



Transition Plan for Behavioral Health Service System Alignment

SFY25 – Quarter 2 Update

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**Health and
Human Services**

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Overview

On May 15, 2024, Governor Reynolds signed HF2673 to implement a new Behavioral Health Service System for Iowa beginning on July 1, 2025. This transition plan provides information about the tasks the Iowa Department of Health and Human Services (Iowa HHS) will undertake to ensure the successful establishment of the new behavioral health service system, the transition of mental health services from mental health and disability services regions to the Behavioral Health Service System, and the transfer of disability services from the Division of Behavioral Health to the Division of Aging and Disability Services at Iowa HHS. This plan will be updated quarterly.

The Behavioral Health Service System supports a statewide system of prevention, education, early intervention, treatment, recovery support, and crisis services related to mental health and addictive disorders.

Organizational Structure of the Behavioral Health Service System

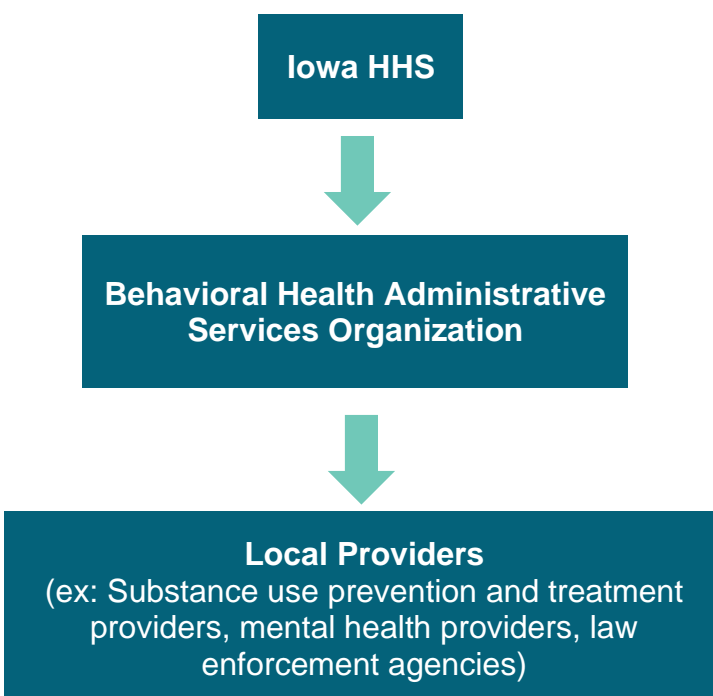
The structure for the behavioral health service system is based on a shared responsibility model. This model includes the Iowa Department of Health and Human Services (Iowa HHS), a behavioral health administrative services organization (BH-ASO) serving as the lead entity for each of the seven behavioral health districts, and local providers.

Iowa HHS will:

- Establish service system districts;
- Develop the service system statewide plan and approve district plans;
- Administer federal and state funding;
- Develop service definitions and standards, reporting requirements, and performance outcomes;
- Provide training and technical assistance; and
- Implement activities as indicated by the Behavioral Service System State Plan.

Through their contract with Iowa HHS, the BH-ASO will:

- Develop and implement a district-wide plan, for each district, to ensure adequate service provision in every county within each district;
- Contract with local providers and partners;
- Provide training and technical assistance to contracted local providers;
- Ensure service quality and performance outcomes;
- Provide activities and services as indicated by each district plan;
- Collaborate with Iowa HHS; and
- Report progress and outcomes to Iowa HHS.



The BH-ASO will contract with local providers to provide activities and services within each district. Local providers will:

- Contract with the BH-ASO;
- Provide activities and services according to the Behavioral Health District Plans;
- Collaborate with the BH-ASO and other local providers in the district to ensure service provision in every county within the district; and
- Report progress and outcome data to the BH-ASO.

