa Law Enforcement Academy in FY2022, and further trainings will occur in FY2023 within the CICS region. CICS will provide reimbursement to employers of law enforcement for reserve officer costs, mileage, lodging, and food costs associated with an officer attending in-state Crisis Intervention Training. CICS supports Mental Health First Aid training for law enforcement as well.

Mental Health Court Related Costs: This service is not currently available. CICS staff participated in the Summit on Iowa Courts' Response to Mental Illness and are collaborating with stakeholders to explore development of a mental health court in Story County. CICS also has had initial conversations with interested individuals from Marshall County regarding mental health court.

Civil Commitment Prescreening Evaluation: ITP provides prescreening services in emergency rooms of hospitals contracted with ITP.

Additional Core Evidence Based Treatment

Peer self-help drop-in centers: This service is available in 11 CICS counties.

Intensive Psychiatric Rehabilitation (IPR): This service is available in each county in CICS.

Other Informational Services

Information & Referral: The CICS website can be found at www.cicsmhds.org. CICS also has a Facebook and Instagram page and works with Trilix Marketing Group for media announcements. These media outlets are avenues to inform others about CICS, how CICS can assist individuals, and services and resources available in the CICS Region. Service Coordination staff offer assistance with information and referrals; see Service Coordination under Region Program Outcomes for additional information.

Public Education: CICS supports involvement with Mental Health Expos and other mental health awareness events. Providing these opportunities assists individuals to achieve wellness through health education. CICS contracts with Community Mental Health Centers and other providers for public education services.

In FY2022, CICS offered and collaborated with other trainers to provide training in: Trauma 101 & Recovery, Mental Health First Aid USA (MHFA)/Adult, Juvenile Mental Health First Aid, and C3 De-escalation. Trainings have been provided to regional staff, MHDS providers, school systems, public health, nursing students, county employees, and the general public.

Community Living Support Services

Services Management: See Region Program Outcomes section.

Transportation: CICS contracts with Central Iowa Juvenile Detention Center (CIJDC) and Mary Greeley Medical Center (MGMC) for transportation services for Civil Mental Health Commitment transports when requested by the Sheriff's Office. This offers the ability for law enforcement to return to other duties more expediently. CIJDC also assists with voluntary transports to and from crisis stabilization residential services, voluntary hospitalization, subacute mental health services, and discharge needs, as well as other transportation needs receiving prior funding authorization by CICS. CICS contracts with MGMC for voluntary transport services for individuals who are located at MGMC and need transport assistance to other inpatient behavioral health services, subacute mental health services or crisis stabilization residential services. CICS contracts with public transit providers and other providers for transportation services as well.

Guardianship: Service Coordination staff can assist individuals in obtaining information regarding guardianship options.

Representative Payee: Individuals accessing CICS funding prior to 1/1/21 for representative payee services continue to receive funding if the individual meets all other eligibility criteria and the representative payee service continues uninterrupted.

Rent Payments: CICS offers time limited assistance with rent and utilities as well as longer term assistance for individuals receiving SCL services on a daily basis. Rent and utility assistance can be helpful when individuals are going through the application process for SSI/SSDI benefits and/or seeking employment.

Other Basic Needs: CICS funds RCF maintenance costs.

Physiological Outpatient Treatment: This includes medication injection services as well as medical clearance with access center services.

Transitional Living Center Services: Mary Greeley Medical Center provided transitional living center services as fee-for-service until subacute services became available.

Community Support Programs: CICS funds this service with Community Mental Health Centers.

Psychiatric Medications in Jail: CICS continues to reimburse county jails for the cost of inmate prescribed psychotropic medications on ITP's medication formulary.

Region Program Outcomes

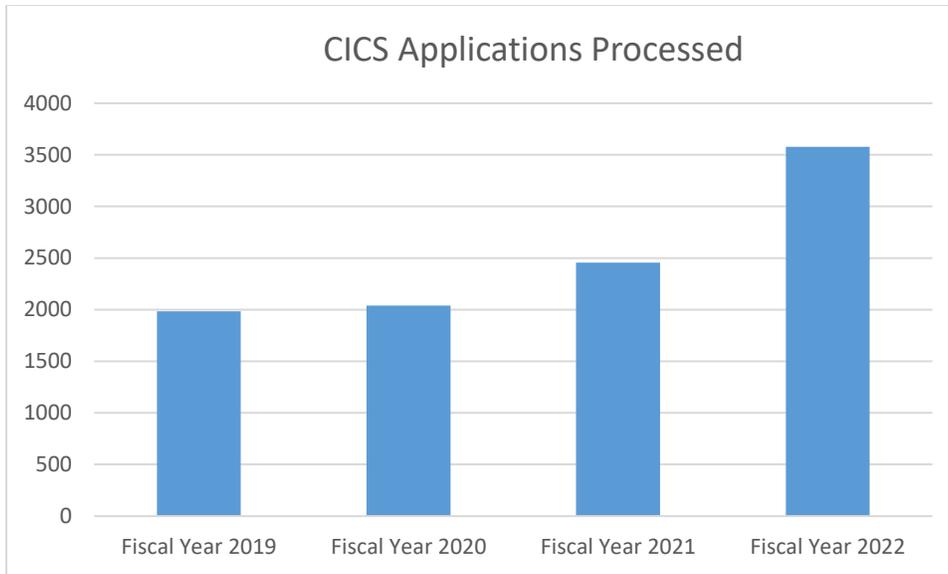
The following section provides information on:

