

LOCATION: Zoom Meeting
TIME: 9:30 a.m. – 11:15 a.m.

MHDS COMMISSION MEMBERS PRESENT:

Betsy Akin	Kellee McCrory
Diane Brecht	Jack Seward, Jr.
Mike Fidgeon	Terri Steinke
Sue Gehling	Dr. Kenneth Wayne

MHDS COMMISSION MEMBERS ABSENT:

Linda Dettmann
Sen. Jeff Edler
June Klein-Bacon
Kathy Norris
Sen. Sarah Trone Garriott
Rep. Megan Srinivas

OTHER ATTENDEES:

Theresa Armstrong	Cheryl Plank
Sarah Berndt	Lorin Renner
Teresa Bomhoff	Chelsey Scanlan
Marsha Edgington	Flora A. Schmidt
Nafissa Egbuonye	Brittany Sikkink
Dylan Keller	Kelsey Thien
Dree LaToure	Cory Turner
Patti Manna	Gano Whetstone
Katie Peck	Elizabeth Wolfe

Materials Referenced:

MHDS_Commission_August_15_2024_Meeting_Minutes_DRAFT
High-level Wellpoint Information
Iowa Total Care Value Added Services Presentation
Learn to Live_2024_Meet L2L_Flyer_8.5x11_IAWELLPOINT
Molina 2024 2025 VAB Booklet_Final 1
Molina VAB Presentation_Member
Wellpoint Healthy Rewards
Wellpoint Value Added Benefits overview

Welcome and Introductions

Diane Brecht, Chair, called the meeting to order at 9:32am and led introductions. Quorum was established with 8 voting members attending virtually. Diane reviewed conflicts of interest and informed the Commissioners to disclose any conflicts of interest on voting items.

***Review and Vote on Approval of Meeting Minutes**

Diane Brecht inquired if any Commission members had questions or changes to the August 15, 2024, meeting minutes. Hearing none, Diane entertained a motion to approve the meeting minutes as submitted. Sue Gehling motioned to approve and was seconded by Kenneth Wayne. There was no additional discussion by the Commissioners, motion passed, and the minutes were approved.

Behavioral Health Updates – Theresa Armstrong

Theresa Armstrong, Iowa Health and Human Services (HHS) provided updates from HHS. The work of HHS' Behavioral Health System Alignment continues. The Behavioral Health Administrative Service Organization(s) (BH-ASO) map was released, and a Request for Proposal (RFP) was issued in September. The most qualified bidder in each Behavioral Health District to be designated as a District lead will be announced by December 31st, 2024.

The state plan is in development with key outcomes and timelines in development. Plans to review with key stakeholder groups are in process and the first draft for the public is expected in January 2025.

The management of disability services will transfer from the local Mental Health and Disability Services (MHDS) Regions to the Division of Aging & Disability Services. Management activities will include identifying additional organizations to participate in the statewide Aging and Disability Resource Center (ADRC) Network and the creation of a Disability Services System.

Requests for Proposals for the ADRC Network have been posted to secure bidders for a technical assistance and call center that will develop, implement, and operate a statewide call center, develop and maintain a searchable database of providers, and develop and provide training resources. An RFP to come is for the Disability Access points.

State Resource Centers Update – Cory Turner, Superintendent at Cherokee and State Operated Facilities Director Cherokee Mental Health Institute (CMHI) and the Civil Commitment Unit for Sexual Offenders (CCUSO).

Cory Turner provided an update on Glenwood Resource Center (GRC), which was slated to close beginning in April 2022, following a U.S. Department of Justice (DOJ) settlement requiring oversight. It took 2 years 3 months to complete the closure. There were transitions of 147 individuals out of original 152, with the remainder experiencing deaths. The majority, 82, transitioned to community based homes, with some to nursing or hospice care. GRC provides in home support for those who transition to the community and assists community-based providers by providing assessments, training and other technical support for up to one year.

The DOJ and a court appointed monitor also continue to provide oversight. The nonprofit Community Options opened new community based homes to help support former residents of GRC. A team of 10 people with a wide variety of disciplines developed a process to check on former residents. Post move monitors, who are social workers, do routine visits with

scheduled visits. GRC tracks data including incidents such as law enforcement involvement and psychiatric hospitalizations. Services past the one year mark will be transitioned to a community integration manager. There have been a lot of success stories shared.

The staff that worked at the facility have transitioned as well. Some moved to community centers, some opened host homes, some moved to other facilities, and there was a significant retention rate through the 2 year period.

The transition of the campus is beginning with selling and donating the equipment and vehicles to other agencies. The community has developed a group that is advocating for the use and re-development of the land to provide some community and business opportunities while preserving the history of the land. The transition of the facility should occur in the spring of 2025.

Consideration is also being taken regarding the future of Woodward State Hospital. There are currently 120 individuals residing at Woodward. The plan going forward is to utilize the facility for time-limited transitional facility with around 100 individual beds. Staff are working to transition individuals who have the desire and ability to live in the community.

Managed Care Organizations - Brittany Sikkink, Iowa Total Care, Nafissa Egbuonye, Molina, and Lorin Renner, Wellpoint.

Representatives of each of Iowa's three Managed Care Organizations (MCOs) presented overviews of their respective value-added services for members. The value-added services were similar in structure across the companies with variations in the rewards offered. All three organizations utilize incentive programs to encourage members to engage in healthy behaviors and provide services, such as transportation, to reduce barriers to care.

MHDS Commission Work Hand Off to HHS Council

Diane Brecht stated that as the Commission sunsets their work it will be merged and handed off to the HHS Council. There was discussion on how to share what the Commission was able to bring to the system and the best method to provide recommendations on the continuation of the work. Diane Brecht suggested that the Commission draft a recommendation letter to the HHS Council prior to the sunset date of July 1, 2025. There was a suggestion to invite a representative from the HHS Council to learn about the MHDS Commission and their work.

There was discussion on the meeting frequency, with the Commission deciding to continue to meet monthly.

Biennial Report Discussion

Diane Brecht shared that each of the committees have been meeting on the revisions to the report and asked if Commissioners had questions or updates. The Executive Summary sections will be reviewed and completed at the October meeting, and each of the three subcommittees should present their top 3 recommendations for this section. One person from

each subcommittee could work on the summary paragraph. The final draft of the report will be distributed to Commission members prior to the October meeting for review.

Planning for Future Meetings/Additional Discussion

There was discussion on the development of the Managed Care Organization Executive Summary letter. A subcommittee was formed with representatives Kellee McCrory, Diane Brecht, and Jack Seward agreeing to draft the letter and bring it to the October meeting for the Commission's review.

Public Comment

There was an opportunity for public comment with none being offered.

Adjourn

Diane Brecht entertained a motion to adjourn, Betsy Akin motioned to adjourn, Kellee McCrory seconded the motion. The motion passed without discussion. The meeting adjourned at 11:24 am.

Minutes respectfully submitted by Patti Manna