

# Disability Access Point District Transition Plan

## District 2

July – December 2025



## Table of Contents

### Contents

Provider Network .....	2
Continuity of Services.....	15
Engagement and Outreach .....	26
Operations .....	34

# Provider Network

## Payment of Services

All contracts with service providers are governed by Collaborative Individual and Community Supports’s Contracting Policy, including approval by the Collaborative Individual and Community Supports (CICS) Governing Board Chair or designee. Eligible providers include in-district providers, providers contracted with other DAPs, and those outside the district when needed. CICS may use financial incentives and non-traditional funding mechanisms, such as vouchers, to enhance performance and accessibility. Disputes are resolved using the process identified in the contracting policy.

## Short-term Services and Supports (STSS) Invoicing Procedure

### Current Framework

- Disability Access Points (DAPs) will build on existing Mental Health and Disability Services (MHDS) Region invoicing processes.
- To ensure a smooth transition, DAP – Short-Term Supports and Services (STSS) contractor will communicate with providers around contracting, invoicing process training, and processing timeline details.
- DAP will compile contact information of billing staff for provider agencies.
- DAP will e-mail timelines and training opportunities to support a smooth transition around contracting, invoice process training, and processing timeline details.
- First DAP-specific invoices anticipated early August 2025 for July services.

### Action Steps for DAP-Paid STSS Services

- Continue use of existing invoice templates with minor updates as needed for the first six months. Afterwards, the CICS invoice must be used.
- DAP billing contracts will provide policy to all program billing staff to assist in proper procedure for billing as well as policy for resolving disputed invoices.
- Submit STSS policies, guidance, and instructions for review and approval by June 1.
- Require providers to:
  - Submit invoices to the DAP-designated billing contact.
  - Use secure email or submission method, based on local DAP preference.

- Internally:
  - Assign staff to verify service eligibility, individual approval, and invoice accuracy.
  - Return incomplete or incorrect invoices within 10 business days.
  - Process payment within 14 days of invoice approval.

### **Transition to HHS-LTSS Paid Services**

- DAPs will send a representative to attend HHS sessions on Long-Term Services and Supports (LTSS).
  - Assist in the distribution of the Iowa Department of Health and Human Services (HHS) claiming toolkit and education opportunities to all affected providers.
  - Direct LTSS providers to Iowa HHS resources, office hours and key contacts for claiming technical assistance.
  - Inform Iowa HHS DAP Program Manager of technical issues brought forward by provider network.

### **Coordination Across DAPs**

- Work with other DAPs to:
  - Standardize invoice templates for STSS where possible
  - DAPs will know and share individual District policies to support providers spanning multiple Districts.
  - Identify other topics relevant to statewide DAP providers and provide a platform for statewide communication around these issues. If initiated this platform will occur at a uniform day and time to allow for provider planning purposes.

## **STSS Contracting Strategy**

### **District STSS Contracting Transition**

- Each agency who is contracted to be a DAP will maintain its own provider contracting process.
- Each DAP will determine appropriate providers for the provision of STSS in their individual DAP. This process will be a priority of the district assessment to determine the type and number of providers needed. The process/policy for ensuring qualified providers, see Appendix C.

- Each DAP will honor the contract of other Districts if utilizing service providers located within these Districts. DAPs will inform other DAPs of contracts with STSS providers by uploading contracts in a centralized location. DAPs will develop District STSS non-Medicaid provider policies.
- DAPs will assist non-enrolled Medicaid LTSS providers to become Medicaid-enrolled if claiming for non-Medicaid LTSS Disability Services.

### **Contracting Process**

- The DAP will establish a standard contracting process for STSS Disability Service providers for claims not payable through the Iowa HHS claiming system.
- This will include:
  - A provider application or intent-to-participate form.
  - Collaboration with current MHDS Region staff to identify opportunities, strengths, and concerns for individual providers for ongoing service provision.
  - Verification of appropriate licensure or certification.
  - Review of service type, staffing, accessibility, and service area.
  - Inclusion of contract provisions aligned with statewide expectations, as defined collaboratively by DAPs and HHS.
  - Feedback loop with teams and individuals to support future planning and gap analysis to inform the District planning process.

### **Service Quality and Oversight**

- Contracts will include minimum service delivery and quality expectations.
- Quality assurance activities will include:
  - Invoice and utilization review.
  - Regular provider check-ins and follow-up on concerns.
  - Targeted monitoring where service gaps or complaints emerge.

### **STSS Rates and Funding System Alignment**

- Respite providers with existing Medicaid contracts will bill Iowa HHS through the Safety Net Management Information System (SNMIS).
- DAPs will not duplicate payment for services and will explore all resources for individuals and caregivers, as the payors of last resort.
- A procedure will be established for setting rates for STSS services across all districts.
- The DAP will encourage non-Medicaid providers to pursue Medicaid enrollment.

### **Contractor Training**

- The DAP will work with other districts to:
  - Identify essential STSS provider training needs (e.g., grievance rights, documentation, accessibility).
  - Provide or coordinate onboarding guidance for new STSS providers as needed.
  - Collaborate with the Iowa ADRC Training and Technical Assistance Call Center to identify training needs, in opportunities identified by and in collaboration with Iowa HHS.

### **Grievance and Complaint Process**

- All DAP contracts will reference a formal grievance and complaint process, which will be detailed later in the plan.
- Providers will be required to inform individuals of their rights and display grievance procedures clearly.
- The DAP will monitor complaints and track resolution steps as part of contract oversight.

### **Access Monitoring**

- Collaborate with HHS to assess need for access standards for STSS services.
  - Monitor access across the district (e.g., by population group or wait time)
  - Identify gaps and support provider recruitment or service development as needed.
  - Collaborate with other DAPs to coordinate efforts in shared border areas or under-resourced communities.
  - Identify opportunities for statewide solutions and systemic efficiencies with the support of Iowa HHS.

<b>Objective</b> <b>What is the measurable step(s) you must take to achieve the goal?</b>	<b>Description of Task/Duties</b> <b>What are the activities you must complete to achieve the objective?</b>	<b>Role(s) Responsible Internal and External Stakeholders</b>	<b>Timeframe for Completion Dates or timeframes (within X days)</b>
<b>Objective 1: Finalize DAP STSS invoice submission and review process</b>	Task 1: Finalize invoice template and secure submission method.	Operations and Finance Staff	By July 15, 2025
	Task 2: Communicate invoicing process to providers.	Provider Engagement & Communications Staff	By July 22, 2025
	Task 3: Implement invoice review and payment process.	Finance and QA Staff	Beginning August 1, 2025
	Task 4: Host provider office hours or Q&A sessions.	Provider Engagement and Contract Managers	Start June 2025, Complete by July
<b>Objective 3: Develop and implement STSS contracting process</b>	Task 1: Create a provider application or participation form.	Contracting Staff	By June 1, 2025
	Task 2: Draft contract template including QA and grievance expectations.	Contracting and QA Staff	By June 30, 2025
	Task 3: Review and determine provider application for STSS services.	Contracting Staff	June 30, 2025
	Task 4: Establish contracts for STSS services.	Contracting Staff	June 30, 2025
<b>Objective 4: Establish STSS quality monitoring and complaint oversight</b>	Task 1: Outline internal QA process for reviewing service delivery.	QA Staff and Program Oversight Leads	August–September 2025
	Task 2: Coordinate across DAPs for consistent expectations.	Contract Managers and QA Staff	Q1 FY26
	Task 3: Ensure provider grievance policy is included in contracts.	Contracting and QA Staffs	June 2025
	Task 1: Seek clarification from HHS on training expectations.	DAP Leadership	July 2025

<b>Objective 5: Prepare for potential contractor training expectations</b>	Task 2: Coordinate cross-DAP strategy for essential training topics.	Planning and QA Leads	August 2025
	Task 3: Integrate basic training into provider onboarding as needed.	Contracting and Provider Support Staff	Ongoing, beginning Q1 FY26
	Task 4: Collaborate with ADRC TACC for training assessments and development in opportunities identified by and with Iowa HHS.	ADRC TACC, DAP Leadership, DAP DSNs, and Iowa HHS	Ongoing, beginning May 2025

### Provider and Stakeholder Inventory

Provider Type/Service Provision	Key District Organizations	Gap Inventory
<b>LTSS</b>		
<b>Supported Community Living (SCL)</b>	<ul style="list-style-type: none"> <li>• 43 North Iowa</li> <li>• Central Iowa Recovery</li> <li>• Duncan Heights</li> <li>• One Vision</li> <li>• Pride Group</li> <li>• The Respite Connection, Inc.</li> </ul>	<ul style="list-style-type: none"> <li>• Exceptional Opportunities</li> <li>• Hope Haven</li> <li>• Horizons Unlimited</li> <li>• Howard Center</li> <li>• Lakes Life Skills</li> <li>• LifeWorks Community Services</li> </ul>
<b>Employment Services</b>	<ul style="list-style-type: none"> <li>• 43 North Iowa</li> <li>• Duncan Heights</li> <li>• Mosaic</li> <li>• Norse Ventures LLC, dba Thrive</li> <li>• One Vision</li> <li>• Voc Rehab</li> </ul>	<ul style="list-style-type: none"> <li>• Exceptional Opportunities</li> <li>• Hope Haven</li> <li>• Horizons Unlimited</li> <li>• Howard Center</li> <li>• LifeWorks Community Services</li> <li>• Managed Resources Connections Inc</li> <li>• Trivium Life Services</li> </ul>



		<ul style="list-style-type: none"> <li>• Village Northwest Unlimited</li> </ul>
<b>Facility-Based Residential Programs</b> <ul style="list-style-type: none"> <li>• Residential Care Facilities (RCF)</li> <li>• Intermediate Care Facilities for Individuals with Intellectual Disabilities (ICF/ID)</li> <li>• Nursing Facilities (NF)</li> <li>• Skilled Nursing Facilities (SNF)</li> </ul>	<ul style="list-style-type: none"> <li>• Friendship Haven</li> <li>• One Vision</li> </ul>	<ul style="list-style-type: none"> <li>• Opportunity Living</li> <li>• Palmer House</li> </ul>
<b>Medical Services and Supplies</b>		<p>CICS will initiate targeted outreach to medical providers and durable medical equipment suppliers to build referral pathways and facilitate timely access to care. Relationships will be developed through one-on-one meetings, joint care planning discussions, and participation in existing healthcare coordination efforts.</p>
<b>Personal Emergency Response Services (PERS)</b>		<p>CICS will connect directly with PERS vendors to understand available options and service coverage. Staff will incorporate these services into safety planning by maintaining an up-to-date list of providers and building collaborative</p>

		relationships through case-specific coordination.
<b>Respite</b>	<ul style="list-style-type: none"> <li>• Childserve</li> <li>• CIRSI, Inc.</li> <li>• Easterseals Iowa</li> <li>• Hope Haven</li> <li>• Lutheran Services in Iowa (LSI)</li> </ul>	<ul style="list-style-type: none"> <li>• Lakes Life Skills</li> <li>• Life Connections</li> <li>• LifeWorks Community Services</li> <li>• Opportunities Unlimited</li> <li>• Respite Connections</li> <li>• Seasons Center for Behavioral Health</li> </ul>
<b>STSS</b>		
<b>Individual Assessment and Evaluation</b>	<ul style="list-style-type: none"> <li>• Berryhill Center</li> <li>• Brain Injury Association of Iowa</li> <li>• Eyerly Ball Community Mental Health Services</li> <li>• Integrated Telehealth Partners</li> <li>• Prairie Ridge Integrated Behavioral Healthcare</li> </ul>	<ul style="list-style-type: none"> <li>• Plains Area Mental Health Center</li> <li>• Seasons Center for Behavioral Health</li> <li>• Siouxland Mental Health Center</li> </ul>
<b>Transportation</b>	<ul style="list-style-type: none"> <li>• North Iowa Area Council of Governments/Region 2 Transit</li> <li>• MIDAS Council of Governments</li> <li>• City of Fort Dodge (DART)</li> </ul>	<ul style="list-style-type: none"> <li>• Regional Transit Authority/RIDES</li> <li>• Region XII Council of Governments/Western Iowa Transit System</li> </ul>

<p><b>Peer and Parent Support</b></p>	<ul style="list-style-type: none"> <li>• Berryhill Center</li> <li>• Central Iowa Recovery</li> <li>• Four Oaks</li> <li>• Hope Haven</li> <li>• Lutheran Services in Iowa - BHIS</li> <li>• Prairie Ridge Integrated Behavioral Healthcare</li> </ul>	<ul style="list-style-type: none"> <li>• Plains Area Mental Health Center</li> <li>• Seasons Center for Behavioral Health</li> <li>• Siouxland Mental Health Center</li> </ul>
<p><b>Time-Limited Rental Assistance</b></p>	<ul style="list-style-type: none"> <li>• Dickinson County General Assistance</li> <li>• Hancock County General Assistance</li> <li>• Webster County General Assistance</li> <li>• Wright County General Assistance</li> </ul>	<ul style="list-style-type: none"> <li>• Calhoun County General Assistance</li> <li>• Clay County General Assistance</li> <li>• Emmet County General Assistance</li> <li>• Humboldt County General Assistance</li> <li>• Kossuth County General Assistance</li> <li>• Palo Alto General Assistance</li> <li>• Pocahontas County General Assistance</li> <li>• Sac County General Assistance</li> <li>• Winnebago County General Assistance</li> <li>• Worth County General Assistance</li> </ul>
<p><b>Home and Vehicle Modifications</b></p>		<p>CICS will identify and engage with contractors and specialists who provide accessibility modifications. Staff will meet with vendors individually to understand their capabilities and</p>

		build relationships that support timely quotes, project completion, and problem-solving for complex modification needs.
<b>Adaptive Equipment</b>		CICS will develop relationships with local and regional providers of adaptive equipment through direct outreach and coordination with clinical professionals such as occupational and physical therapists. These partnerships will help ensure that individuals have access to equipment that meets their needs and supports greater independence.
<b>Other Basic Needs</b>	<ul style="list-style-type: none"> <li>• Upper Des Moines Opportunity, Inc.</li> <li>• New Opportunities, Inc.</li> <li>• North Iowa Community Action Organization</li> </ul>	<ul style="list-style-type: none"> <li>• Thrive Iowa</li> </ul>
<b>Community Stakeholders</b>		
<b>Schools</b>	<ul style="list-style-type: none"> <li>• Garner Hayfield Ventura</li> <li>• West Hancock</li> <li>• Belmond-Klemme</li> <li>• CAL</li> <li>• Clarion-Goldfield-Dows</li> <li>• Fort Dodge</li> <li>• Gilmore City-Bradgate</li> <li>• East Sac County</li> <li>• Manson Northwest Webster</li> <li>• Webster City</li> <li>• Albert City-Truesdale</li> </ul>	<ul style="list-style-type: none"> <li>• Harris-Lakepark</li> <li>• Spirit Lake</li> <li>• Okoboji</li> <li>• Clay Central-Everly</li> <li>• Spencer</li> <li>• Ruthven-Ayrshire</li> <li>• Estherville Lincoln Central</li> <li>• Graettinger-Terril</li> <li>• Sioux Central</li> <li>• Laurens-Marathon</li> <li>• West Bend-Mallard</li> <li>• Emmetsburg</li> </ul>