- *Service Coordination*
- *Medicaid Waiting List funding*
- *Special Project Grant funding*
- *Single Employer of Record*

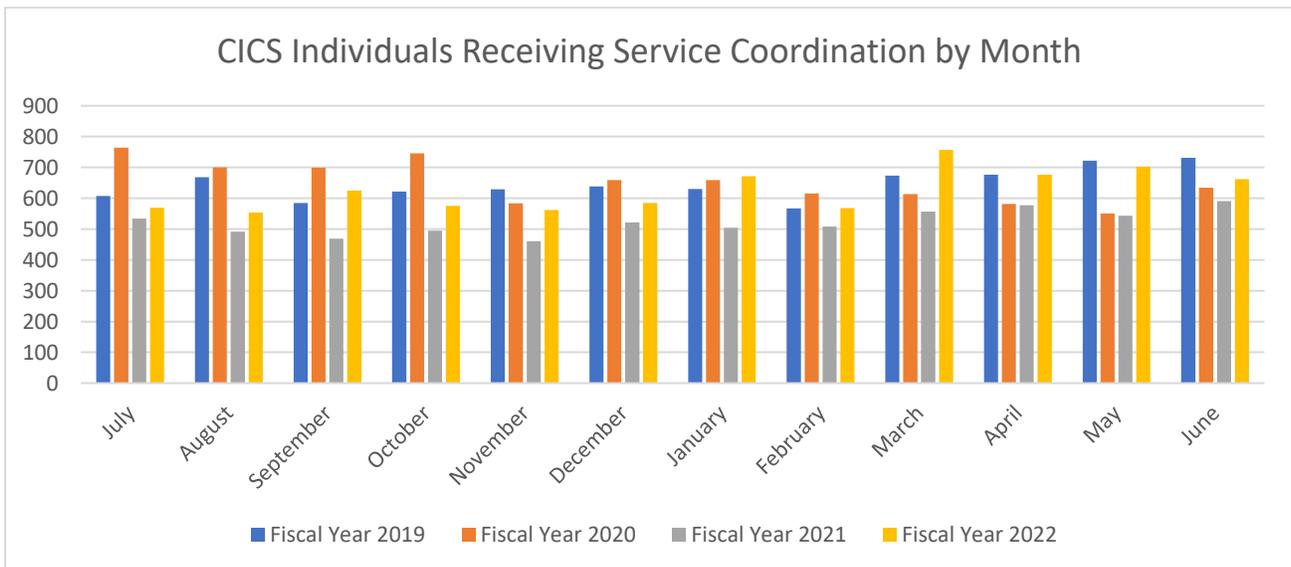
Service Coordination

In FY2022 CICS Service Coordination responsibilities were expanded and realigned. The changes include the addition of four new service coordination staff with Cerro Gordo, Hancock, Webster, and Wright counties joining CICS; creation of three Justice Involved Service (JIS) Coordinator positions; creation of two Service Coordination Supervisor positions to assist with the day-to-day operations and supervision of local service coordination staff; and the reassignment of Service Coordination responsibilities to existing service coordination staff when the Service Coordination Specialist accepted the position of Program Manager. CICS has two Children's Behavioral Health Specialists with at least one service coordinator in each county designated as the Adult Coordinator of Disability Services. At the close of FY2022 CICS has 18 staff working in service coordination.

Service coordination is essential in connecting individuals with mental health and developmental disabilities and/or co-occurring diagnoses to resources, services, and supports. In FY2022, 3,578 applications were processed; this is a 46% increase from 2,455 applications in FY2021. The substantial increase in applications can primarily be attributed to the addition of the four new counties to CICS at the beginning of FY2022. The new counties contributed 1,114 applications in FY2022 of the total increase of 1,123 from the previous year.

