MEETING MINUTES						
DIVISION	Department of Health and Human Services, Iowa Medicaid					
MEETING TITLE	REACH Implementation Team: Communications Subcommittee					
FACILITATOR	Carol Mau					
DATE	3/18/25	TIME	4:00 PM CT			
LOCATION	Virtual					

MEETING OBJECTIVES

Implementation Team meetings create the opportunity for key stakeholders to facilitate and support the adherence to the Iowa REACH Initiative Implementation Plan objectives and activities and to provide coordinated oversight and recommendations to ensure the success of the Iowa REACH Initiative.

MEETING PARTICIPANTS

- Anne Crotty
- Megan Mahanes
- Amy Berg-Theisen
- Will Linder
- Nancy Hunt
- Laura Leise
- Gretchen Hammer
- Jackie Brenner

AGENDA TOPIC	KEY DISCUSSION POINTS		
Welcome and introductions	Participants introduced themselves and Iowa HHS staff welcomed participants.		
REACH Communications	Iowa HHS shared the communications goals and audiences from the draft communications plan.		
Plan	Communications goal #1: Frame REACH as a good thing that can help strengthen services.		

- Participants noted that the goal's phrasing was complex, and that REACH materials should be written in more understandable language.
 - Members felt that "the Defined Class" is a confusing term, and suggested HHS use "youth with SED" for public facing materials.
- Participants agreed that supporting engagement and building confidence in REACH are good goals.
- Participants shared ideas for how to measure the success of this goal:
 - The number of people who view the website, provide feedback during public comment, or join meetings.
 - o Understanding of materials by intended audiences.
- Participants shared the importance of HHS building trust between families and HHS.

Communications goal #2: Increase awareness of REACH services and engagement in REACH services.

- Participants shared that families would benefit from clear, thorough explanations of REACH services, including what a child needs and why they need it.
 - Participants noted that words like "intense" or "extreme" can be scary for families and harmful for kids.
- Participants recommended HHS create videos of families explaining what services mean in their own words.
- Participants noted that some families have had negative experiences with HHS services in the past and sharing success stories can help increase confidence.
 - lowa's Developmental Disabilities Council and Fair Oaks Family and Children Services have examples of success stories.
 - Participants shared similar resources from other states: https://positiveexperience.org/resources-category/videos/"
- The communications subcommittee and the REACH provider subcommittee suggested that REACH engage the whole family in REACH, and frame communications on services around families and support systems.

Audiences for REACH communications:

- Defined class
 - Participants recommended rephrasing "how will REACH affect them", to "how will REACH benefit them."
- Providers

- Participants recommended that providers should know how REACH is different than what currently exists.
- Medicaid managed care organizations
 - Participants felt that MCOs would want to know logistical details, how REACH will work with their existing case management teams, and how they can best support REACH.
- State government
 - Participants recommended that state agencies break down how changes associated with REACH will affect their employees' day-to-day jobs.
- All audiences:
 - Participants shared that it would be helpful to have publicly available information about REACH progress.
 - Participants suggested gathering feedback from the REACH Consumer Steering Committee, youth, and families before distributing materials.
 - In future meetings, participants would like to see examples of communications materials from states with similar initiatives to REACH.

Public Comment

No comments were shared.

VOTES						
ITEM#	DESCRIPTION	MOTION	SECOND	VOTE		
N/A	N/A	N/A	N/A	N/A		