	<ul style="list-style-type: none"> <li>• Westfork</li> </ul>	<ul style="list-style-type: none"> <li>• North Union</li> <li>• North Kossuth</li> <li>• Algona</li> <li>• North Iowa</li> <li>• Lake Mills</li> <li>• Northwood-Kensett</li> <li>• Forest City</li> <li>• Central Springs</li> <li>• Eagle Grove</li> <li>• Twin Rivers</li> <li>• Humboldt</li> <li>• Pocahontas Area</li> <li>• Newell-Fonda</li> <li>• South Central Calhoun</li> <li>• Southeast Valley</li> <li>• Schaller-Crestland</li> <li>• Odebolt Arthur Battle Creek Ida Grove</li> <li>• Galva-Holstein</li> <li>• St. Ansgar</li> <li>• Stratford</li> </ul>
<p><b>Health care</b></p>	<ul style="list-style-type: none"> <li>• UnityPoint Health – Trinity</li> <li>• Hancock County Health System</li> <li>• Iowa Specialty Hospital – Belmond</li> <li>• Iowa Specialty Hospital – Clarion</li> </ul>	<ul style="list-style-type: none"> <li>• Lakes Regional Healthcare</li> <li>• Spencer Hospital</li> <li>• Avera Holy Family Health</li> <li>• Palo Alto County Health System</li> <li>• Loring Hospital</li> <li>• Stewart Memorial Comm. Hospital</li> <li>• Humboldt County Memorial Hospital</li> </ul>

		<ul style="list-style-type: none"> <li>• Kossuth Regional Health Center</li> </ul>
<p><b>General Assistance</b></p>	<ul style="list-style-type: none"> <li>• Dickinson County General Assistance</li> <li>• Hancock County General Assistance</li> <li>• Webster County General Assistance</li> <li>• Wright County General Assistance</li> </ul>	<ul style="list-style-type: none"> <li>• Calhoun County General Assistance</li> <li>• Clay County General Assistance</li> <li>• Emmet County General Assistance</li> <li>• Humboldt County General Assistance</li> <li>• Kossuth County General Assistance</li> <li>• Palo Alto General Assistance</li> <li>• Pocahontas County General Assistance</li> <li>• Sac County General Assistance</li> <li>• Winnebago County General Assistance</li> <li>• Worth County General Assistance</li> </ul>
<p><b>Businesses</b></p>		<p>CICS will build partnerships with local businesses by reaching out directly to employers and chambers of commerce to identify shared goals in workforce inclusion. Staff will offer informational meetings and collaborate on initiatives that support employment for individuals with disabilities or behavioral health conditions.</p>
<p><b>Transportation</b></p>	<ul style="list-style-type: none"> <li>• North Iowa Area Council of</li> </ul>	<ul style="list-style-type: none"> <li>• Regional Transit Authority/RIDES</li> </ul>

	<p>Governments/Region 2 Transit</p> <ul style="list-style-type: none"> <li>• MIDAS Council of Governments</li> <li>• City of Fort Dodge (DART)</li> </ul>	<ul style="list-style-type: none"> <li>• Region XII Council of Governments/Western Iowa Transit System</li> </ul>
<b>Housing</b>	<ul style="list-style-type: none"> <li>• North Iowa Regional Housing Authority</li> <li>• Fort Dodge Housing Agency</li> </ul>	<ul style="list-style-type: none"> <li>• Northwest Iowa Regional Housing Authority</li> <li>• Region XII Regional Housing Authority</li> </ul>
<b>Community Health Centers</b>	<ul style="list-style-type: none"> <li>• Community Health Center of Fort Dodge Inc</li> <li>• Proteus Inc Fort Dodge Site</li> </ul>	
<b>Access Centers</b>		None in District
<b>Community-based and Faith-based Organizations</b>		CICS will participate in existing community coalitions and initiate outreach to local nonprofits and faith-based groups. These relationships will be built on mutual trust and an understanding of how CICS services can complement existing supports to better meet community needs.
<b>Certified Community Behavioral Health Centers (CCBHCs)</b>	<ul style="list-style-type: none"> <li>• Berryhill Center</li> <li>• Prairie Ridge</li> </ul>	<ul style="list-style-type: none"> <li>• Plains Area MHC</li> <li>• Seasons Center</li> </ul>
<b>Transition Age Youth</b>		CICS will develop partnerships with schools, youth employment programs,

		and child-serving systems to ensure coordination during key transition points. Staff will engage in cross-system meetings and offer consultative support to help align youth goals with available adult system resources.
<b>Area Agency on Aging (AAA)</b>	<ul style="list-style-type: none"> <li>• Elderbridge Area Agency on Aging</li> </ul>	State Public Guardian
<b>Iowa Workforce Development (IWD)</b>	<ul style="list-style-type: none"> <li>• IowaWORKS</li> <li>• Iowa Vocational Rehabilitation Services (IVRS)</li> </ul>	Local Workforce Development Board

## Continuity of Services

### Services for Individuals

CICS will reach out to clients and providers currently in the region to explain the continuity of care that they will receive during the transition. The procedures below will be followed as well.

#### Assurance of current service amnesty and updating of plans

##### Case Inventory and Assignment Review

- DAPs will pull open and active case data from MHDS Region systems.
- Cases will be sorted by service type and provider to support assignment planning.
- Case lists will be confirmed against the HHS-approved service rollover list to ensure all individuals are accounted for by July 1, 2025.
- DAPs and MHDS Regions will coordinate to finalize appropriate case assignments by the transition date.

##### Transition Meetings and Information Sharing

- Draft Releases of Information will be developed and submitted for Iowa HHS approval.



- Signed Releases of Information will be obtained from individuals.
- DAPs will schedule and conduct transition meetings with MHDS Regions.
- Meetings will ensure warm handoffs occur and complete case records are transferred securely.

**Service Documentation and Assessment Planning**

- DAPs will collect existing service plans, assessments, and related documentation from MHDS Regions.
- Tracking systems will be developed to monitor due dates for upcoming document updates and reassessments.
- DAPs will coordinate with HHS to understand any future changes to assessment and planning requirements and prepare for statewide alignment.

Objective	Description of Task/Duties	Role(s) Responsible	Task Timeframe for Completion
<b>Objective 1: Inventory of open/active cases</b>	Task 1: Pull open case lists from MHDS Region systems.	Disability Access Point Planning Staff	May 2025, June 15 and 30, 2025
	Task 2: Sort cases by service type and provider.	Disability Access Point Program Oversight Staff	May–June 2025
	Task 3: Confirm alignment with HHS-approved rollover list.	Disability Access Point Leadership and Planning Staff	By July 1, 2025
	Task 4: DAPs and MHDS Regions work together to review appropriate assignment of all cases.	Disability Access Point Program Oversight Staff	By July 1, 2025
<b>Objective 2: Case transition meetings</b>	Task 1: Draft Release of Information (Iowa HHS Approval Needed).	Disability Access Point Leadership and Planning Staff	June 1, 2025
	Task 2: Obtain Release of Information from clients.	Disability Access Point Staff	Ongoing by June 30, 2025
	Task 3: The DAP with work with MHDS Region service Coordinators to schedule transition meetings for warm hand offs.	Disability Access Point Program Oversight Staff	Ongoing by June 30, 2025

	Task 4: DAPs will participate in HHS Townhalls and local outreach opportunities to inform the community of transition processes.	Disability Access Point Staff	Ongoing by June 30, 2025
	Task 5: Case transition meetings take place with individual and care staff.	Disability Access Point Staff	Ongoing by June 30, 2025
	Task 6: The MHDS regions staff and DAP work together to review appropriate assignments of cases and complete warm-handoff process.	Disability Access Point Staff	Ongoing by June 30, 2025
<b>Objective 3: Inventory of Individual Current Services</b>	Task 1: Collect individual documents from MHDS Regions.	Disability Access Point Staff	May–June 2025
	Task 2: Develop tracking system for due dates for all required documents and updates.	Disability Access Point Planning and Program Oversight Staff	By July 15, 2025
	Task 3: Coordinate with HHS on future assessment and planning requirements.	Disability Access Point Leadership and Planning Staff	July–August 2025

## Identifying Cases for Future Community Integration Opportunities

### Flagging and Review Procedures

- Coordinate with DAPs to develop a standard set of criteria for identifying individuals who may benefit from reassessment related to community integration opportunities. Helping people move from institutional care will be a priority.
- Share developed criteria with HHS for feedback.
- Create a flagging system within internal tracking tools to tag cases meeting these criteria.
- Identify with HHS if there is an opportunity for statewide flagging and tracking tool development in Aura.

### Reassessment and Action Planning

- Assign flagged cases to appropriate staff for second review and reassessment.
- Conduct team-based case review meetings to evaluate individual needs and opportunities for enhanced integration.
- Document review outcomes using a standardized format and outline any necessary follow-up or service coordination steps.

Objective	Description of Task/Duties	Role(s) Responsible	Task Timeframe for Completion
<b>Objective 1: Establish process to flag cases for second review</b>	Task 1: Develop criteria for flagging individuals for review.	Disability Access Point Planning and Quality Staff	August 2025
	Task 2: Build internal flagging system in case tracking tools.	Disability Access Point IT and Program Oversight Staff	August–September 2025
	Task 3: Coordinate with other DAPs on shared flagging criteria.	Disability Access Point Leadership and Planning Staff	September 2025
<b>Objective 2: Review flagged cases for integration opportunities</b>	Task 1: Assign flagged cases for reassessment.	Disability Access Point Program Oversight Staff	October 2025
	Task 2: Conduct team-based case review meetings.	Disability Access Point Planning and Program Oversight Staff	Beginning October 2025
	Task 3: Document review outcomes and action steps.	Disability Access Point Quality and Program Oversight Staff	Ongoing after October 2025

### Prioritization of STSS Services

#### Development of Prioritization Criteria

- Define how STSS services will be prioritized in the event of limited funding.
- Coordinate with other DAPs to establish consistent criteria across districts.
- Develop internal protocols to guide decision-making on service access.

#### Evaluation of District-Specific Needs

- Assess demographic, geographic, and provider capacity data within each district to identify unique service demands and barriers.

- Establish criteria for when and how districts may implement flexible prioritization strategies while maintaining alignment with core HHS and CICS service principles.
- Integrate district-specific considerations into ongoing DAP coordination to ensure both consistency and responsiveness across the district.

### **Equity and Service Mapping**

- Map the current landscape of STSS providers and identify underserved populations or geographic areas.
- Conduct outreach and initiate contracts with providers to address identified gaps.
- Monitor service utilization trends by location and population group to inform ongoing planning.

### **Addressing Service Duplication and Clarifying Funding Roles**

- Review existing STSS services supported by DAPs, Medicaid, and other funding streams.
- Collaborate with HHS and fellow DAPs to determine appropriate funding responsibilities.
- Revise internal funding strategies and contracting approaches based on areas of duplication or overlap.

### **Coordinating the STSS Service Array**

- Compile a centralized inventory of STSS services, categorized by provider and location.
- Develop reference tools (e.g., referral guides or service directories) to support Navigator decision-making.
- Establish a routine communication process with contracted providers to share updates, address service issues, and coordinate care delivery across the district.