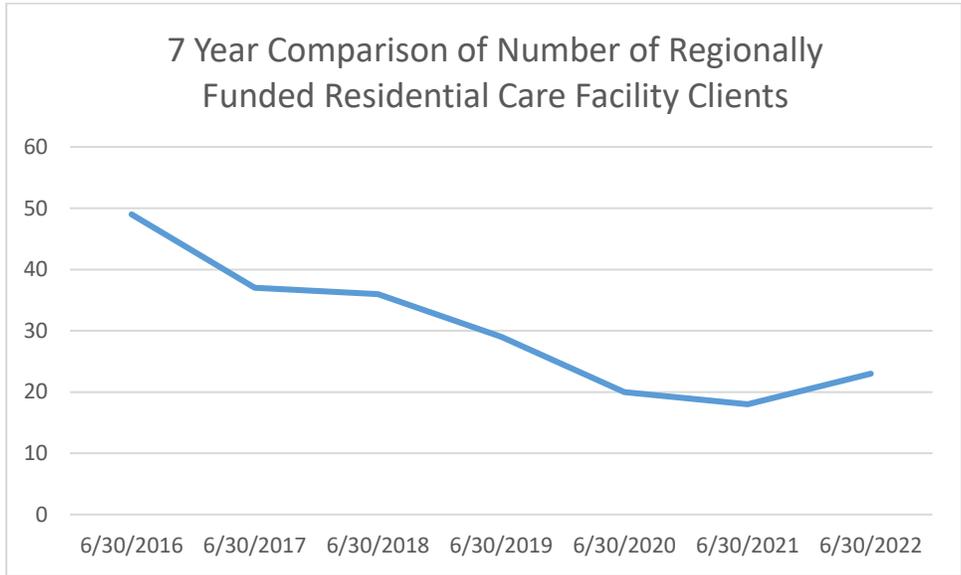


CICS tracks how many individuals are served each month; the number of individuals truly served by service coordination is much greater than the number of applications received and processed. In addition to tracking applications received, CICS also tracks contact with ongoing clients, collateral contact with provider agencies, contact with family members and other interested parties, email correspondence regarding ongoing clients, and other activities on behalf of those we serve. In FY2022, CICS served an average of 626 individuals monthly. The FY2022 individuals served monthly was a 20% increase from FY2021 with an average of 523 individuals monthly.

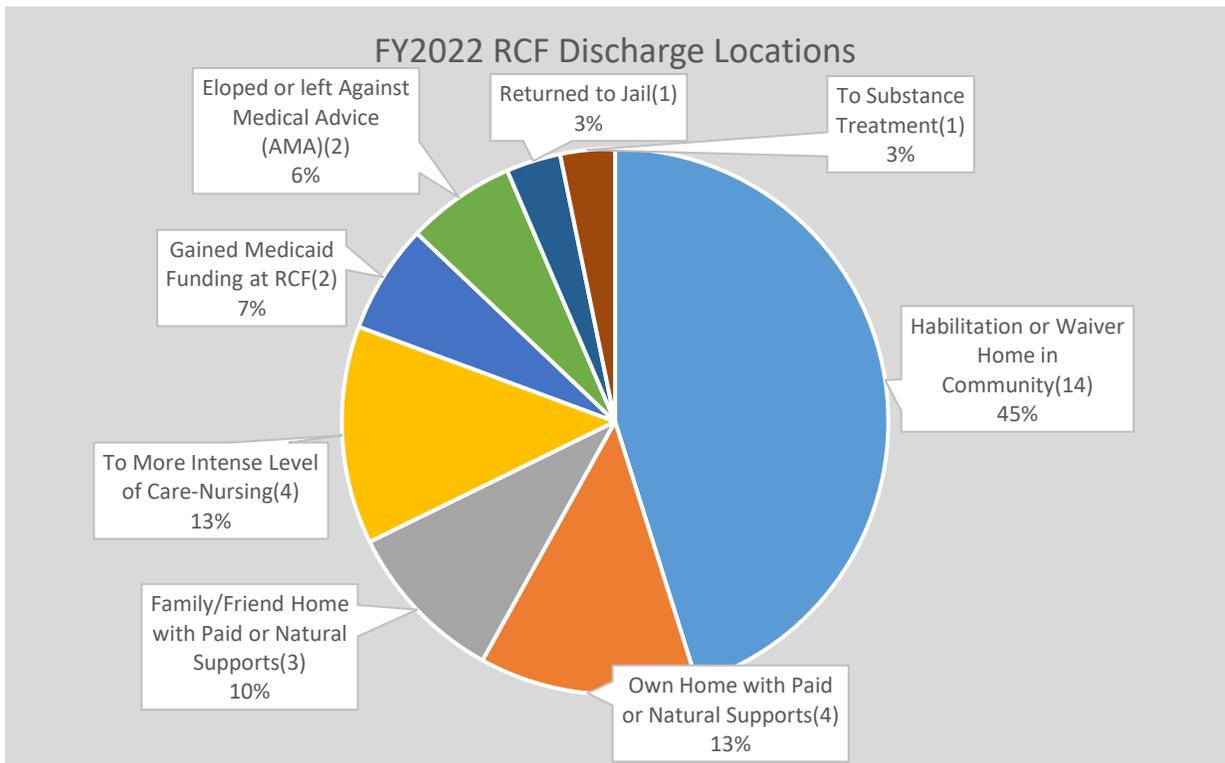


A primary service goal of CICS is to serve individuals in community-based settings rather than institutional settings. Strategies to reduce the number of individuals at Residential Care Facilities (RCFs) have included working to reduce the number of admissions to RCFs, identifying RCF providers who have shown a willingness to stabilize and assist in community placement, focusing on a targeted list of individuals appropriate to move to a lower level of care, and building a base of community providers willing to work with individuals discharging from RCFs. Efforts have also been strengthened to look at alternative services, such as subacute,

crisis stabilization, and transitional living to help an individual stabilize and return to their home. With the addition of four new counties to CICS, the region absorbed 17 individuals that were already in RCF placement, this brought the total number of individuals in RCFs to 35 at the start of FY2022, this is shown in the chart below. During FY2022 there were 19 additional admissions to RCFs and 31 discharges, resulting in a net reduction of 12. There were 23 individuals being funded in RCFs as of the close of FY2022.