Transition Funding

Iowa HHS will develop guidance for mental health and disability services regions and counties for the following:

- Transferring all unencumbered and unobligated moneys remaining in a mental health and disability services region's combined account (pursuant to section 225C.58, subsection 1) to the treasurer of state for deposit into the behavioral health fund (as established in section 225A.7).
- Transferring all unencumbered and unobligated moneys remaining in a mental health and disability services fund (pursuant to section 225C.58, subsection 1) to the treasurer of state for deposit into the behavioral health fund (as established in section 225A.7).

Please see progress updates for this activity in the transition plan section below.

Transition activities for Iowa HHS are being funded as follows:

- \$1,000,000 is appropriated from the mental health and disability services regional incentive fund to support staffing needs to assess current practices, research and design future state activities, and implement future state and transition activities.
- \$645,179 is appropriated from the mental health and disability services regional service fund to establish a data repository.

Ensuring Service Provision for Iowans

Starting July 1, 2025, Iowans will be able to receive services at the location of their choice -- the behavioral district of their residence will not affect where they can receive services. Iowa HHS will collaborate with the BH-ASO to develop communications about what services are available, who is eligible to receive services, and where services are located. In the event that service delivery sites change locations, Iowa HHS will work with the BH-ASO to develop a plan to assist with the transition of service delivery from the current locations to the new locations. This plan would also include how those changes will be communicated to current clients and the public.

Transition Plan

As a part of HF2673, Iowa HHS was directed to develop a transition plan that included all tasks to be completed before July 1, 2025, and provide quarterly status updates of the identified tasks. Tasks were identified for both the implementation of the Behavioral Health Service System and the transfer of disability services to the Division of Aging and Disability Services. The transition plan was posted to the [HHS System Alignment webpage](#) on July 1, 2024. **The status of the tasks from the transition plan can be found below; this update reflects progress through December 31, 2024.**

Behavioral Health Service System Implementation

During the first six months of the transition period, Iowa HHS completed the following tasks:

- Held public comment sessions to receive feedback about draft Behavioral Health district maps;
- Complied and reviewed Behavioral Health district map feedback and district recommendations;
- Defined roles and responsibilities for- Iowa HHS, Behavioral Health Administrative Service Organizations (BH-ASOs) and local providers;
- Developed the scope of work for BH-ASOs;
- Developed and posted the BH-ASO request for proposal (RFP);
- Held partner input sessions about the Behavioral Health Service System State Plan;
- Developed minimum accreditation standards for the maintenance and operation of community mental health centers;
- Designated community mental health centers;
- Held advisory group meetings to receive feedback about draft Behavioral Health Service System Statewide Plan's strategies and tactics;
- Reviewed proposals for the BH-ASO RFP;
- Issued the notice of award for the BH-ASO RFP;
- Designated Behavioral Health districts; and
- Developed the contract, including performance measures, for BH-ASOs.

During the second quarter of SFY25, Iowa HHS continued or began work on a number of tasks. This included:

- Drafting administrative rules to support Chapter 225A;
- Identifying current contracts that will be impacted by mental health and disability services being transferred to the Behavioral Health Service System;
- Developing the Behavioral Health Service System State Plan;
- Developing funding allocation and distribution methodologies;
- Identifying workforce development needs;
- Determining processes for claiming and reimbursement;
- Planning for the behavioral health central data repository;
- Determining client eligibility requirements;
- Developing minimum access standards;
- Developing methods to ensure individuals who are eligible for behavioral health services receive an uninterrupted continuum of care;
- Developing processes to wind down the work of mental health and disability services regions and the Integrated Provider Network and Tobacco Community Partnership contracts;

- Developing processes to onboard BH-ASOs; and
- Developing guidance for mental health and disability services regions and counties to transfer all unencumbered and unobligated moneys remaining in a mental health and disability services region's combined account and fund to the treasurer of the state.

Additional tasks that are in development to implement the Behavioral Health Service System include:

- Developing standards and operational policies and procedures for Iowa HHS and BH-ASOs;
- Developing contracts for state-level activities and services;
- Establishing technical and clinical guidance and support;
- Developing training for external awardees/contractors and internal Iowa HHS staff;
- Collaborating with the Iowa Department of Inspections, Appeals, and Licensing (Iowa DIAL) regarding accreditation, certification, and licensure of behavioral health providers;
- Developing guidance for transferring funds from the mental health and disability services regions to the treasurer of state for deposit into the Behavioral Health Fund; and
- Developing an evaluation plan for the Behavioral Health Service System.