Objective	Description of Task/Duties	Role(s) Responsible	Timeframe for Completion
<b>Objective 1: Develop district-wide STSS prioritization strategy</b>	Task 1: Define prioritization criteria for STSS service access.	Disability Access Point Planning and QA Staff	July–August 2025
	Task 2: Align prioritization criteria across DAPs.	Disability Access Point Leadership and Planning Staff	August–September 2025
	Task 3: Create internal DAP guidance for applying prioritization consistently across all districts.	Disability Access Point Planning and QA Staff	September 2025
<b>Objective 2: Ensure equitable access to STSS services across the district</b>	Task 1: Map current STSS service providers and identify gaps.	Disability Access Point Planning and QA Staff	August 2025
	Task 2: Coordinate outreach and contracting to fill geographic or specialty gaps.	Disability Access Point Leadership and Contracting Staff	September–October 2025
	Task 3: Monitor utilization by geography and priority group.	Disability Access Point Planning and Quality Staff	Starting October 2025
<b>Objective 3: Identify and address STSS service duplication</b>	Task 1: Review existing STSS services funded across systems (DAP, Medicaid, others).	Disability Access Point Planning and Finance Staff	Within first 90 days
	Task 2: Work with other DAPs and HHS to clarify funding responsibilities for unique services.	Disability Access Point Leadership and Finance Staff	Within first 120 days
	Task 3: Adjust contracting strategy based on findings.	Disability Access Point Contracting and Planning Staff	By end of Q1 FY26
<b>Objective 4: Coordinate the STSS service array across the district</b>	Task 1: Create a centralized inventory of STSS services by provider and location.	Disability Access Point Planning and Data Staff	September 2025

	Task 2: Develop internal reference tools to guide referrals and coordination.	Disability Access Point Planning and Quality Staff	October 2025
	Task 3: Establish communication structure among contracted providers.	Disability Access Point Contracting and Engagement Staff	Quarterly, beginning Q2 FY26

## Service Provision Prioritization Work Plan

### Transition Preparation and Client Outreach

- Compile a list of active individuals receiving services using a combination of MHDS Region data and local system reports.
- Begin outreach to inform individuals of DAP contact information and available services.
- Monitor for early service access issues and escalate any transition-related concerns, including staffing gaps, to HHS.
- CICS will initiate communication with individuals about transition ensuring opportunity to communicate about preferences and answer questions about transition.

### Staffing for Service Launch

- Complete hiring and deployment of staff based on anticipated service volumes by July 1.
- Reassess staffing needs quarterly after the District Level Assessment and adjust as needed.
- Ensure readiness to provide Information and Assistance, Options Counseling, STSS, and Service Coordination for LTSS, with initial limitations in Information and Assistance (I&A) and Options Counseling expected until Iowa Aging and Disability Resource Center (ADRC) training is completed. Experienced supervisors will have weekly contact with staff to ensure support and consistency.

### Billing Transition Support

- Identify providers impacted by the transition to SNMIS billing and provide education based on forthcoming HHS guidance.
- Offer technical assistance on SNMIS enrollment and use of fee schedules once they are issued.
- Track and escalate unresolved billing or transition issues to HHS.

### Client-Facing Communications

- Draft plain-language Frequently Asked Questions (FAQs) and service explanations for individuals and families.
- Submit materials for HHS review and approval prior to dissemination.
- Launch an informational campaign emphasizing service continuity and Disability Services Navigator introductions in partnership with HHS.

**Service Monitoring and System Assessment**

- Design tracking tools to monitor STSS availability and core service staffing patterns.
- Integrate findings into the District Level Assessment to inform future decision-making.
- Modify service delivery strategies in response to assessment outcomes.

**Interim STSS Prioritization Planning**

- Prepare a temporary plan to prioritize access to STSS services in the event of funding limitations before HHS guidance is issued.
- Apply formal prioritization and waitlist procedures upon receipt of official HHS criteria.
- Communicate clearly with stakeholders, including HHS, if prioritization or waitlisting becomes necessary.

**Access Infrastructure and Oversight**

- Collaborate with the Iowa ADRC to establish standard access points such as phone, email, in-person hours, and virtual options.
- Publicly post service access information once approved by HHS.
- Begin tracking access data quarterly to identify and address systemic access barriers.

Objective	Description of Task/Duties	Role(s) Responsible	Timeframe for Completion
<b>Objective 1: Maintain continuity of services during transition</b>	Task 1: Finalize list of existing clients based on available MHDS data and District system pulls.	Disability Access Point Leadership, HHS	May - June 2025
	Task 2: Begin outreach to individuals to introduce DAP contacts and services.	Disability Access Point Staff	May - June 2025
	Task 3: Monitor for immediate service gaps during transition period and escalate staffing	Disability Access Point Staff	Ongoing July - December 2025

	concerns impacting Information and Assistance, Options Counseling, and Service Coordination to HHS.		
<b>Objective 2: Ramp up service availability aligned with Disability Services System expectations</b>	Task 1: Complete staff hiring and deployment based on anticipated caseloads to meet July 1, 2025, launch requirements.	Disability Access Point Leadership	May - June 2025
	Task 2: Adjust staffing after October 2025 District Level Assessment if needed.	Disability Access Point Leadership	October - December 2025
	Task 3: Ensure services cover Information and Assistance, Options Counseling, STSS, and Service Coordination of LTSS. Note: Full delivery of Information and Assistance and Options Counseling services may be limited until Iowa ADRC training is completed.	Disability Access Point Leadership	July - October 2025
<b>Objective 3: Prepare providers for SNMIS billing transition</b>	Task 1: Identify providers affected by the billing transition and SNMIS enrollment requirements.	Disability Access Point Staff	June - July 2025
	Task 2: Provide provider education and technical assistance based on HHS SNMIS guidance and published fee schedules.	Disability Access Point Staff	Within 30 days of receiving HHS fee schedules
	Task 3: Track and escalate unresolved billing transition issues to HHS.	Disability Access Point Leadership	Ongoing starting August 2025
<b>Objective 4: Develop and seek approval for client-facing communication materials</b>	Task 1: Draft FAQs, service explanations, and outreach materials for individuals and families.	Disability Access Point Staff	June - July 2025
	Task 2: Submit draft communications to HHS for review and approval.	Disability Access Point Leadership	By July 15, 2025
	Task 3: Launch communication campaign once approved, emphasizing continuity and Navigator introductions.	Disability Access Point Staff	August 2025
<b>Objective 5: Build infrastructure for tracking</b>	Task 1: Design service tracking methods focused on STSS availability and staffing patterns for core services.	Disability Access Point Planning Staff	June 2025



<b>emerging needs and service gaps</b>	Task 2: Integrate findings into formal District Level Assessment.	Disability Access Point Planning Staff	October 15, 2025
	Task 3: Adjust service expansion and staffing plans based on assessment outcomes.	Disability Access Point Leadership	October - December 2025
<b>Objective 6: Prepare for potential STSS waitlist scenarios</b>	Task 1: Develop interim prioritization plan specifically for STSS services if funding gaps occur before HHS issues official waitlist and prioritization criteria.	Disability Access Point Leadership	June 2025
	Task 2: Implement HHS-provided STSS waitlist and prioritization criteria upon receipt.	Disability Access Point Leadership	After July 1, 2025 or upon receipt
	Task 3: Communicate STSS waitlist processes clearly to stakeholders if activated.	Disability Access Point Staff	As needed. CICS will review the actual versus projected expenditures monthly.
<b>Objective 7: Ensure consistent access to Disability Access Point services</b>	Task 1: Collaborate with Iowa ADRC to establish standard methods of access (phone, email, in-person office hours, virtual options).	DAP Leadership	July 2025
	Task 2: Publish information on anticipated public office hours and access channels after HHS approves communication materials.	DAP Communications Staff	June 2025
	Task 3: Track service access patterns quarterly to identify and address barriers.	DAP Planning Staff	Starting October 2025

## Partnerships for Transition Service Planning and Warm Handoffs

### Warm Handoff Protocol Development

- In collaboration with HHS, outline step-by-step procedures and establish a timeline for initiating warm handoffs.
- Create handoff checklists to ensure critical information is shared and transitions are coordinated effectively.

- Collaborate with state-established external case management providers to develop shared language and expectations for transitions.

**Person-Centered Transition Planning**

- Involve individuals, families, and caregivers in planning to ensure transitions reflect their preferences and needs.
- Provide each individual with a written summary of the transition at the point of handoff.
- Offer post-transition check-ins, when appropriate, to support continuity of care and promote service engagement.

**Ongoing Coordination and Feedback**

- Establish designated points of contact with each external case management provider.
- Schedule regular coordination meetings to maintain communication and troubleshoot barriers.
- Develop a feedback mechanism to monitor the success of handoffs and identify opportunities for system improvement.

Objective	Description of Task/Duties	Role(s) Responsible	Timeframe for Completion
<b>Objective 1: Establish a warm handoff protocol for transitions to external case management</b>	Task 1: Define steps and timeline for initiating a warm handoff.	Disability Access Point Planning and Program Oversight Staff	August 2025
	Task 2: Create checklist for handoff planning.	Disability Access Point Quality and Program Oversight Staff	August 2025
	Task 3: Develop shared language and expectations with state established external case management providers.	Disability Access Point Leadership and Community Engagement Staff	August–September 2025
<b>Objective 2: Ensure person-centered and informed transitions</b>	Task 1: Involve individuals, families, and caregivers in the handoff planning process.	Disability Access Point Program Oversight and Community Engagement Staff	September 2025

	Task 2: Provide individuals with written transition summary.	Disability Access Point Staff	At time of transition
	Task 3: Offer post-transition check-in when appropriate.	Disability Access Point Program Oversight Staff	Ongoing beginning October 2025
<b>Objective 3: Coordinate with external case management entities</b>	Task 1: Establish contacts within each state established external case management provider.	Disability Access Point Planning and Community Development Staff	August–September 2025
	Task 2: Schedule regular coordination meetings.	Disability Access Point Leadership	Quarterly beginning Q2 FY26
	Task 3: Create feedback loop for handoff success and issues.	Disability Access Point Program Oversight and Quality Staff	Starting Q4 FY26

# Engagement and Outreach

## Communication Plan for Stakeholder Engagement

### Provider Communication Strategy

- Establish a regular meeting schedule with providers, staff teams, and key system partners across the district.
- Facilitate ongoing discussions with former MHDS Regions and major network partners to support continuity and collaboration.
- Coordinate with Iowa ADRC to inform providers about required training and distribute information about system changes.

### Stakeholder Engagement and System Awareness

- Create feedback loops with individuals with lived experience, caregivers, and community stakeholders to ensure continuous communication and improvement.
- Develop outreach strategies to raise awareness of the new system among potentially eligible individuals, community groups, law enforcement, legislators, and others.

- Launch a plain-language public education campaign introducing DAPs and the services available.

**Tracking and Cross-District Coordination**

- Build a centralized system to log outreach activities and stakeholder interactions.
- Develop templates to summarize stakeholder feedback and identify emerging themes or concerns.
- Establish a cross-DAP data-sharing process to align engagement strategies and track system-wide trends.

**Inclusive and Targeted Outreach**

- Partner with culturally specific and disability-led organizations to strengthen outreach and ensure diverse community representation.
- Translate outreach materials and disseminate them through relevant networks.
- Leverage peer-led groups and trusted community-based organizations to act as messengers for the new system.

Objective	Description of Task/Duties	Role(s) Responsible	Timeframe for Completion
<b>Objective 1: Provider Engagement Communication</b>	Task 1: Establish and advertise regular district meetings and office hours cadence with providers, DAP teams and partners.	Community Development Manager(s), Contracting & Planning Team	Starting July 2025
	Task 2: District meetings w/ Regions and key network partners and leaders for introduction and transition.	DAP Leadership	June 2025
	Task 3: Identify Training Needs for STSS Service Providers, develop training and advertise STSS training opportunities, including but not limited to STSS billing to DAP.	DAP Leadership	June – July, 2025
	Task 4: Collaborate with UCEDD to inform providers of Provider Training and complete outreach for upcoming system trainings (ADRC TA & Call Center).	Provider Engagement and UCEDD Liaison	August–October 2025
	Task 5: Collect District level STSS provider network feedback for future District planning and assessment efforts.	Assessment SME	Ongoing

<b>Objective 2: Stakeholder Engagement Communication</b>	Task 1: Establish regular district feedback and communication feedback loop with individuals with lived experience, caregivers, and stakeholders.	Community Development and Engagement Team	Launch by October 2025
	Task 2: Communication strategies to market system change to potentially eligible individuals, caregivers, community members, legislators, law enforcement, etc.	Communications & Outreach Team, Iowa HHS	September–December 2025
	Task 3: Launch plain-language campaign on Disability Access Points.	Outreach Team with UCEDD Support, Iowa HHS	October 2025
<b>Objective 3: Build infrastructure for tracking outreach and engagement</b>	Task 1: Create centralized tracking log for stakeholder engagement.	Administrative or QA Team	By September 2025
	Task 2: Develop summary template to track trends in feedback.	QA and Planning Team	October 2025
	Task 3: Create data-sharing structure across districts for feedback themes	DAP Leadership and UCEDD	Starting Q1 FY26
<b>Objective 4: Expand outreach to historically underrepresented groups</b>	Task 1: Identify and partner with culturally specific and disability-led organizations.	Community Development Manager(s)	Beginning August 2025
	Task 2: Translate key outreach materials and distribute via diverse networks.	Communications Team, HHS Iowa	September–October 2025
	Task 3: Engage peer-led and community-based groups as trusted messengers.	Peer Leaders, Faith-Based and Cultural Orgs	October–December 2025

## Individuals Served

The Disability Access Points (DAPs) will operationalize engagement with individuals served in two ways:

- (1) Upfront engagement during initial contact to welcome participation and promote person-centered services, and
- (2) Follow-up engagement to understand whether services accessed are beneficial in helping individuals achieve their self-defined goals and live autonomously.

These engagement efforts are grounded in the Science of Hope, which emphasizes the importance of nurturing belief in positive outcomes and building pathways to achieve those outcomes. By fostering a sense of agency and identifying realistic strategies to overcome barriers, DAPs aim to instill hope as a measurable, dynamic resource that empowers individuals to pursue meaningful, self-directed lives.

## **Channels of Communication**

Disability Access Points (DAPs) will utilize the following communication channels to engage individuals served:

- Direct conversations during intake (in-person, phone, or video call).
- Follow-up phone calls and secure emails.
- Printed materials such as flyers and intake handouts (pending HHS approval).
- Social media posts and website updates (pending HHS approval).
- Outreach through partners and referral networks.

These strategies will ensure that individuals have clear, repeated opportunities to provide feedback on their experiences and to participate in shaping services in a person-centered and hope-centered way.