Many of the individuals discharging from RCFs continue to need ongoing support. After a short time of stabilization in the RCF, individuals are able to discharge into community-based services. The below chart reflects discharge locations.



With the addition of four new counties to CICS, the region absorbed three individuals that were already in placement at the Mental Health Institutions (MHIs), this brought the total number of individuals in MHIs to four at the start of FY2022. During FY2022 there were five additional admissions to MHIs and six discharges, resulting in three individuals at MHI at the close of FY2022, and a net increase from the previous year.

CICS utilizes the Level of Care Utilization System (LOCUS) assessment tool to assist in determining level of care and needed services for individuals with a mental illness diagnosis. Additionally, the Inventory for Client and Agency Planning (ICAP) assessment tool for individuals with Intellectual Disabilities (ID) and Development Disabilities (DD) is used. The Assessment Team assesses individuals when RCF or ongoing regionally funded services are needed or requested. An updated LOCUS is needed annually while an ICAP is good for three years. A standardized assessment is not required for those not needing ongoing regional funding (considered “gap” funding). In FY2022, 64 assessments were completed in comparison to 115 completed in FY2021. The number of assessments were lower due to the reduced number of individuals in RCF care, staff changes, utilization of assessments done by other entities (MCO), and changes in the requirements for completion of assessments.

Medicaid Waiting List Funding

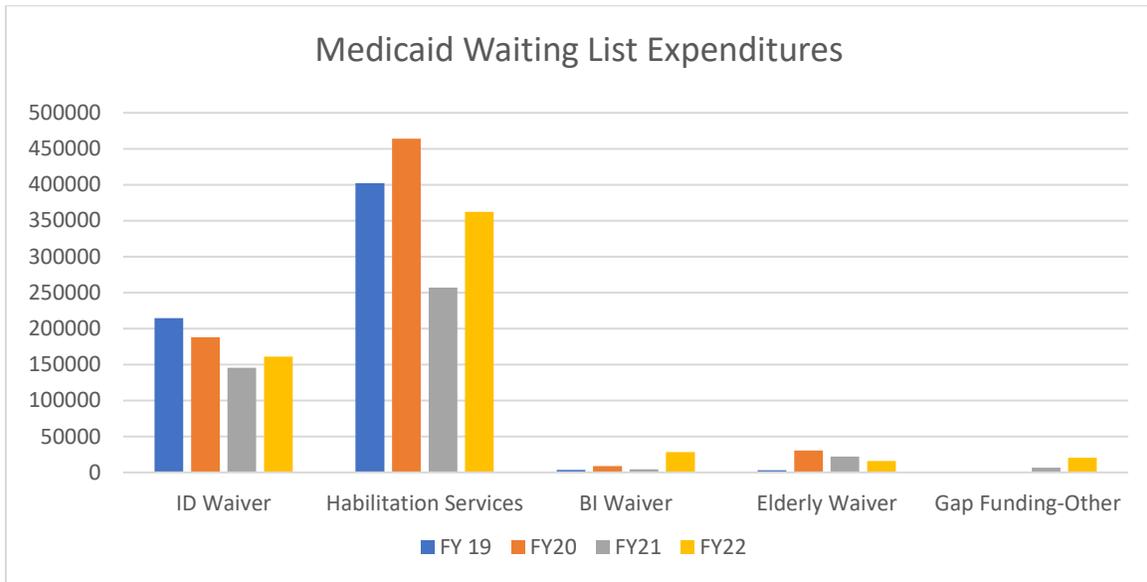
During FY2017, CICS began tracking Medicaid gap funding. CICS funded 106 individuals in FY2022 that were waiting for Medicaid funding. This is compared to 84 in FY2021 and 141 in FY2020. Individuals funded for this purpose dipped significantly for FY2021, as it did for overall individuals served, primarily due to issues related to the COVID-19 pandemic. According to the Iowa Code, MHDS Regions are not required to fund individuals that are on a Medicaid waiting list. However, CICS implemented a policy to fund necessary services for individuals while they are waiting for Medicaid funding.

CICS expenditures for services that should be Medicaid funded for FY2022 were \$588,064.54, a significant increase of \$152,484 (35%) over the FY2021 total of \$435,580.30. The funding streams for which individuals may be waiting include Intellectual Disability (ID) Waiver, Health and Disability (H&D) Waiver, Habilitation Services, Elderly Waiver, Physical Disability (PD) Waiver, and Brain Injury (BI) Waiver. Other Gap Funding category is for those waiting for straight Medicaid funding for services such as outpatient, ACT, and IPR. The below table reflects the total amount paid and number of individuals funded for FY2020, FY2021, and FY2022.