Transfer of Disability Services to the Division of Aging and Disability Services

During the first six months of the transition period, Iowa HHS completed the following tasks:

- Defined roles and responsibilities for the Aging and Disability Resource Center (ADRC) Technical Assistance and Call Center;
- Developed the scope of work and performance measures for the ADRC Technical Assistance and Call Center;
- Developed and posted the ADRC Technical Assistance and Call Center request for proposal (RFP);
- Defined roles and responsibilities for Iowa HHS, Disability Access Points (lead entities for the Disability Services System) and local providers;
- Reviewed proposals for the ADRC Technical Assistance and Call Center RFP;
- Issued the notice of award for the ADRC Technical Assistance and Call Center RFP;
- Developed and issued the contract for ADRC Technical Assistance and Call Center awardee;
- Developed the scope of work for Disability Access Points; and
- Developed and posted the Disability Access Points request for proposal (RFP).

During the second quarter of SFY25, Iowa HHS continued work on a number of tasks. This included:

- Developing contract documents for Disability Access Points;
- Developing performance measures for Disability Access Points;
- Developing funding allocation and distribution methodologies;
- Identifying statutory changes needed for the ADRC system and the Disability Services System;
- Drafting administrative rule changes and additions to support Chapter 231;
- Developing standards and operational policies and procedures for Iowa HHS and the ADRC Technical Assistance and Call Center;
- Identifying workforce development needs;

- Determining client eligibility requirements; and
- Determining processes for claiming and reimbursement.

Additional tasks that are in development to transfer disability service to the Division of Aging and Disability Services include:

- Developing minimum access standards;
- Developing methods to ensure individuals who are eligible for disability services receive an uninterrupted continuum of care;
- Developing standards and operational policies and procedures for Iowa HHS and Disability Access Points;
- Develop training for external awardees/contractors and internal Iowa HHS staff; and
- Developing an evaluation plan for the Disability Services System.

Iowa HHS, through the work of department staff across multiple divisions, will continue to plan for and implement activities necessary to assure the successful establishment of the Behavioral Health Service System and the Disability Services System. Partner and stakeholder feedback will continue to be vital to ensure the success of the two systems and their abilities to serve Iowans.

One such example is the development of the Behavioral Health Service System Statewide Plan. To collect comprehensive feedback on the draft statewide plan strategies and tactics, seven advisory groups were formed. Each advisory group consisted of a variety of partners and stakeholders from its respective behavioral health district. During the week of October 28th, Iowa HHS behavioral health leadership staff facilitated advisory group meetings statewide. One meeting, hosted by a community partner, was held within each of the seven districts over a five-day period. During each meeting, advisory group members learned more about the state plan development process and were invited to provide feedback on the draft state plan strategies and tactics for all six of the Behavioral Health Service System areas (Systems Operations and Infrastructure; Prevention and Education; Early Intervention; Treatment; Recovery; and Crisis). Over 200 people attended at least one advisory group meeting. In addition, Iowa HHS held three virtual town hall sessions on November 6th. These sessions reviewed the material covered during the in person advisory group meetings and invited additional submission of written feedback. Over 400 people attended one of the three virtual sessions. A recording of the session was posted on HHS' website for those who were unable to attend a session. The feedback from these meetings was used to further refine the strategies and tactics for Iowa HHS, BH-ASOs, and local service providers over the next three years.

A formal public comment period to collect feedback regarding the statewide plan is also forthcoming. In January 2025, system partners, stakeholders, and the public will have the opportunity to again review and provide comment on the final draft of the Behavioral Health Service System Statewide Plan.

Tasks Requiring Completion After July 1, 2025

During this quarter, Iowa HHS did not identify tasks needing completion after July 1, 2025.