Phase 1 efforts will prioritize getting these activities operational by July 1, 2025, with acknowledgment that processes will evolve once HHS systems, Iowa ADRC training, and additional guidance are available.

Key approaches include:

- Upfront communication at intake about the opportunity for individuals to provide feedback later.
- In-the-moment satisfaction checks for I&A encounters.
- Structured voluntary follow-up surveys for Options Counseling, STSS, LTSS Service Coordination, and Home and Community-Based Services (HCBS) Navigation services.
- Use of interim tools initially, transitioning to HHS-provided systems when available.
- Selection of evidence-based tools to measure outcomes in a way that reflects the Science of Hope and person-centered practices.
- Tracking client participation rates, declines, and feedback outcomes to inform system improvements.

**Notes:**

- Participation in feedback activities will be fully voluntary and offered in a manner that is functional and accessible for the individual.
- Feedback procedures will be updated as needed following Iowa ADRC training and HHS system rollout.
- DAPs will develop and submit outreach and engagement materials for HHS approval before dissemination (targeting July 15, 2025).

Objective	Description of Task/Duties	Role(s) Responsible	Timeframe for Completion
Objective 1: Establish upfront engagement at initial contact (Phase 1)	Task 1: Develop interim standard language for staff to introduce feedback opportunities at intake for July 1 launch.	Disability Access Point Leadership/Iowa ADRC	June 2025
	Task 2: Integrate basic consent tracking into case management system for Phase 1. Plan update after HHS tools are available.	Disability Access Point IT/Planning Staff/Iowa ADRC	July 2025
Objective 2: Implement in-the-moment feedback collection for I&A services (Phase 1)	Task 1: Develop and test a short satisfaction check-in tool for immediate use at intake (Phase 1).	Disability Access Point Planning Staff/Iowa ADRC	June 2025
	Task 2: Train I&A staff on using the immediate check-in tool.	Disability Access Point Training Staff/Iowa ADRC	June - July 2025
	Task 3: Launch basic in-the-moment feedback collection for I&A encounters by July 1.	Disability Access Point Staff/Iowa ADRC	July 2025
Objective 3: Establish structured follow-up methods for Options Counseling, STSS, LTSS, and HCBS Navigation (Phase 1)	Task 1: Develop Phase 1 follow-up timelines and templates for each service type, pending final HHS guidance.	Disability Access Point Planning Staff/Iowa ADRC	June 2025
	Task 2: Create clear procedures for voluntary feedback and opt-out tracking.	Disability Access Point Planning Staff/Iowa ADRC	June 2025

	Task 3: Pilot Phase 1 follow-up procedures and adjust based on early results.	Disability Access Point Staff/Iowa ADRC	July - August 2025
Objective 4: Research and recommend evidence-based feedback tools	Task 1: Identify and review suggested tools such as SWLS, POMs, and WHOQOL-BREF for Options Counseling and Service Coordination.	Disability Access Point Leadership and Planning Staff/Iowa ADRC	May - June 2025
	Task 2: Facilitate DAP-wide discussion and decision on selected tools.	Disability Access Point Leadership/Iowa ADRC	June 2025
	Task 3: Develop implementation procedures for selected feedback tools after approval.	Disability Access Point Planning Staff/Iowa ADRC	July 2025
Objective 5: Develop data tracking and reporting procedures (Phase 1)	Task 1: Develop internal tracking sheets for engagement and follow-up until HHS system is available.	Disability Access Point Planning Staff/Iowa ADRC	June 2025
	Task 2: Transition to HHS-provided tracking and reporting system once available (HHS expected to provide standards and tools by April 15, 2025).	Disability Access Point Planning and IT Staff/Iowa ADRC	Upon receipt from HHS
	Task 3: Analyze feedback trends quarterly to guide service improvements.	Disability Access Point Planning and Leadership Staff/Iowa ADRC	Starting October 2025
Objective 6: Communicate feedback opportunities to individuals (Phase 1)	Task 1: Create interim feedback invitation scripts and materials for July 1 go-live (Phase 1).	Disability Access Point Communications Staff/Iowa ADRC	June 2025



	Task 2: Submit final, polished feedback materials to HHS for review and approval (HHS review required before public dissemination).	Disability Access Point Leadership/Iowa ADRC	July 15, 2025
	Task 3: Launch final approved outreach about feedback opportunities in client communications.	Disability Access Point Staff/Iowa ADRC	August 2025

## Advisory Council Work Plan

### Recruitment for District Advisory Council

DAPs will design and launch an inclusive recruitment process to establish Advisory Councils representing individuals with disabilities, caregivers, and community members.

- Design the council application form and promotional outreach materials.
- Publish the application and promote widely across the district.
- Create a transparent process and criteria for selecting council members.
- Develop a council charter for HHS review and approval.
- Finalize council membership roster with HHS approval and publicize by August 1, 2025.

### Meeting Scheduling

DAPs will set a clear meeting structure to support consistent council functioning.

- Identify preferred meeting days/times based on new members' availability
- Establish a full-year meeting calendar
- Create standard templates for agendas and meeting materials to streamline preparation

### Establish Council Function and Process

DAPs will formalize the council's advisory role and integrate it into Disability Access Point operations and planning.

- Define the Advisory Council’s responsibilities and feedback channels.
- Develop onboarding and communication materials for council members.
- Conduct onboarding sessions and offer mentoring support through partnerships with ADRC and DD Council resources.
- Integrate regular council review of district planning and activities.

**Sustain Engagement and Ensure Diverse Input**

DAPs will build structures to promote long-term engagement and diversity of perspectives within the council.

- Offer stipends or other incentives to reduce barriers to participation.
- Ensure all meetings are fully accessible and provide accommodations as needed.
- Establish rotating roles and leadership opportunities within the council to encourage ongoing involvement and ownership.

Objective	Description of Task/Duties	Role(s) Responsible	Timeframe for Completion
<b>Objective 1: Recruitment for District Advisory Council</b>	Task 1: Design Application Form.	Planning Team	June 2025
	Task 2: Develop outreach materials for promotion of application.	Communications and Community Development Team	June 2025
	Task 3: Publish application.	Communications & Admin	June–July 2025
	Task 4: Create process/criteria for determining council members.	Leadership Team	July 2025
	Task 5: Develop council charter (Iowa HHS Approval).	Planning Team	July 2025
	Task 6: Finalize council membership (Iowa HHS Approval).	Leadership Team	July 2025
	Task 7: Notification/publicizing council membership.	Communications	August 1, 2025
<b>Objective 2: Meeting Scheduling</b>	Task 1: Identify preferred days/times based on member availability.	Admin or Planning Support	August 2025

	Task 2: Set calendar of meetings for the first year.	Admin Support	August 2025
	Task 3: Create standard meeting agenda and materials templates.	Planning Team	August–September 2025
<b>Objective 3: Establish council function and process</b>	Task 1: Define advisory responsibilities and feedback channels.	Planning & Policy Team	September 2025
	Task 2: Develop Advisory Council onboarding and communication materials.	Planning and Policy Team	September 2025
	Task 3: Provide onboarding session and access to mentoring for new members.	Community Engagement Team, ADRC partners, DD Council	September 2025
	Task 4: Integrate council review of district plan into DAP planning cycles.	Planning and QA Leads	Q4 FY25 onward
<b>Objective 4: Sustain engagement and ensure diverse input</b>	Task 1: Offer stipends or incentives for participation.	Admin & Fiscal Lead	October 2025
	Task 2: Provide accessibility and accommodations for all meetings.	Admin Support & UCEDD	Ongoing
	Task 3: Build in rotating roles and opportunities for leadership.	Council Facilitator & Chair	Ongoing

## Operations

### Disability Access Point(s)

<b>District</b>	2 (Calhoun, Humboldt, Pocahontas, Sac, Webster)
<b>Site Location Name</b>	Elderbridge Agency on Aging
<b>Address</b>	308 Central Ave. Suite C. Fort Dodge 50501
<b>Point of Contact Name(s)</b>	Brittany Baker

<b>Hours</b>	8:00 am- 4:30 pm
<b>Phone number</b>	(515) 416-6904

<b>District</b>	2 (Clay, Palo Alto,)
<b>Site Location Name</b>	Elderbridge Agency on Aging
<b>Address</b>	714 10 <sup>th</sup> Ave E. Spencer, IA 51301
<b>Point of Contact Name(s)</b>	Beth Will
<b>Hours</b>	8:00 am- 4:30 pm
<b>Phone number</b>	(515)766-4322

<b>District</b>	2 (Hancock, Wright, Kossuth, Winnebago, Worth)
<b>Site Location Name</b>	Duncan Heights
<b>Address</b>	236 State St. Garner, IA 50438
<b>Point of Contact Name(s)</b>	Jessica Crawford
<b>Hours</b>	8:00 am- 4:30 pm
<b>Phone number</b>	(515) 416-4451

<b>District</b>	2 (Dickinson, Emmet)
<b>Site Location Name</b>	Dickinson County Courthouse
<b>Address</b>	1802 Hill Ave. Spirit Lake, IA 51360
<b>Point of Contact Name(s)</b>	Beth Will
<b>Hours</b>	8:00 am- 4:30 pm

<b>Phone number</b>	(515)766-4322
---------------------	---------------

## Service Coordinator Caseload Evaluation Process

- During the transition process, DAPs will allow LTSS service coordination caseloads to be up to 60 cases. As DAPs develop LTSS criteria and assess individuals, DAPs will transfer individuals to the appropriate state established case management providers.

If an exception to the 45-case maximum per Service Coordinator is necessary, the DAP will implement a structured process to evaluate and document the rationale. The evaluation process will include both quantitative and qualitative measures to ensure that service quality, responsiveness, and individual outcomes are not compromised. Disability Service Navigators (DSNs) will have a mixed caseload and LTSS cases will be prorated. In this district, LTSS caseloads will not exceed 50% of a DSN time.

### Evaluation Components:

- **Caseload Review Template:** Supervisors will use a standardized tool to review each Service Coordinator's active caseload, documenting:
  - Number of open cases.
  - Intensity level of each case (e.g., frequency of contact, number of services coordinated).
  - Status of each individual's plan (e.g., new intake, active coordination, maintenance).
- **Workload Balance Factors:**
  - Geographic span and travel demands.
  - Complexity of individual needs.
  - Coordination with external providers or systems (e.g., MCOs, CCBHCs, housing providers).
  - Staff tenure and training level.

### Review Process:

- **Monthly Supervisor Review:** Supervisors will monitor caseload counts monthly and flag potential overages.
- **Quarterly Formal Caseload Audits:** A deeper review will occur quarterly to assess workload balance and outcomes.
- **Exception Request Protocol:** If a Service Coordinator's caseload exceeds 45 due to temporary or justified reasons, a formal exception request will be submitted to Iowa HHS with supporting documentation.

- **Action Plan for Adjustment:** If caseload overages are determined to be unsustainable, an action plan will be developed which may include:
  - Reassignment of cases
  - Hiring additional staff
  - Temporary reduction in new intakes

### **Outcome Monitoring:**

- Regular check-ins will assess the impact of caseload size on service quality, timeliness, and individual engagement.
- Feedback from individuals served may be used as part of the quality monitoring process.

### **Shared DAP Decision Points for Caseload Evaluation**

- Agree on a standard caseload review template used across DAPs.
- Establish shared definitions of case complexity to support consistent evaluations.
- Coordinate expectations around what constitutes justification for exceeding the 45-case limit.
- Align on documentation and submission standards for HHS exception requests.
- Collaborate on the format and frequency of reporting caseload data to HHS.

### **Grievance Policy and Process**

#### Grievance Policy

CICS believes all individuals with disabilities should be treated with dignity and respect. CICS offers a grievance procedure for individuals who are unhappy about DAP services or employee interactions for any reason. A grievance must be filed within 30 days of the action or event that triggered the grievance.

#### **Grievance Intake Process**

To file a grievance:

Name: Jen Sheehan  
Call: (515) 513-6870

Email: info@cicsmhds.org  
Fax: (515) 985-0587  
Mail: PO Box 58  
Hampton, IA 50441

If you would like someone to file the grievance for you, please contact Jen Sheehan to provide written permission and obtain assistance with the next steps.

Please fill out the DAP Release of Information form when you submit your grievance.

**The grievance must include the following information:**

Date of Occurrence

Name of individual or concern the grievance is regarding

Name of representative filing the grievance (if not the individual)

Contact information including phone number and address

A clear description of the reason for the grievance

Grievance Review – The Disability Access Point executive staff shall review grievances. The grievant will be contacted by an executive staff member within five (5) working days of the receipt of the grievance. The staff, upon consent, shall collect additional information from the grievant and other sources, if necessary. A meeting with the grievant may be scheduled to discuss the facts, consider additional information the grievant submits relevant to the grievance, and work toward a resolution. Following a review of additional information and all relevant facts, a written decision shall be issued no later than five (5) working days following contact with the grievant. A copy of the decision shall be sent to the grievant and/or representative by regular mail. The grievance will be documented and reported to HHS Iowa as required in quarterly reports.

**Grievance Policy Posted Location and Visibility**

The Grievance Policy will be posted at all DAP office locations and on the DAP website.

**Client Intake and Eligibility**



## Summary:

- No-wrong-door access through walk-ins, phone, email, or referral.
- Crisis response protocols activated immediately when needed.
- Person-centered intake interview conducted within 1–2 business days.
- Comprehensive assessment includes demographics, needs, risks, and supports.
- Financial eligibility determined using Iowa HHS form, with flexibility if documentation is delayed.
- Engagement level determined: Information & Assistance, Options Counseling, HCBS System Navigation, or LTSS Service Coordination.
- Follow-up scheduled based on chosen engagement level.
- All relevant actions and outcomes documented in the case management system.
- Quality assurance includes supervision, feedback loops, and individual rights protections.