Medicaid Waiting List Information

Waiver	FY2020		FY2021		FY2022	
	Persons Funded	Amount Paid	Persons Funded	Amount Paid	Persons Funded	Amount Paid
BI Waiver	2	\$8,720.40	1	\$4,620.00	3	\$28,470.62
Elderly Waiver	10	\$30,434.65	6	\$22,049.07	6	\$16,029.28
Habilitation Services	97	\$464,088.05	45	\$256,847.41	53	\$362,162.90
ID Waiver	29	\$187,770.97	23	\$145,422.29	27	\$161,002.10
H&D Waiver	1	\$410.90	1	\$117.76	0	\$0
PD Waiver	2	\$413.70	0	\$0	0	\$0
Other Gap	0	\$0	8	6,523.77	17	\$20,399.64
Total	141	\$691,838.67	84	\$435,580.30	106	\$588,064.54

The chart below reflects the services and dollars expended in FY2019, FY2020, FY2021, and FY2022 for individuals waiting for Medicaid program eligibility.



Special Project Grants

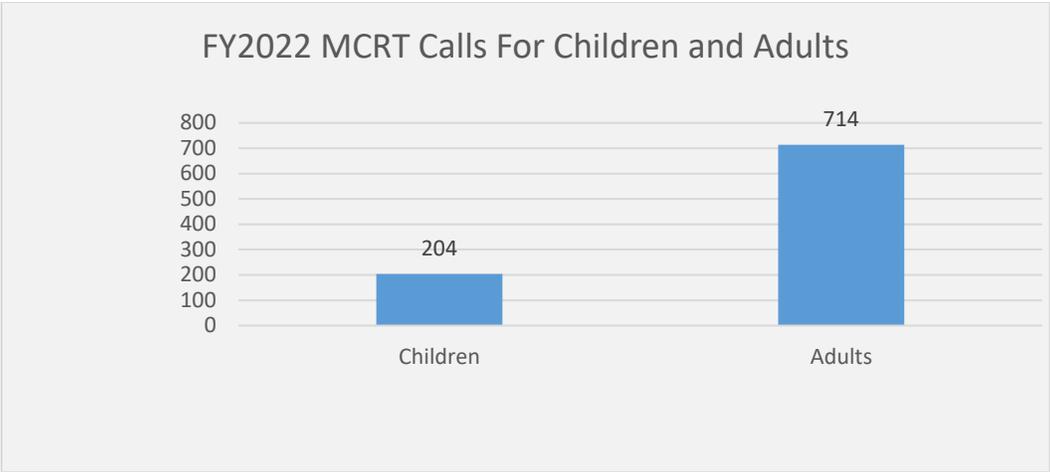
CICS has used special project block grant funding for a variety of reasons, such as program start up, service sustainability, service access, and availability.

Mason City Police Department HealthIM

In late FY2022, CICS entered into a memorandum of understanding with Mason City Police Department for the purchase of the HealthIM system, this funding was a one-time payment by CICS; the CICS MOU with the police department is through June 30, 2027. HealthIM is a digital crisis response system for first responders, consisting of four components: pre-response safety briefing, mental health risk screener, inter-agency communication, and reporting and analytics. CICS intends to evaluate the effectiveness of HealthIM and the potential for expanding utilization of this system within the region.

