

# Steering Committee Meeting Summary

**APRIL 29, 2025, 3:00 – 4:30 PM CENTRAL TIME**

## **Attendee List:**

Mathematica: Kimberly Aguiard, Amy Wodarek-O'Reilly, Victoria Wible, Maddie Vincent, Claire Pendergrast

Iowa Health and Human Services (HHS): Latisha McGuire, Bob Schuleter, LeAnn Moskowitz, Dex Walker, Anne Crotty, Kim Grasty

Committee members: Gaye Johnson, Elaine Gartelos, Shelley Jaspering, Eric Donat, Liliana Hernandez-Castro, Jean Shelton, Chris Burrows, Brittany Singleton, Faraji Hubbard, Betty Rees, Darci Alt, Jackie Brenner, Kay Marcel, Garret Fray, Leah Price, Moises Castellanos, Mary Beth O'Neil, Ruth Wilson, Alex Watters, Bill Stumpf, Brooke Lovelace (DD Council)

## **Summary of Meeting Themes:**

- Dex Walker from Iowa HHS introduced himself to the steering committee and shared his contact information. His email is [dex.walker@hhs.iowa.gov](mailto:dex.walker@hhs.iowa.gov).
- Mathematica discussed 2025 HOME priorities, which include implementing uniform assessment, improving the waitlist, aligning the fee schedule across the 7 current waivers, improving CCO and CDAC, aligning services across the 7 current waivers, enhancing provider capacity and advancing quality management systems. HHS also has 3 guiding principles for this work: considering phased implementation, aligning with current operation efforts whenever possible, and prioritizing work that provides value to members and providers.
- Steering committee members asked HHS to clarify whether Individual Consumer-Directed Attendant Care (ICDAC) will be discontinued with providers moving to agency C-CDAC and Consumer Choice Option (CCO).
  - Iowa HHS confirmed this is true, but this change is separate from the HOME project and follows a timeline managed entirely by HHS staff, independent of the HOME waivers.
- Mathematica discussed Community-Based Care Management (CBCM) ratios. In July 2024, HHS standardized CBCM ratios and updated the frequency of CBCM contact to require in-person quarterly contact, at a minimum. For people on the Intellectual Disabilities (ID) Waiver, CBCMs must have at least bimonthly in-person contact. Managed Care Organizations (MCOs) have successfully lowered their ratios and expanded their case management teams with over 100 new hires since July 2024.
- Mathematica also shared an update on CBCM trainings. Since July 1, 2024, Iowa HHS has required case managers serving Long-term Services and Supports (LTSS) populations to complete a case manager "Toolkit". New case managers must complete a group of twenty-seven trainings, and case managers hired before July 1, 2024 have to complete an annual refresher with seven training courses. The intent of this update is to increase the knowledge of MCO case managers to better serve members.

- Members asked if this training is just for CBCMs.
  - Iowa HHS shared that anyone could access these trainings on [Trualta](#).
    - Members suggested viewing trainings could help in several ways:
      - Providing clarity for members who question their case manager's decisions.
      - Building trust through transparency.
      - Improving coordination by helping stakeholders understand each other's roles, ensuring smoother collaboration across entities like CCO, MCOs, ISBS, and case managers.
- Members suggested HHS create a one-pager for members outlining “what to expect from your case manager.”
- Members underscored the importance of case managers receiving training about all services and programs available for members, to help them navigate the HCBS system effectively. Members said finding this information is hard and having resources compiled in one place would be helpful for both case managers and members.
  - Iowa HHS shared that ‘toolkit’ trainings address this, including community resource navigation focusing on non-waiver services.
- Members recommended creating an additional resource, alongside the one on case managers, to outline the responsibilities of related positions, such as income maintenance workers.
- Members recounted experiences where case managers did not have full understanding of their specific disability.
  - Iowa HHS designed the Trualta course to help case managers provide holistic support and improve member satisfaction. Surveys will measure member experiences with case managers. Members asked whether MCOs conduct participant and family satisfaction surveys to assess case manager effectiveness, as these surveys could help evaluate the Trualta training.
  - MCOs do conduct such surveys, and Iowa HHS plans to do the same for fee-for-service members.
- Mathematica provided an update on MCO and provider engagement. Iowa HHS meets with MCOs and providers monthly. The goals of this meeting include defining provider enrollment, planning communication efforts and identifying strategies to enhance the HCBS workforce system.
- Mathematica asked for steering committee feedback on communicating assessment changes to the public. Changes that need clear communication include the transition to Telligen conducting assessments, the transition from the SIS (Supports Intensity Scale) to interRAI for the ID waiver assessment and information about the uniform assessment.
  - Members asked why Iowa HHS transitioned from the SIS to interRAI.
    - Iowa HHS shared that the SIS changed because the company producing the SIS assessment retired the version Iowa was using, so Iowa HHS moved to the interRAI.

- **Iowa HHS changed the assessor to Telligin in response to stakeholder concerns about a conflict of interest with MCOs conducting assessments. These assessments are federally required.**
  - Members urged HHS to repeat this reasoning in town halls and in member materials, to help address confusion.
  - Members said it is important for HHS to highlight what is changing and what is staying the same.
- Families worry that interRAI could lead to loss of services due to changes in level of care.
  - Iowa HHS will clarify who determines the level of care and track changes between SIS and interRAI-ID.
- Members noted that case managers need education about changes so they can answer members' questions with accurate information. Members will also have questions about individualized budgeting too.
- Mathematica shared other state examples of assessment-related communications.
  - Members liked the first state's explanation of why they transitioned away from the prior assessment
  - Members found the second example with the video and quotes overwhelming and less effective. They preferred the Minnesota example, which clearly explains what to expect. However, some members support using videos, particularly one that explains the purpose of the assessment and includes excerpts from a real or staged assessment.
- Members asked Iowa HHS about the delay in the public comment period on waiver redesign.
- Iowa HHS shared that there is no definite timeline for the waiver redesign public comment currently, but they will provide more information about the revised timeline at a future meeting.