See Appendix B for further details.

## DAP Collaboration

### Narrative and Operational Outline

The DAP Directors are committed to working collaboratively with each other, Iowa HHS, the ADRC Call Center, ADRC member organizations, the Behavioral Health Administrative Service Organization (BH-ASO), and system stakeholders to ensure alignment, consistency, and accessibility across the statewide Disability Services System. This collaboration is foundational to the system's design and will continue throughout the launch, transition, and maintenance phases to uphold the integrity of the Disability Services System.

I. Launch Phase: Building Infrastructure and Statewide Alignment- Maintain daily communication among DAP Directors following award announcements.

- Utilize a centralized Microsoft Teams platform to share documents, coordinate discussions, and co-develop tools
- Joint development of key implementation tools, including:
  - Disability Services Navigator job description.
  - Standardized Release of Information form.
  - District Transition Plans.
- Conduct weekly Director meetings to:
  - Align on shared priorities, timelines, and rollout activities.

- Exchange updates on implementation progress and problem-solving efforts.
- Coordinate development of outreach, training, and internal messaging materials.
- Integrate technical assistance from the ADRC team to guide systems development.
- Collaborate with Iowa HHS to support policy consistency and resolve system design questions.
- Incorporate stakeholder feedback to ensure accessible and inclusive implementation across all districts.

## II. Transition Phase: Ensuring Readiness Across Districts

- Evaluate core system components, including the Disability Services Navigator role and service coordination workflows.
- Collect and analyze feedback from individuals served, front-line staff, and partners.
- Modify tools and processes based on district-level experiences and lessons learned.
- Identify and mitigate access disparities across geographic or demographic lines.
- Coordinate inter-district alignment of policies and procedures.
- Share best practices, process refinements, and templates via the shared Teams site.
- Establish shared baseline metrics to support statewide consistency and track progress.

## III. Maintenance Phase: Sustaining Collaboration and System Integrity

- Continue monthly DAP Director meetings to:
  - Review data related to access, referrals, and service outcomes.
  - Coordinate updates to shared procedures and internal tools.
  - Plan ongoing training, stakeholder engagement, and public communications.
  - Maintain the Microsoft Teams site as a living hub for collaboration.
  - Develop a shared calendar of systemwide events, training dates, and critical deadlines.
  - Explore shared dashboards or metric-tracking systems to monitor alignment and equity.
  - Initiate collaborative quality improvement efforts (e.g., annual joint trainings or inter-district evaluation projects).

Objective	Description of Task/Duties	Role(s) Responsible	Timeframe for Completion
<b>Objective 1: Establish statewide communication and shared infrastructure for DAP collaboration</b>	Task 1: Create and maintain shared Microsoft Teams platform.	DAP Directors	May 2025
	Task 2: Conduct weekly DAP Director meetings to align implementation.	DAP Directors	Weekly beginning May 2025

	Task 3: Collaboratively develop shared tools (Navigator job description, ROI form, transition plans).	DAP Directors, Iowa HHS	By July 1, 2025
<b>Objective 2: Align system procedures and resolve transition-related issues</b>	Task 1: Integrate ADRC TA guidance into system development.	DAP Directors, ADRC TA Team	Ongoing through Q3 2025
	Task 2: Identify and resolve cross-District disparities or policy gaps.	DAP Directors, Iowa HHS	August–September 2025
	Task 3: Standardize shared baseline metrics for consistency.	DAP Directors, Data Leads	September 2025
<b>Objective 3: Sustain long-term collaboration and continuous improvement</b>	Task 1: Maintain monthly DAP Director meetings to review outcomes and align on system needs.	DAP Directors	Ongoing beginning Q4 2025
	Task 2: Coordinate joint systemwide trainings and public engagement strategies.	DAP Directors, Communications Team	Quarterly beginning Q1 2026
	Task 3: Maintain shared calendar and explore dashboard reporting tools.	DAP Administrative Team, Data Leads	Q1 2026

Appendix A  
Job Descriptions

**Job Description  
Chief Executive Officer**



**NAME:**

**POSITION:** Chief Executive Officer (CEO)

**REPORTS TO:** CICS Governing Board

**DEPARTMENT:** Collaborative Individual and Community Supports (CICS)

**FLSA STATUS:** Exempt

**POSITION SUMMARY**  
The Chief Executive Officer serves as the single point of accountability for CICS. The responsibilities of the CEO include, but are not limited to: planning, budgeting, monitoring expenditures, and ensuring the delivery of quality services that achieve expected outcomes for the individuals served.

The CEO may assign duties and responsibilities to CICS staff, to ensure each of the required functions are performed. Ultimate responsibility for completion of those duties and responsibilities falls upon the CEO. These responsibilities are identified in the job descriptions of the assigned staff members.

This position is subject to criminal and abuse background checks and may require pre-employment physical, including drug screening.

**SALARY**  
As set by the CICS Governing Board.

- ESSENTIAL DUTIES AND RESPONSIBILITIES**
- Directs internal organization.
    - ♦ Develops job descriptions and job assignments for CICS.
    - ♦ Ensures job responsibilities within CICS are being completed.
  - Directs assessment, strategic planning, and development necessary to fulfill CICS's mission.
  - Develops and directs implementation of strategy to support organizational goals and objectives.
  - Directs the collection, use, reporting, and sharing of data required by contracts or statute.
  - Directs the development of budgets.
  - Directs completion and submission of required reports and documents.
  - Directs appeals and grievance process.
  - Directs HR functions.
  - Directs quality assurance.
  - Designates office locations.
  - Establishes a wait list if needed.
  - Develops orientation training for Governing Board members.
  - Prepares agenda for Board meeting.
  - Ensures HIPAA standards are complied with across the organization.
  - Manages CICS contracts.
  - Ensures fulfillment of all statutory and contractual requirements.
  - Directs public relations and communications efforts.
  - Builds relationships with other organizations and stakeholders.
  - Monitors, interprets, and analyzes implications of pending legislation.
  - Other duties as assigned by the CICS Governing Board.

- NECESSARY KNOWLEDGE, SKILLS, AND ABILITIES**  
The successful candidate must possess the following knowledge, skills, and abilities or be able to explain and demonstrate that he/she can perform the essential functions of the job:
- Ability to apply advanced mathematical concepts and demonstrate a high level of reasoning and logical thinking.
  - Ability to communicate effectively, both oral and written, and execute excellent people skills.
  - Ability to deal effectively with other government agencies and departments.



NAME: \_\_\_\_\_ JOB DESCRIPTION: Chief Executive Officer (CEO)

- Ability to exercise good judgment, evaluate situations, and make responsible recommendations.
- Ability to make effective and persuasive speeches and presentations on controversial or complex topics.
- Ability to negotiate and resolve conflict between dissenting parties.
- Ability to organize, plan, and schedule effective meetings and hearings, and to provide guidance on meeting and hearing procedures.
- Ability to work without immediate supervision. Must be a self-starter and well disciplined.
- Demonstrated ability to read, analyze, and interpret complex documents.
- Knowledge and experience in information privacy and security laws, access, release of information, and release control technologies.
- Knowledge of the principles of organization, planning, management, supervision, and accounting.
- Knowledgeable in health and human services.
- Demonstrates competent computer skills.

**ENTRY REQUIREMENTS**

- Graduation from an accredited four-year college or university with a degree in psychology, sociology, social work, business administration, public administration, finance, public health, or law which includes 30 semester hours or equivalent quarter hours in a human services field.
- A minimum of three years of experience in the delivery of services to individuals with mental illness, intellectual disabilities, brain injuries, or other developmental disabilities.
- Experience equal to five years of full-time management-oriented work that includes accountability for organizational operations and budget in addition to management of staff.
- A valid driver's license, reliable transportation, and adequate liability insurance are required.

**WORK ENVIRONMENT**

While performing the duties required of this position, the employee is regularly subject to a mentally stressful environment; however, the likelihood of bodily injury or similar occupational hazard is slight. Must have physical and mental stamina and be able to perform successfully under time-limited pressure.

Regular work hours are 8:00 am to 4:30 pm, Monday through Friday. Must have the flexibility to adjust the schedule in order to fulfill assigned duties. Travel for this position is required.

**PHYSICAL REQUIREMENTS**

Must be physically able to operate a variety of automated office machines and equipment. The position may entail long periods of sitting or driving, depending on circumstances. In most cases, physical demand requirements are at a level of those for sedentary or office environment work which may involve some lifting, carrying, pushing, and/or pulling of light to moderate weight materials (approximately thirty pounds).

**DISCLAIMER**

- Marginal functions of the position that are incidental to the performance of essential job duties have been excluded from this description.
- All requirements are subject to possible modification to reasonably accommodate qualified individuals with disabilities. Prospective employees are encouraged to discuss possible accommodations with the employer.
- Job description in no way implies that the description includes every duty to be performed by the employee in the position. Employees will be required to follow any other job-related instructions and to perform any other job-related duties required by the CICS Governing Board.

Franklin County is an Equal Opportunity Employer. In compliance with the Americans with Disabilities Act, reasonable accommodations will be provided to qualified individuals with disabilities. Prospective employees are encouraged to discuss potential needs for accommodations with the employer.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**Job Description  
Chief Operating Officer**



**NAME:**

**POSITION:** Chief Operating Officer (COO)

**REPORTS TO:** CICS Chief Executive Officer

**DEPARTMENT:** Collaborative Individual and Community Supports (CICS)

**FLSA STATUS:** Exempt

**POSITION SUMMARY**

The Chief Operating Officer is responsible for strategic management and oversight of CICS operations, development and modification of assigned documents and reports, and performing human resource related activities for CICS. In absence of the CEO, the COO will fulfill those duties.

This position is subject to criminal and abuse background checks and may require pre-employment physical, including drug screening.

**SALARY**

As set by the CICS Governing Board.

**ESSENTIAL DUTIES AND RESPONSIBILITIES**

- Prepares required reports and documents.
- Prepares policies and procedures and amendments as necessary.
- Assists with assessment, strategic planning, and development necessary to fulfill CICS's mission.
- Assists with the development and implementation of strategy to support organizational goals and objectives.
- Oversees quality assurance.
- Assists with the collection, use, reporting, and sharing of data required by contracts or statute.
- Prepares recommendations to meet contractual obligations.
- Negotiates and administers contracts, grants, and cooperative agreements, as assigned.
- Presents contracts, contract amendments, and agreements to the CEO for consideration.
- Assists in developing or updating standard operating procedures.
- Organizes and updates internal policies.
- Serves as communication liaison, facilitating both formal and informal feedback processes as assigned.
- Acts as the liaison and performs select human resource related activities in consultation with the Employer of Record.
- Manages employee hiring and onboarding process.
- Oversees development and implementation of employee training.
- Oversees Information Technology.
- Supervises assigned staff.
- Oversees job performance of assigned staff through regular job performance evaluations.
- Oversees assigned staff leave time approval and other personnel functions as assigned by CEO.
- Develops and documents staff trainings for assigned staff.
- Monitors workloads and submits recommendations for personnel needs to the CEO.
- Reviews and/or revises processes in area of responsibility to ensure compliance with laws, regulations, policies, plans, and procedures.
- Other duties as assigned by the CEO.

**NECESSARY KNOWLEDGE, SKILLS, AND ABILITIES**

The successful candidate must possess the following knowledge, skills, and abilities or be able to explain and demonstrate that he/she can perform the essential functions of the job:

- Ability to deal effectively with other government agencies and departments.
- Ability to exercise good judgment, evaluate situations, and make responsible recommendations.
- Ability to work without immediate supervision. Must be a self-starter and well disciplined.
- Ability to communicate effectively, both oral and written, and execute excellent people skills.
- Ability to negotiate and resolve conflict between dissenting parties.

**NAME:** \_\_\_\_\_ **JOB DESCRIPTION:** Chief Operating Officer (COO)

- Demonstrated ability to read, analyze and interpret complex documents.
- Demonstrated leadership skills with the ability to delegate, motivate and inspire staff.
- Demonstrated ability in critical thinking and problem solving.
- Demonstrates competent computer skills.
- Knowledge of the principles of organization, planning, management, and supervision.
- Knowledgeable in health and human services.

**ENTRY REQUIREMENTS**

- A bachelor's degree and at least one year of experience in the delivery of services to individuals with mental illness, intellectual disabilities, brain injury, or other developmental disabilities and three years' experience in organizational leadership and development.
- A valid driver's license, reliable transportation, and adequate liability insurance are required.

**WORK ENVIRONMENT**

While performing the duties required of this position, the employee is regularly subjected to a mentally stressful environment; however, the likelihood of bodily injury or similar occupational hazard is slight. Must have physical and mental stamina and be able to perform successfully under time-limited pressure.

Regular work schedule is 8:00 am to 4:30 pm, Monday through Friday. Must have the flexibility to adjust the schedule in order to fulfill assigned duties. Travel for this position is required.

**PHYSICAL REQUIREMENTS**

Must be physically able to operate a variety of automated office machines and equipment. The position may entail long periods of sitting or driving, depending on circumstances. In most cases, physical demand requirements are at a level of those for sedentary or office environment work which may involve some lifting, carrying, pushing, and/or pulling of light to moderate weight materials (approximately thirty pounds).

**DISCLAIMER**

- Marginal functions of the position that are incidental to the performance of essential job duties have been excluded from this description.
- All requirements are subject to possible modification to reasonably accommodate qualified individuals with disabilities. Prospective employees are encouraged to discuss possible accommodations with the employer.
- Job description in no way implies that the description includes every duty to be performed by the employee in the position. Employees will be required to follow any other job-related instructions and to perform any other job-related duties required by the CEO.