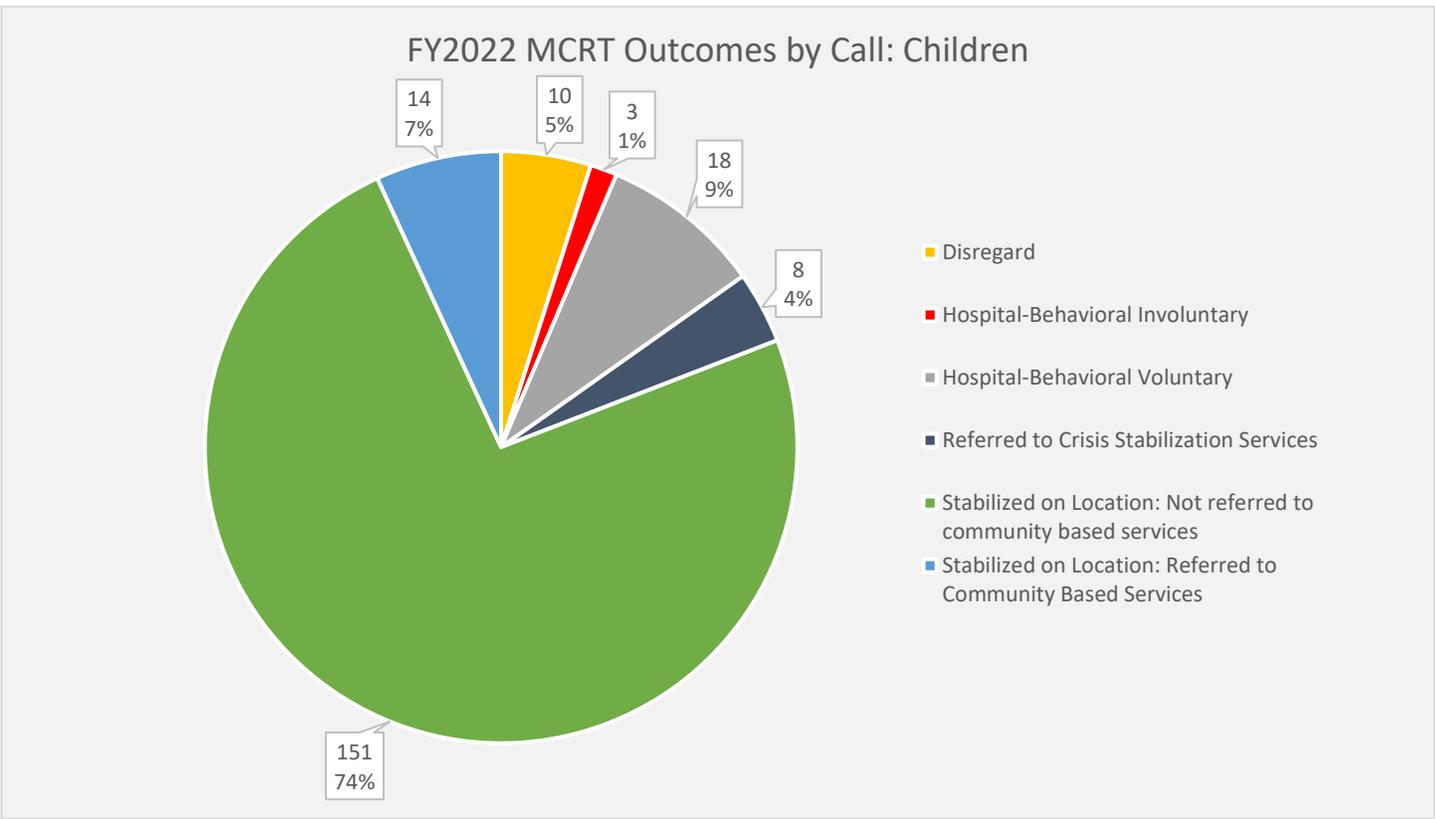
Mobile Crisis Response

Mobile Crisis Response services are provided by Eyerly Ball Community Mental Health Services for the entire CICS Region. Due to the geographic area, mobile crisis response teams (MCRT) are grouped by service areas and six teams serve the CICS region. The number of calls during FY2022 ranged from 69 to 100 per month regionwide, with 980 total number MCRT calls.

