

Steering Committee Meeting Summary

FEBRUARY 25, 2025, 3:00 – 4:30 PM CENTRAL TIME

Attendee List:

Mathematica: Kimberly Aguillard, Amy Wodarek-O'Reilly, Victoria Wible, Claire Pendergrast, Daniel Van Sant (Harkin), Mitzi Melendez-Prodoehl

Iowa Health and Human Services (HHS): Christy Casey, Latisha McGuire, LeAnn Moskowitz, Anne Crotty, Brooke Lovelace (DD Council)

Committee members: Bill Stumpf, Shelley Jaspering, Jean Shelton, Kay Marcel, Mary Beth O'Neil, Eric Donat, Sonia Reyes, Faraji Hubbard, Brittany Singleton, Chris Burrows, Lilianna Hernandez-Castro, Gaye Johnson, Thamera al Maqsood, Moises Castellanos, Leah Price, Betty Rees, Ruth Wilson, Elaine Gartelos, Becky Coffin

Summary of Meeting Themes:

- Mathematica introduced new HHS team member Andrea Maher, the long-term services and supports (LTSS) bureau chief.
- Mathematica recapped messaging from the February 6th Medicaid Townhall. HHS plans to launch Certified Community Behavioral Health Clinic (CCBHC) and Behavioral Health redesigns in summer 2025. HHS shared a new figure that shows HOME and REACH (an initiative that includes a new set of services to support behavioral health needs of younger Iowans through community-based supports) will begin a full launch starting in 2027. Beginning in 2025, HHS will carry out some parts of HOME.
 - HHS shared four main priorities for current work, including 1) Individual Consumer-Driven Attendant Care (I-CDAC), 2) the fee schedule, 3) uniform assessment, and 4) waitlist. Case management is another important area with improvements underway.
 - Steering committee members requested a discussion on provider enrollment at a future Steering Committee meeting.
- Mathematica asked for Steering Committee feedback on the Consumer Choices Option (CCO) budget worksheet, which all members choosing CCO complete with their Independent Support Brokers (ISBs) today. Starting in January 2026, working with ISBs will be optional, so members who choose not to have an ISB will need to complete this document on their own.
 - Steering Committee members raised a need for updated, accurate ISB training.
 - Committee members noted that with optional ISBs, members will need training on budgeting and education on ISB roles and duties to prevent gaps in care.
 - Recommendations to the budget worksheet include:
 - Swap the placement of “total hours per month” and “taxes” to help members clearly see that an employer’s cost includes both their hourly wage and taxes.
 - Update “taxes” to “Employer taxes xx%.” Mathematica shared that they could provide examples to demonstrate that the taxes increase costs.
 - Use a dropdown to show all available services for each category. The budget document could also have a link to the HOME website with the service package.
 - Use a check box to identify savings and combine the savings and box with the other boxes because sometimes items go in both places.
 - Remove the “My needs” section because it repeats the care plan.

- Provide guidance on signature types to prevent member confusion and budget worksheet denials by managed care organizations (MCOs).
- Steering committee members were unsure about removing the Emergency Back-up Plan section. After learning that members can adjust staff hours as long as they stay within their monthly limit, they agreed to remove it. It is easy to leave out this section by mistake or make errors here.
- Mathematica shared an update on Assessment related changes. On January 1, 2025, the assessments used to decide level of care for the intellectual disability (ID) waiver changed. HHS replaced the Supports Intensity Scale (SIS) Adult with the interRAI Intellectual Disability (interRAI-ID), and the SIS Child with the interRAI Child and Youth Mental Health- Developmental Disability (ChYMH-DD).
 - Following feedback about perceived conflict when the MCO did the assessment and person-centered planning, HHS decided to move to an independent assessor model. Telligen will complete ALL waiver assessments starting July 1, 2025.
 - Steering Committee members shared concerns around using the interRAI for members with brain injuries. HHS has reached out to their brain injury partners and are working through supplemental assessments for this population. They may keep the Mayo Portland assessment.
 - Steering Committee members have heard that the MCOs are requiring case managers to be present when Telligen completes assessments. Members had mixed feelings about this. Although attending assessments can help case managers to learn more about their members and share details, members recommended that member preference should decide whether case managers attend. Some worried that new case managers don't know them well enough to help or that their presence might make it harder to speak openly.
 - HHS will provide clarity on this topic through an informational letter.
 - HHS shared that for the full assessment, the full interdisciplinary team (IDT) will be present to get a more complete picture of member's needs. They are trying to make case managers expectations consistent across fee-for-service (FFS) and MCO.
 - HHS staff have heard concerns about assessment fatigue. They clarified that the goal of the off-year assessment (OYA) is to reduce burden. Currently, OYA is only for the ID population.
 - Steering Committee members asked how long the new assessment takes. A case manager on the call shared that they take less than two hours.
 - Steering Committee members recommended clarifying that Telligen will start doing all assessments in July, not that they will have all assessments finished in July.
- Mathematica asked Steering Committee members to share their preferences for 2025 meeting communication and brainstorm potential meeting topics.
 - Steering Committee members asked for clarification on which changes are related to the HOME project and which changes are not.
 - HHS shared that the HOME project brought on the case management changes and that they are working on setting reimbursement rates in the future so all services are paid the same, no matter the waiver or provider type.
 - Steering Committee members recommended using Steering Committee meetings in 2025 to "close the loop" on updates and confirm the committee has served its purpose. The committee can provide tweaks and share feedback to HHS leadership about implementation.
 - Members requested a discussion on waitlist updates and intersections with Aging and Disability Resource Centers (ADRCs).

Additional Resources:

Email for Rebecca Curtis, interim Medicaid Director: Rebecca.Curtis@hhs.iowa.gov