Franklin County is an Equal Opportunity Employer. In compliance with the Americans with Disabilities Act, reasonable accommodations will be provided to qualified individuals with disabilities. Prospective employees are encouraged to discuss potential needs for accommodations with the employer.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date



**Job Description  
Chief Financial Officer**



**NAME:**

**POSITION:** Chief Financial Officer (CFO)

**REPORTS TO:** CICS Chief Executive Officer

**DEPARTMENT:** Collaborative Individual and Community Supports (CICS)

**FLSA STATUS:** Exempt

**POSITION SUMMARY**

The Chief Financial Officer is responsible for managing CICS’s finances, including financial planning, financial analysis, program feasibility and financial risk analysis, record-keeping, and financial reporting.

This position is subject to criminal and abuse background checks and may require pre-employment physical, including drug screening.

**SALARY**

As set by the CICS Governing Board.

**ESSENTIAL DUTIES AND RESPONSIBILITIES**

- Compiles detailed financial information for the preparation of the budget:
  - ♦ analyzes/reports on revenue and expenditure growth, trends, and projections;
  - ♦ analyzes the effect that changes in revenue/expenditures will have on the budget and financial forecasting;
  - ♦ works with the CEO and COO in preparing the budget.
- Advises the CEO regarding financial and budgetary issues when necessary.
- Manages the claim payment process.
- Responsible for accounts payable and receivable activities for CICS and researching discrepancies in payments.
- Analyzes the effects of proposed projects and actions regarding long-term cost effectiveness and financial forecasting.
- Provides monthly reports regarding finances, encumbered funding, prospective fund balance, and other financial data.
- Participates in the development, implementation, or interpretation of new or revised services by providing financial analysis and funding or payment protocols.
- Determines the need for and recommends a waiting list to the CEO, if needed.
- Coordinates on the annual auditing process and presents finalized audit.
- Oversees the Fiscal Agent Agreement.
- Supervises assigned staff.
- Oversees job performance of assigned staff through regular job performance evaluations.
- Oversees assigned staff leave time approval and other personnel functions as assigned by CEO.
- Develops and documents trainings for assigned staff.
- Monitors workloads and submits recommendations for personnel needs to the CEO.
- Reviews and/or revises processes in area of responsibility to ensure compliance with laws, regulations, policies, plans, and procedures.
- Other duties as assigned by the CEO.

**NECESSARY KNOWLEDGE, SKILLS, AND ABILITIES**

The successful candidate must possess the following knowledge, skills, and abilities or be able to explain and demonstrate that he/she can perform the essential functions of the job:

- Ability to apply advanced mathematical concepts and demonstrate a high level of reasoning and logical thinking.
- Ability to communicate effectively, both oral and written, and execute excellent people skills.
- Ability to exercise good judgment, evaluate situations, and make responsible recommendations.
- Ability to negotiate and resolve conflict between dissenting parties.
- Ability to work without immediate supervision. Must be a self-starter and well disciplined.
- Demonstrated ability to read, analyze and interpret complex documents and financial reports.
- Demonstrated leadership skills.

**NAME:** \_\_\_\_\_ **JOB DESCRIPTION:** Chief Financial Officer (CFO)

- Knowledge and experience in accounting and financial principles.
- Demonstrates competent computer skills.

**ENTRY REQUIREMENTS**

- Graduation from an accredited four-year college or university with a degree in business administration, public administration, finance, or law.
- A minimum of three years of experience in accounting or finance and service delivery, including in a management/supervisory role.
- A valid driver's license, reliable transportation, and adequate liability insurance are required.

**WORK ENVIRONMENT**

While performing the duties required of this position, the employee is regularly subject to a mentally stressful environment; however, the likelihood of bodily injury or similar occupational hazard is slight. Must have physical and mental stamina and be able to perform successfully under time-limited pressure.

Regular work hours are 8:00 am to 4:30 pm, Monday through Friday. Must have the flexibility to adjust the schedule in order to fulfill assigned duties. Travel for this position is required.

**PHYSICAL REQUIREMENTS**

Must be physically able to operate a variety of automated office machines and equipment. The position may entail long periods of sitting or driving, depending on circumstances. In most cases, physical demand requirements are at a level of those for sedentary or office environment work which may involve some lifting, carrying, pushing, and/or pulling of light to moderate weight materials (approximately thirty pounds).

**DISCLAIMER**

- Marginal functions of the position that are incidental to the performance of essential job duties have been excluded from this description.
- All requirements are subject to possible modification to reasonably accommodate qualified individuals with disabilities. Prospective employees are encouraged to discuss possible accommodations with the employer.
- Job description in no way implies that the description includes every duty to be performed by the employee in the position. Employees will be required to follow any other job-related instructions and to perform any other job-related duties required by the CEO.

Franklin County is an Equal Opportunity Employer. In compliance with the Americans with Disabilities Act, reasonable accommodations will be provided to qualified individuals with disabilities. Prospective employees are encouraged to discuss potential needs for accommodations with the employer.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**Job Description  
Disability Services Navigation  
Program Manager**



**NAME:**

**POSITION:** Disability Services Navigation Program Manager

**REPORTS TO:** CICS Chief Operating Officer

**DEPARTMENT:** Collaborative Individual and Community Supports (CICS)

**FLSA STATUS:** Exempt

**POSITION SUMMARY**

The Disability Services Navigation Program Manager is responsible for the program delivery and policy application of CICS's Disability Service Navigation activities including supervision of Disability Services Navigators and ensuring regulatory compliance, quality assurance, and consistent implementation of established service protocols.

This position is subject to criminal and abuse background checks and may require pre-employment physical, including drug screening.

**SALARY**

As set by the CICS Governing Board.

**ESSENTIAL DUTIES AND RESPONSIBILITIES**

- Oversees and supports staff responsible for:
  - ♦ HCBS System Navigation
  - ♦ Information and Assistance
  - ♦ Options Counseling
  - ♦ Service Coordination of Long Term Services and Supports (LTSS)
  - ♦ Short Term Services and Supports
  - ♦ Other disability-related activities
- Implements internal quality assurance as assigned by COO.
- Collects, analyzes, and summarizes data to develop and maintain reports for the CEO and COO.
- Reviews Exceptions to Policy requests and client appeals for completeness and forwards to COO.
- Reviews requests for services and approves or denies them.
- Collaborates with clients, staff, and service providers in resolving escalated client issues.
- Regularly communicates with staff to ensure consistent standard procedures are followed.
- Oversees job performance of assigned staff through regular job performance evaluations.
- Oversees assigned staff leave time approval and other personnel functions as assigned by CEO.
- Documents training for assigned staff.
- Represents CICS on boards or committees as assigned by the CEO.
- Makes recommendations regarding necessity for new services to the COO.
- Reviews and makes recommendations on processes to COO in area of responsibility to ensure compliance with laws, regulations, policies, plans, and procedures.
- Monitors workloads and submits recommendations for personnel needs to the COO.
- Other duties as assigned by the COO or CEO.

**NECESSARY KNOWLEDGE, SKILLS, AND ABILITIES**

The successful candidate must possess the following knowledge, skills, and abilities or be able to explain and demonstrate that he/she can perform the essential functions of the job:

- Ability to communicate effectively, both oral and written, and execute excellent people skills.
- Demonstrated ability to supervise a large team.
- Ability to demonstrate a high level of reasoning and logical thinking.
- Knowledge of federal and state assistance programs for disability populations.
- Demonstrates strong computer literacy and comfort with relevant technology.



NAME: \_\_\_\_\_

JOB DESCRIPTION: DSN Program Manager

- Able to understand and follow both oral and written instructions.
- Possesses the ability to negotiate, mediate, and resolve conflicts between opposing parties.
- Knowledgeable in crisis intervention principles and practices.

**ENTRY REQUIREMENTS**

- A bachelor's degree with 30 semester hours or equivalent quarter hours in a human services field (including, but not limited to, psychology, social work, mental health counseling, marriage and family therapy, nursing, education, occupational therapy, and recreational therapy) and at least three years of supervising staff in the delivery of services to individuals with disabilities.
- A valid driver's license, reliable transportation, and adequate liability insurance are required.

**WORK ENVIRONMENT**

While performing the duties required of this position, the employee is regularly subject to a mentally stressful environment; however, the likelihood of bodily injury or similar occupational hazard is slight. Must have physical and mental stamina and be able to perform successfully under time-limited pressure.

Regular work hours are 8:00am to 4:30pm, Monday through Friday. Must have the flexibility to adjust the schedule occasionally in order to accommodate others' schedules. Travel for this position is required.

**PHYSICAL REQUIREMENTS**

Must be physically able to operate a variety of automated office machines and equipment. The position may entail long periods of sitting or driving, depending on circumstances. In most cases, physical demand requirements are at a level of those for sedentary or office environment work which may involve some lifting, carrying, pushing, and/or pulling of light to moderate weight materials (approximately thirty pounds).

**DISCLAIMER**

- Marginal functions of the position that are incidental to the performance of essential job duties have been excluded from this description.
- All requirements are subject to possible modification to reasonably accommodate qualified individuals with disabilities. Prospective employees are encouraged to discuss possible accommodations with the employer.
- Job description in no way implies that the description includes every duty to be performed by the employee in the position. Employees will be required to follow any other job-related instructions and to perform any other job-related duties required by the CEO or COO.

Franklin County is an Equal Opportunity Employer. In compliance with the Americans with Disabilities Act, reasonable accommodations will be provided to qualified individuals with disabilities. Prospective employees are encouraged to discuss potential needs for accommodations with the employer.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Job Description Disability Services Navigator



NAME:
POSITION: Disability Services Navigator
REPORTS TO: Assigned CICS Program Manager
DEPARTMENT: Collaborative Individual and Community Supports (CICS)
FLSA STATUS: Non-Exempt

POSITION SUMMARY

The purpose of the Disability Services Navigator is to utilize the Science of Hope and person-centered planning to perform the work of a Disability Services Navigator who provides one or more of the following:

The checked items apply to this employee

- HCBS System Navigation
Information and Assistance
Options Counseling
Service Coordination of Long Term Services and Supports

DEFINITIONS

Disability Services Navigator means a person who provides Information and Assistance and/or Options Counseling services. Disability Services Navigators will function as HCBS System Navigators within the Disability Access Point duties.

Information and Assistance means a service that provides the individual with current information on opportunities and services available within their communities, including information relating to assistive technology; identifies the strengths and needs of the individual; links the individual to the opportunities and services that are available; and to the maximum extent practicable, ensures that the individual receives the services needed and is aware of the opportunities available, by establishing adequate follow-up procedures (U.S. Health & Human Services, Administration on Community Living, Older Americans Act (OAA) State Performance Report (SPR) definitions (ACL OAAAPS)).

Long-Term Services and Supports (LTSS) means activities that support maintaining people with disabilities at the lowest level of care possible, including facility diversion, respite, or transition to community as determined through the contractor processes for eligibility and service determination.

Options Counseling means an interactive process whereby individuals receive guidance in their deliberations to make informed choices about long-term supports. The process is directed by the individual and may include others whom the individual chooses, or those who are legally authorized to represent the individual. Options counseling includes the following:

- 1. a personal interview and assessment to discover strengths, values, and preference of the individual, and screenings for entitlement program eligibility,
2. a facilitated decision-making process that explores resources and service options, and supports the individual in weighing pros and cons,
3. action steps developed toward a goal or a long-term support plan and assistance in applying for and accessing support options, and
4. follow-up to ensure supports and decisions are assisting the individual.

Person-Centered means a process that is directed by the person who receives the support.

Science of Hope or Hope means a cognitive practice for improving the health and resiliency of individuals, families, and communities. The Hope framework involves the intentional act of setting goals, utilizing viable pathways, and working toward them with willpower to facilitate success.

**NAME:** \_\_\_\_\_ **JOB DESCRIPTION:** Disability Services Navigator

**Service Coordination** means an active, transitional, and ongoing process that involves assisting an eligible individual in gaining access to and coordinating the provision of services; using Person-Centered practices in all contacts with individuals and their caregivers; and coordinating the services identified in the service plan.

**System Navigation** means in-person, online, and telephonic support for problem solving and navigation of the services and supports available. System Navigators ensure individuals and families who encounter barriers in accessing services and support are able to navigate health care, social services, and legal systems.

This position is subject to criminal and abuse background checks and may require pre-employment physical, including drug screening.

**SALARY**

As set by the CICS Governing Board. (Estimated starting pay is \$28.84 per hour, approximately \$60,000 per year)

**ESSENTIAL DUTIES AND RESPONSIBILITIES**

- Process requests for services by conducting intakes, completing applications, obtaining required eligibility documents, obtaining, or completing necessary assessments, social histories, and other necessary documentation for the determination of program eligibility.
- Provide information regarding service options.
- Draft requests for funding and monitor on-going funding needs and service authorizations.
- Determine initial and continuing client eligibility, maintain records for accountability, and make appropriate closed loop referrals so that assistance is provided according to program policies and procedures and clients are aware of the broadest array of services available to them.
- Assist clients in receiving services which have been identified in the planning process that maximize their ability for self-determination.
- Assist in accessing resources or other local, state, or federal benefits identified for the client, family members, and/or providers.
- Assist clients in completing paperwork.
- Complete all required documentation in individual case files in the required timeframes.
- Coordinate, implement, and monitor the Individual Service Plan for designated individuals.
- Initiate the transfer of an individual to other services or terminate services when the client determines the current services are no longer required or desired.
- Advocate for the client and facilitate the Interdisciplinary Team, as directed, in the development of the Individual Service Plan for clients.
- Provide Information and Assistance.
- Provide Options Counseling.
- Provide HCBS Systems Navigation.
- Participate in Medicaid Administrative Claiming, including total time tracking.
- Establish and maintain effective working relationships with clients, county, district, and state employees, law enforcement, the judicial system, service providers, and the public.
- Participate in CICS, provider, and state-wide committee meetings, as assigned, provide training on department related topics, and attend work-related meetings, conferences, educational and training opportunities, and seminars.
- Other duties as assigned.