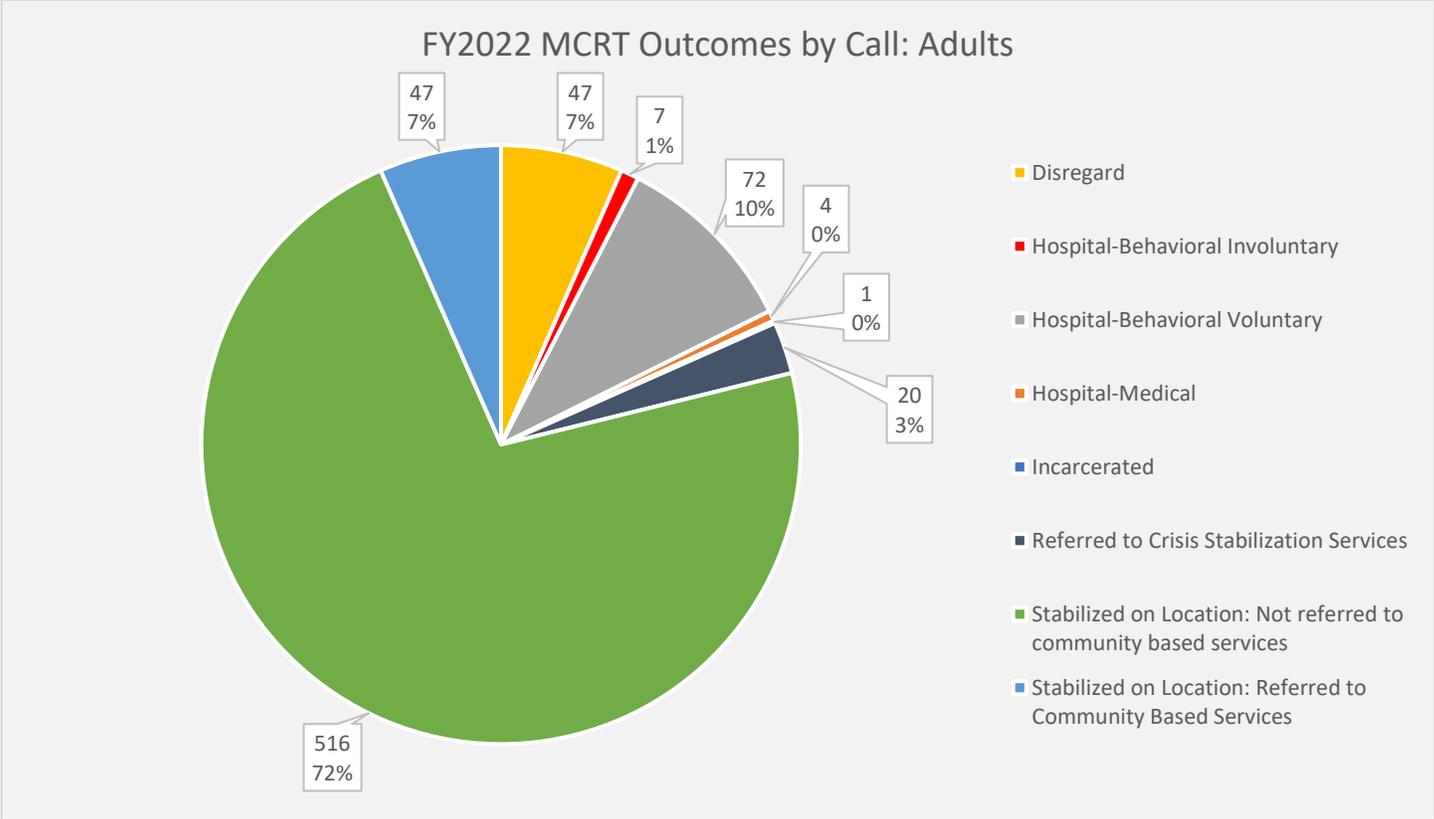


The chart (left) reflects MCRT call distribution for children and adults and the below charts reflect outcome of MCRT calls for children and adults.

Twenty percent of MCRT calls were for children and 78% of calls were for adults.



Eighty-one percent of MCRT calls for children resulted in the child being able to be stabilized on location, 7% of those calls resulted in a referral to community-based services.

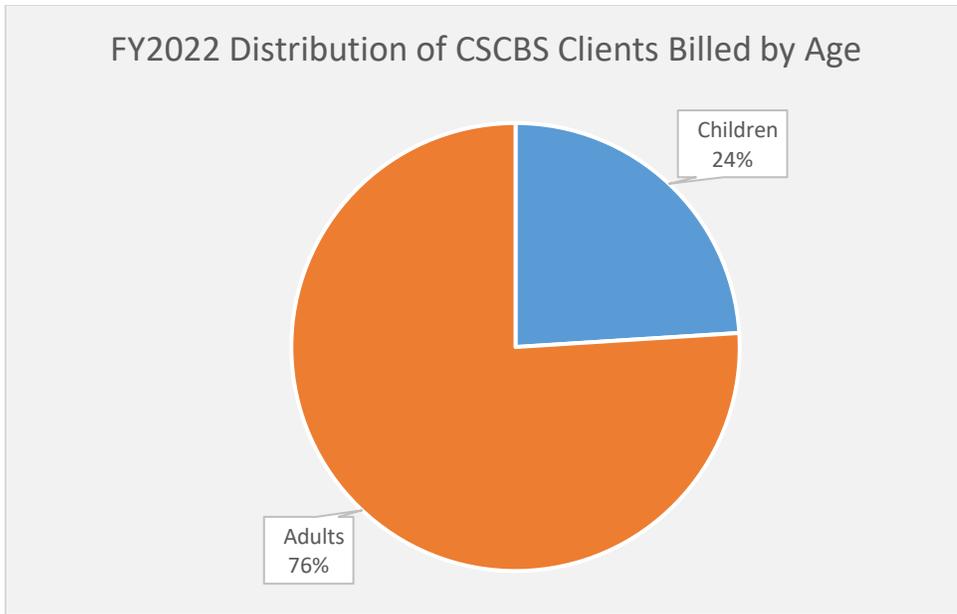


Seventy-nine percent of MCRT calls for adults resulted in the adult being able to be stabilized on location, 7% of those calls resulted in a referral to community-based services.

Mobile Crisis Response services can be requested by calling the Your Life Iowa Crisis Line. According to FY2022 outcome data, eighty-six percent of calls were responded to within 60 minutes of dispatch.

Crisis Stabilization Community Based Services

Eyerly Ball Community Mental Health Services provides crisis stabilization community based services (CSCBS) for the entire CICS region with Integrated Telehealth Partners providing telepsychiatry services for individuals accessing CSCBS. Eyerly Ball CMHS received 38 referrals for CSCBS. The maximum time from CSCBS referral to face-to-face contact was 105 minutes with an overall average of 36 minutes.



The chart (left) reflects of the total clients billed for CSCBS, 24% were children and 76% were adults.

Drop-In Centers

CICS funds drop-in centers at a monthly contracted amount based on each drop-in center’s service budget. CICS allocates costs to members served when possible. Funding drop-in centers in this manner helps to ensure sustainability of the drop-in centers as the service is not billable to Medicaid.

Single Employer of Record

CICS Governing Board revised the CICS 28E Agreement to allow for the option of a single employer of record. A request for proposal for a single employer of record was let to current member counties. Franklin County submitted a proposal and after negotiation, CICS and Franklin County entered into a 28E Agreement with Franklin County as the “Single Employer of Record” for all CICS staff performing duties of the Region effective July 1, 2022. CICS staff and member counties worked diligently in FY2022 to prepare for the transition of 29 staff to the new structure.

Regional Collaboration with Providers, Stakeholders, and Regions

The following section describes regional collaborative efforts with others.

Regional Collaboration with Department of Human Services (DHS) and Managed Care Organizations (MCOs)

The CEO Collaborative meets with DHS monthly to discuss relevant topics and initiatives. The CEO Collaborative also meets with MCOs every other month to discuss important topics and current initiatives.