**NECESSARY KNOWLEDGE, SKILLS, AND ABILITIES**

The successful candidate must possess the following knowledge, skills, and abilities or be able to explain and demonstrate that he/she can perform the essential functions of the job:

- Proficient in applying professional-level knowledge of federal and state assistance programs that support individuals with disabilities.
- Flexible and adaptable, able to shift efficiently between diverse tasks without compromising effectiveness or composure.
- Demonstrates strong computer literacy and comfort with relevant technology.
- Communicates ideas clearly and effectively, both verbally and in writing.
- Skilled in critical thinking and problem solving, with a proven ability to assess situations and identify appropriate solutions.
- Capable of working independently or collaboratively within a team setting.
- Able to understand and follow both oral and written instructions.
- Possesses the ability to negotiate, mediate, and resolve conflicts between opposing parties.



NAME: \_\_\_\_\_

JOB DESCRIPTION: Disability Services Navigator

**ENTRY REQUIREMENTS**

- A bachelor's degree with 30 semester hours or equivalent quarter hours in a human services field (including, but not limited to, psychology, social work, mental health counseling, marriage and family therapy, nursing, education, occupational therapy, and recreational therapy) and at least one year of experience in the delivery of services to individuals with disabilities. The degree requirement may be waived for individuals with significant experience if approved by the Iowa Department of Health and Human Services. This would only occur if a candidate with a degree and experience is not available in the area covered by the position.
- A valid driver's license, reliable transportation, and adequate liability insurance are required.

**WORK ENVIRONMENT**

While performing the duties required of this position, the employee is regularly subject to a mentally stressful environment; however, the likelihood of bodily injury or similar occupational hazard is slight. Must have physical and mental stamina and be able to perform successfully under time-limited pressure.

Regular work hours are 8:00 am to 4:30 pm, Monday through Friday. Must have the flexibility to adjust the schedule occasionally in order to accommodate others' schedules. Travel for this position is required.

**PHYSICAL REQUIREMENTS**

Must be physically able to operate a variety of automated office machines and equipment. The position may entail long periods of sitting or driving, depending on circumstances. In most cases, physical demand requirements are at a level of those for sedentary or office environment work which may involve some lifting, carrying, pushing, and/or pulling of light to moderate weight materials (approximately thirty pounds).

**DISCLAIMER**

- Marginal functions of the position that are incidental to the performance of essential job duties have been excluded from this description.
- All requirements are subject to possible modification to reasonably accommodate qualified individuals with disabilities. Prospective employees are encouraged to discuss possible accommodations with the employer.
- Job description in no way implies that the description includes every duty to be performed by the employee in the position. Employees will be required to follow any other job-related instructions and to perform any other job-related duties required.

Franklin County is an Equal Opportunity Employer. In compliance with the Americans with Disabilities Act, reasonable accommodations will be provided to qualified individuals with disabilities. Prospective employees are encouraged to discuss potential needs for accommodations with the employer.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**Job Description  
Program Support Technician**



**NAME:**

**POSITION:** Program Support Technician

**REPORTS TO:** Assigned CICS Officer

**DEPARTMENT:** Collaborative Individual and Community Supports (CICS)

**FLSA STATUS:** Non-Exempt

**POSITION SUMMARY**

The Program Support Technician provides information about CICS to the public and assists staff with clerical tasks.

This position is subject to criminal and abuse background checks and may require pre-employment physical, including drug screening.

**SALARY**

As set by the CICS Governing Board.

**ESSENTIAL DUTIES AND RESPONSIBILITIES**

- Receives and responds to telephone, email, and direct walk-in inquiries from staff or the public; responds directly to the inquiries or directs to the appropriate staff member.
- Develops and maintains electronic and paper files, records, and reports related to CICS business; performs data entry and database management related to district operations.
- Receives, sorts, and prepares incoming and outgoing mail.
- Prepares various written correspondence, letters, or mailings for staff; proofreads various written materials.
- Travels to other locations as needed for deliveries and pick-ups.
- Keeps applications and other information available for walk-in inquiries.
- Assists with maintaining a clean office environment.
- Maintains office equipment.
- Establishes and maintains effective working relationships with clients, county, district and state employees, law enforcement, the judicial system, service providers, and the public.
- Participates in education and training opportunities.
- Other duties as assigned by the assigned.

Items marked also apply to this employee:

- Deposit revenues.
- Generate invoices.
- Process claims.
- Reconcile claims and revenues.
- File or upload completed applications and other documents.
- Assist with reports and contracting.
- Revise forms, business cards, and create new documents.
- Develop brochures, presentations, and other marketing material.
- Track supply inventories and make recommendations for supply orders, purchase office supplies.
- Take minutes for meetings.
- Maintain and update CICS-specific website or web-based forms.
- Update CICS information on information and referral.
- Assist with Microsoft 365 Administration.





NAME: \_\_\_\_\_

JOB DESCRIPTION: Program Support Technician

**NECESSARY KNOWLEDGE, SKILLS, AND ABILITIES**

The successful candidate must possess the following knowledge, skills, and abilities or be able to explain and demonstrate that he/she can perform the essential functions of the job:

- Applies professional level of knowledge of federal and state assistance programs for disability populations.
- Demonstrates adaptability to performing a variety of duties, regularly changing from one task to another of a different nature without loss of efficiency or composure.
- Demonstrates competent computer skills.
- Communicates ideas clearly and effectively, both verbally and in writing.
- Able to understand and follow both oral and written instructions.
- Able to operate standard office equipment.

**ENTRY REQUIREMENTS**

- High school diploma or equivalent and experience in a similar position, or combination of education and experience.
- Successful candidate shall have strong interpersonal skills, excel in time management, be self-motivated, and be capable of working independently.
- A valid driver's license, reliable transportation, and adequate liability insurance are required.

**WORK ENVIRONMENT**

While performing the duties required of this position, the employee is occasionally subject to a mentally stressful environment; however, the likelihood of bodily injury or similar occupational hazard is slight. Must have physical and mental stamina and be able to perform successfully under time-limited pressure.

Regular work hours are 8:00 am to 4:30 pm, Monday through Friday. Must have the flexibility to adjust the schedule occasionally in order to accommodate others' schedules or to meet the needs of clients accessing services. Travel for this position is required.

**PHYSICAL REQUIREMENTS**

Must be physically able to operate a variety of automated office machines and equipment. The position may entail long periods of sitting or driving, depending on circumstances. In most cases, physical demand requirements are at a level of those for sedentary or office environment work which may involve some lifting, carrying, pushing, and/or pulling of light to moderate weight materials (approximately thirty pounds).

**DISCLAIMER**

- Marginal functions of the position that are incidental to the performance of essential job duties have been excluded from this description.
- All requirements are subject to possible modification to reasonably accommodate qualified individuals with disabilities. Prospective employees are encouraged to discuss possible accommodations with the employer.
- Job description in no way implies that the description includes every duty to be performed by the employee in the position. Employees will be required to follow any other job-related instructions and to perform any other job-related duties required.

Franklin County is an Equal Opportunity Employer. In compliance with the Americans with Disabilities Act, reasonable accommodations will be provided to qualified individuals with disabilities. Prospective employees are encouraged to discuss potential needs for accommodations with the employer.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

## Appendix B Disability Access Point (DAP) Intake and Eligibility

**Effective Date:** May 1, 2025

**Date of Last Revision:** N/A

**Purpose:** To establish a standardized, person-centered process for engaging individuals (adults and children), their families and caregivers who seek assistance through the DAP. This policy ensures that all individuals experience a welcoming, “no-wrong-door” process where their needs are assessed and addressed in alignment with person-centered philosophy and the Science of Hope framework.

**Scope or Responsibility:** DAP staff and partner personnel who provide information and assistance, options counseling, HCBS navigation, or LTSS service coordination to individuals, their families or caregivers, regardless of how they access services – in-person, via telephone, or electronic communication.

**Policy Statement:** DAP staff are committed to a no-wrong-door, person-centered process. Information and assistance will be provided in a manner convenient to the individual, families or caregivers, but not limited to, in person at the individual's home, community or at the DAP or partner agency as an appointment or walk-in, via telephone, virtually, via email, or through written correspondence.

All individuals, their families and caregivers who contact the DAP will be:

- Treated with respect and receive prompt and courteous engagement
- Provided with information and assistance
- Receive an assessment of their needs and personal preferences
- Get assistance with identifying the most appropriate resources and support to meet their identified needs.
- Connected with services providers
- Provided information to meet their needs using a person-centered approach. This may include:
  - Effective communication by arranging accommodation as needed.
  - Use of language interpretation or translation services
  - Involving a support person for individuals with cognitive impairments or communication challenges
  - Providing accessible materials or formats, as appropriate

The initial intake will be completed through the Information and Assistance process. We have outlined the process in the workflow chart.

## **Procedure:**

### **Information and Assistance**

A service that provides the individual with current information on opportunities and services available within their communities, including information relating to assistive technology: identifies the strength and needs of the individual; links the individual to the opportunities and services that are available; and to the maximum extent practicable, ensures that the individual receives the services needed and is aware of the opportunities available, by establishing adequate follow- up procedures. Primarily provides to individuals who mainly need quick information or referral and can largely self-direct after receiving assistance.

### **Eligibility**

All individuals (adults and children) with disabilities, older individuals age 60+, and their families and caregivers. There are no financial, resources or needs based eligibility criteria.

### **Crisis Situations**

- 1) Ensuring safety and addressing urgent needs take priority over completing standard steps of process.
- 2) If an inquiry reveals a crisis, staff will immediately initiate emergency response protocols.
- 3) Staff will follow up with the individual based off emergency response protocols.

### **Procedure**

- 1) Receive inquiry: Staff will respond to all contacts, whether in person, by telephone, electronic or walk in in person-centered manner.
- 2) Answer the phone by stating approved greeting and identifying yourself to the individual.
- 3) Respond to requests for information and assistance within one business day. If necessary, the initial response may be to acknowledge the request and schedule an appointment with the individual at their preferred time and date.
- 4) Collect relevant personal, demographic, and financial information using *Iowa HHS-approved forms*
- 5) Evaluate the call or request by:
  - a) Establishing rapport with the individual
  - b) Supporting and encouraging the individual
  - c) Identifying the issue(s) that led to the inquiry
  - d) Determining the nature of the situation

- e) Evaluating the knowledge, capacity, and personal preference of the individual to determine how to best provide assistance.
- f) Identifying the most appropriate resource(s) to meet the individual's needs
- g) Determining need using the *standardized tool* for next steps for possible connection with:
  - Options Counseling
  - HCBS System Navigation
  - Long Term Supports and Services (LTSS) Service Coordination
  - Managed Care Organization (MCO) or Fee for Services (FFS)-Community Based Case Management (CBCM)
  - Integrated Health Home (IHH)
  - Certified Community Behavioral Health Center (CCBHC)
  - Behavioral Health – Administrative Service Organization (BH- ASO) Primary Care Association (PCA)
- 6) Provide the individual with information that is:
  - a) Accurate, useful, and hope-centered
  - b) Relevant to the individual's expressed need and personal preferences
  - c) In the language and formats that are easiest for the individual to understand
  - d) Objective and does not appear to favor or attempt to persuade the individual to choose any setting, program, services, or provider
- 7) Obtain consent for any information sharing.
- 8) Provide referrals or assistance in accessing public and private resources. The information gathered while evaluating the call or request will be used to determine what referrals and assistance will be provided to the individual.
- 9) Provide the individual with specific information and referrals addressing each need identified. This may include agency names, contact persons, program brochures, or even helping the individual make a phone call to initiate services while at the DAP. Staff may help fill out applications. Ensure the individual understands the information. This includes checking if they are comfortable contacting the referrals given and answering any questions about how those services work. Printed materials or an email summary are provided as needed for clarity.
- 10) Follow up with the individual on referrals and service connections and determine whether their needs were met and whether they need additional information and assistance.
- 11) Advocate on behalf of the individual who has issues with access to services.
- 12) Verify whether the individual's immediate needs have been met with the assistance provided.
  - a) If yes, no further in-depth involvement is scheduled (beyond the follow-up call).
  - b) If not, or if the individual expresses uncertainty, review concerns and apply engagement strategies.
- 13) Complete *HHS I&A forms* and log into the case management system.
- 14) If applicable, complete a warm handoff to agreed upon program/agency.

### **Options Counseling:**

It is an interactive process whereby individuals receive guidance in their deliberation to make informed choices about long-term support. The process is directed by the individual and may include others whom the individual chooses or those who are legally authorized to represent the individual. It is person-centered and typically short-term, concluding when a plan is made and initial steps taken.

Options Counseling may include

- 1) Personal interview and assessment to discover strengths, values, and preferences of the individual and screening for entitlement program eligibility.
- 2) A facilitated decision-making process that explores resources and service options, and supports the individual in weighing pros and cons.
- 3) Action steps developed toward a goal or a long-term support plan and assistance in applying for and accessing support options.
- 4) Follow-up to ensure support and decision are assisting the individual.

### Eligibility

All individuals (adults and children) with disabilities, older individuals age 60+, and their families and caregivers. There are no financial, resources or needs based eligibility criteria.