Data Analytics

MHDS regions meet monthly to work on a standardized approach for data informed decision making and outcomes development. Membership includes representatives from regions across the state. Patti Treibel Leeds, Meghan Freie, and Russell Wood, who served as chair until February 2022, represent CICS.

Adult Advisory Committee

The CICS Adult Advisory Committee is an advisory stakeholders' group that provides for broad representation. In FY2022 the Committee membership was reformatted to include 10 adult service providers and 10 individuals who utilize mental health and disability services or is an actively involved relative of such an individual, and two Governing Board Directors. Representation is regionwide with a focus to try and have representation from each CICS member county. Two committee members are appointed to the CICS Governing Board: provider representative ex-officio non-voting Director and individual who utilizes mental health and disability services or is an actively involved relative of such an individual voting Director. The Adult Advisory Committee met on five occasions during the fiscal year; the following is a summary of those meetings:

Meeting date: July 13, 2021. Ten committee members present. Governing Board meeting updates; discussion and review of Senate File 619; agency update/information sharing.

Meeting date: October 12, 2021. Nine committee members present. Meeting content: Governing Board meeting updates; Advisory Committee terms ending 12/31/21; performance-based contracting; evidence based practices; FY2021 service coordination report; agency update/information sharing.

Meeting date: January 11, 2022. Eleven committee members present. Meeting content: election of chair and vice-chair; review of bylaws for CICS Adult Advisory Committee; Governing Board meeting updates; 2021 Advisory Committee Report; discussion and direction of Adult Advisory Committee structure; appointment of Adult Advisory Subcommittee; agency update/information sharing.

Meeting date: April 12, 2022. Ten committee members present. Meeting content: election of an individual who utilizes mental health and disability services or is an actively involved relative of such an individual to the CICS Board for two year term; Governing Board meeting updates; Adult Advisory Subcommittee recommendations; review and consideration of amendments to bylaws of Adult Advisory Committee; review and discussion of CICS Management Plan Policies and Procedures amendments; service planning and development update; legislative update; agency update/information sharing.

Meeting date: June 14, 2022. Eight committee members present. Meeting content: election of an individual who utilizes mental health and disability services or is an actively involved relative of such an individual to the CICS Board for two-year term; Governing Board meeting updates; regional update and fiscal year changes; legislative update; service planning and development update; advisory committee vacancies; local community needs; agency update/information sharing.

Children's Behavioral Health Advisory Committee

This committee is formed with representation across the CICS region; two committee meetings were held in FY2022. Three committee members are appointed to the CICS Governing Board: Children's Behavioral Health Service Provider ex-officio non-voting Director, the Education System voting Director, and Parent/Actively Involved Relative of a Child who Utilizes Children's Behavioral Health Services voting Director. Please see below for a summary of the Children's Behavioral Health Advisory Committee meetings:

Meeting date: October 6, 2021. Eight committee members present. Meeting content: new counties that joined CICS; YSS Youth Recovery Campus; performance-based contracting; evidence based practices.

Meeting date: April 6, 2022. Ten committee members present. Meeting content: children's behavioral health coordinators; children crisis stabilization residential services; System of Care Grants; BHIS; Therapeutic Classroom; CICS Management Plan Policies and Procedures amendments.

Provider Meetings:

CICS met with various provider groups at least quarterly.

CEO Collaborative meetings:

The Regional CEOs meet at least monthly to discuss and resolve statewide issues. Members are appointed to taskforce groups to meet with representatives from MCOs on topics such as funding for crisis services, solutions for individuals with complex needs, and outcomes projects.

Mental Health and Disabilities Services Commission:

CICS attends monthly meetings of the MHDS Commission; Russell Wood was reappointed by the Governor to serve on the MHDS Commission and as chair.

Iowa Community Services Association (ICSA) meetings:

The ICSA Board of Directors represent county Community Services offices for the purpose of promoting progressive county government administration. Karla Webb and Betsy Stursma serve on this Board.

Legislative Review Committee:

The purpose of the Legislative Review Committee is to make recommendations on priorities for legislative action and to review legislation regarding the effect on counties. Karla Webb and Russell Wood, who serves as chair, are representatives of this committee.

Iowa Counties Technology Services (ICTS) Operations Committee:

Betsy Stursma and Lisa Hill from CICS are representatives on this committee.

Regional Collaborations:

Due to the fact that CICS is located within the center of Iowa, we work with many regional groups on partnering and planning for services.

Local Collaborations:

CICS encourages collaboration through local MHDS advisory boards, other social services agencies, and law enforcement entities including:

- Homeless coordinating boards
- Local providers
- AEA transition advisory board
- DHS transition committees
- Department of Correctional Services advisory board
- Integrated health home agencies

- Mental health interdisciplinary team
- Mental health task force
- Criminal justice task force
- Opioid task force
- Human services providers
- ASSET – Analysis of Social Services Evaluation Team
- Public health departments
- Public libraries
- Ministerial Association
- City councils
- Local hospitals
- Public schools
- Public and private colleges
- Learning community
- Wellness coalition
- Regional Housing Authority
- Substance use task force
- Transportation boards
- Sheriff offices, county jails, and community law enforcement agencies

Please visit the CICS website www.cicsmhds.org for updates on service development and activities occurring within CICS.

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