### Procedure

- 1) The DAP Disability Services Navigator (DSN) will provide Options Counseling. This may be the same staff who provided Information and Assistance.
- 2) Individuals will be informed of their rights at the initial meeting. They will receive an Individual Rights and Responsibilities handout. If the meeting is telephoned or electronic will offer handout to be e-mailed to them.  
If an individual wishes to file a grievance at any point, the DSN will support and guide them through the process, following established grievance policies.  
This includes:
  - a) The right to confidentiality,
  - b) The right to be treated with dignity and respect.
  - c) The right to appeal funding or service decisions
- 3) The DSN will schedule with the individual dedicated session(s) focused on exploring the individual's options and needs.
- 4) During Options Counseling sessions, the DSN will complete an assessment if needed. A structured framework or checklist will be used to ensure all relevant factors are considered.
- 5) The DSN will determine needs using the *standardized tool* for next steps for possible connection with:
  - STSS funded services
  - HCBS System Navigation
  - Long Term Supports and Services (LTSS) Service Coordination

- Managed Care Organization (MCO) or Fee for Services (FFS)- Community Based Case Management (CBCM)
  - Integrated Health Home (IHH)
  - Certified Community Behavioral Health Center (CCBHC)
  - Behavioral Health – Administrative Service Organization (BH- ASO) Primary Care Association (PCA)
- 6) The DSN will provide comprehensive information on each option. This could include explaining eligibility criteria, application processes, wait times, and likely outcomes for each choice.
- 7) The DSN will use Person-Centered Planning: The outcome of Options Counseling is a clear plan or decision.
- a) The DSN will use motivational interviewing and coaching techniques to help the individual weigh what matters most to them ensuring the decision aligns with their life goals.
  - b) The individual or their authorized representative will have the final choice in deciding which options will meet their needs. The DSN will then help map out the steps to implement that choice. These steps are documented in an Action Plan document.
- 8) The DSN will also address any fears or barriers the individual has about the options. This is done by providing encouragement, discussing contingency plans, and, if available, offering to connect the individual with peer support (someone who has been through similar decisions) for additional perspective. This supportive approach ties into the Science of Hope by reinforcing the individual's sense of efficacy and hope for the future.
- 9) Follow-Up:
- a) Once the plan is in motion, the DSN will monitor progress for a short period. They check in biweekly or monthly to see if the needed services have started or decisions have been implemented. If the plan is stalled or needs revision, additional Options Counseling sessions can be held. When the plan is successfully implemented, the case can transition to closure or to a maintenance mode. If during follow-up it becomes clear that ongoing coordination is needed beyond making the decision, the support can be stepped up to LTSS Service Coordination. All follow-ups and final outcomes are documented. Finally, the DSN will ensure the individual has contact information to re-engage the DAP in the future and provide a summary of what was accomplished for their records.
  - b) The DSN will contact the individual within a short period (typically 1–2 weeks) to inquire if they successfully connected with the referrals and if any additional help is needed. This follow-up is logged. If the individual did not obtain the service needed, the DSN will either provide additional options or consider bringing the case back for a higher level of support. Once the individual confirms their needs are met or they are actively engaged with the referrals provided, the DSN will discontinue current level of support. The individual may be re-enrolled anytime if the individual seeks help again.

- 10) The DSN will complete *HHS Options Counseling forms* and log into the case management system.
- 11) If applicable, the DSN will complete a warm handoff to the agreed upon program/agency.

### **LTSS Service Coordination**

Is an active, transitional, and ongoing process that involves assisting an eligible individual in gaining access to and coordinating the provisions of services; using person-centered practices in all contacts with individuals and their caregivers; and coordinating the services identified in the service plan.

#### Eligibility

To be eligible and individual will meet the following:

- 1) Financial
  - a) An adult with disabilities will have an income equal to or less than 200 percent of the federal poverty level.
  - b) A family of a child with disabilities will have an income equal to or less than 200 percent the federal poverty level.
  - c) A person who is eligible for federally funded services and other support will apply for such services and support.
  - d) Income will be verified using the best information available
  - e) Financial eligibility will be reviewed on an annual basis and may be reviewed more often in response to an increase or decrease in income.
  - f) An individual who is eligible for medical assistance must apply for and exhaust such funding for services and support prior to utilization of disability service system funding.
- 2) Resources
  - a) There are no resource limits for the family of a child seeking children's disability services.
  - b) An adult with disabilities must have resources that are equal to or less than \$2000.00 in countable value for a single-person household or \$3000.00 in a countable value for a multi-person household or follow the most recent federal supplemental security income guidelines.
  - c) The countable value of all countable resources, both liquid and non-liquid, shall be included in the eligibility determination except as exempted in this sub-rule.
  - d) A transfer of property or other assets within five (5) years of the time of application with the results of, or intent to, qualify for assistance may result in denial or discontinuation of funding.
  - e) The following resources are exempt:
    - The homestead, including equity in family home or farm that is used as the individual household's principal place of residence. The homestead shall include all land that is contiguous to the home and the buildings located on the land

- One automobile used for transportation
  - Tools of an actively pursued trade
  - General household furnishings and personal items
  - Burial account or trust limited in value as to that allowed in the medical assistance program.
  - Case surrender value of life insurance with a face value of less than \$1,500.00 on any one person
  - Any resource determined excludable by the Social Security Administration as a result of an approved Social Security Administration work incentive
- f) If an individual does not qualify for federally funded or state funded services or other supports but meets all income, resource and functional eligibility requirements of this chapter, the following types of resources are also exempt from consideration in eligibility determination:
- A retirement account that is in the accumulation stage
  - A medical savings account
  - An assistive technology account
  - A burial account or trust limited in value as to that allowed in the medical assistance program.
- 3) Needs- Based
- a) An individual must be a resident of Iowa, or if a minor, the custodial parent is a resident of Iowa
  - b) An individual must have a diagnosis of intellectual disability, developmental disability, brain injury or serious mental illness as defined by in Iowa Code Section 135.22, or an individual who resides in or are at risk of residing in institutional setting due to their disability.
  - c) The results of a standardized functional assessment support the type and frequency of disability services identified in the Individual's case plan. A functional assessment must be completed within sixty (60) days of application for services.

#### Procedure

- 1) Assignment
  - a) A DSN is assigned to the individual.
  - b) The DSN will contact the individual within 1 business day to introduce themselves and schedule a time to meet.
- 2) Determining Eligibility
  - a) The DSN or assigned staff will process eligibility within ten (10) business days of receipt of a completed application.
    - i) If processing eligibility takes longer than ten (10) business days this data will be included in monthly reporting.
- 3) Individual Needs Assessment
  - a) The DSN will initiate needs assessment requirements upon determination of eligibility.



- b) The DSN will complete an Initial Assessment within thirty (30) days with the individual and their team, when applicable.
  - i) If initial assessment takes longer than thirty (30) days this data will be included in monthly reporting
- c) The DSN will complete a functional assessment within sixty (60) days of application for services.
- 4) The DSN will develop and complete a *service plan* with the individual and team using the HHS provided service plan template to identify supports and services needed and plan to refer and link.
- 5) The DSN will follow up with the individual on referrals and service connections and determine whether their needs were met and whether they need additional information and assistance.

**References:**

This policy is guided by the District Plan and is designed to ensure compliance with all applicable state and federal laws. The process is based on evidence-based practices and frameworks that promote accessible, coordinated, and hope-centered services.

All staff are required to follow this policy to provide a consistent, person-centered, and positive experience for every individual, their families or caregivers seeking assistance through the DAP.

Appendix C  
Contracting and Invoicing Policies

**Contracting and Invoicing Policies**



**Section 1: Contracting Policy**

**Purpose:**

To outline the terms, conditions, and expectations for entering into contractual relationships with providers who deliver Short-Term Services and Supports (STSS) funded by CICS.

**1. Eligible Providers**

- CICS may contract with STSS providers whose base of operation is within the CICS district.
- CICS will honor contracts held by other Disability Access Points with a provider located in other districts.
- If no contract exists, CICS may choose to establish a contract with a provider located outside the district.
- One-time or as-needed services may be provided without a formal contract.

**2. Contract Approval**

- All contracts must be reviewed and approved by the CICS Governing Board Chair or their designee.

**3. Financial Incentives and Non-Traditional Funding**

- CICS may implement financial incentives or outcome measures to enhance performance and cost-effectiveness.
- Vouchers and other non-traditional funding mechanisms may be used to support service delivery.

**4. Appeals**

- Providers may appeal contracted rates or terms that have been approved by the Governing Board.

**Section 2. Funding and Eligibility**

**1. Availability of Funds**

- Funding is subject to the constraints of CICS's approved budget and shall only be provided for approved services and supports.

**2. Payer of Last Resort**

- CICS funds shall not be used to replace other available public or private funding (e.g., Medicaid, private insurance, County General Assistance).
- Individuals must apply for and utilize other available funding sources before CICS funds will be approved.
- Failure to comply with this requirement may render an individual ineligible unless a statutory obligation requires CICS to fund the service.

**3. Interim Coverage**

- Individuals who meet all other criteria and are awaiting determination or receipt of benefits from other programs may receive temporary support from CICS.

**4. Least Restrictive Setting**

- Services must support individuals to live in the least restrictive setting based on their abilities, consistent with principles of choice, community inclusion, and empowerment.

### **Section 3. Invoicing and Claims Policy**

**1. Invoicing Requirements**

Service providers must submit billing invoices within sixty (60) calendar days of service delivery. Each invoice must include:

- Full name and unique identifier of the individual served
- Dates of service
- Invoice number
- Number of units delivered
- Unit rate and total cost per individual
- Copayments or third-party charges shown as deductions
- Actual amount requested from CICS
- Supporting documentation, such as attendance records, if requested

**2. Claims Review and Authorization**

- All invoices will be reviewed for consistency with service funding authorizations.
- Only CICS staff may authorize funding.
- Unauthorized services will be deducted from payment.

**3. Claims Payment**

- CICS will pay eligible claims within sixty (60) days of receiving complete and required documentation.
- Claims submitted more than sixty (60) days after the close of the fiscal year (July 1 – June 30) will not be considered unless a legal obligation exists.

**4. Provider Compensation**

- Providers must accept CICS reimbursement as full payment, less any applicable copayments or other individual charges.
- Rates must be agreed upon in advance or through contract.

**5. Compliance**

- Failure to comply with this policy may result in delayed payment, denial of claims, or corrective actions.

## Section 4: Provider Dispute Resolution Policy

### **Purpose:**

To establish a standardized process for service providers to raise concerns or disputes related to contracting, invoicing, claims, and payments, and to ensure a fair and timely resolution.

### **1. Eligible Disputes**

- Providers may initiate a dispute regarding the following matters:
  - Contract terms and conditions not otherwise covered under the appeals process
  - Denied or reduced claims for payment
  - Delayed payments exceeding the 60-day processing window
  - Determinations of non-compliance affecting reimbursement

### **2. Initial Dispute Submission**

- Providers must submit a written dispute to the CICS COO within thirty (30) calendar days of the adverse action or payment.
- The submission must include a detailed description of the dispute, supporting documentation, and a proposed resolution if applicable.
- Disputes received after the 30-day window may not be considered unless a legal obligation exists.

### **3. CICS Review Process**

- Upon receipt, CICS will acknowledge the dispute within five (5) business days.
- The COO or their designee will review the dispute and may request additional documentation or clarification.
- A written decision will be issued within fifteen (15) business days of receiving all necessary information.

### **4. Final Review Option**

- If the provider disagrees with the decision, a request for final review may be submitted to the CICS Governing Board Chair or their designee within ten (10) business days of the decision.
- The Governing Board Chair or designee will issue a final written determination within fifteen (15) business days.
- This final determination shall conclude the dispute process within CICS.

### **5. Good Faith Requirement**

- All parties are expected to engage in the dispute resolution process in good faith. Efforts will be made to resolve disputes collaboratively, respectfully, and in alignment with the mission and values of CICS.

Appendix D  
Quality Assurance and Service Specific Policies

**Quality Assurance and Service Specific Policies**



**Section 1: General Eligibility Criteria**

**Purpose:**

To establish consistent eligibility requirements for individuals requesting services funded by CICS under the Short-Term Services and Supports (STSS) framework.

**1. Programmatic Eligibility**

- The individual must have a documented disability and require assistance to live in the home and community of their choice in an integrated setting.
- STSS supports the individual and, when needed, their family or caregivers to maintain or enhance independent community living.

**2. Short-Term Services and Supports (STSS) Definition**

“Short-Term Services and Supports (STSS)” means time-limited activities focused on supporting people with disabilities to live in the home and community of their choice in an integrated manner and offering support to their families and caregivers as needed toward this purpose. STSS includes:

- Individual Assessment and Evaluation
- Transportation
- Respite
- Peer and Parent Support
- Time-Limited Rental Assistance
- Home and Vehicle Modifications
- Adaptive Equipment
- Other Basic Needs

**3. Financial Eligibility**

- **Income Limit:** Household income must not exceed 200% of the Federal Poverty Level (FPL).
- **Resource Limit:**
  - \$2,000 for an individual
  - \$3,000 for households with more than one person
- **Verification:** Proof of income and resources must be submitted with each application.

**4. Payer of Last Resort**

- CICS funding is available only when no other sources (e.g., Medicaid, private insurance, County General Assistance, or other public or private assistance) are available to cover the service.

**5. Time Limitation for Short-Term Services**

- CICS assistance is limited to no more than 90 days per qualifying episode of service.
- Time-limited assistance is designed to promote stabilization, independence, or transition and is not intended for ongoing or permanent support.

## Section 2: Quality Assurance (QA) Policy

### Purpose

To ensure that all providers of CICS-funded services—whether clinical, non-clinical, residential, transportation-related, or utility-based—deliver high-quality, compliant, and person-centered services. This policy aims to uphold standards of safety, accountability, effectiveness, and system of care principles across all service types.

### General Quality Assurance Standards

#### 1. Programmatic Eligibility

- The individual must have a documented disability and require assistance to live in the home and community of their choice in an integrated setting.
- STSS supports the individual and, when needed, their family or caregivers to maintain or enhance independent community living.

#### 2. Licensure, Accreditation, and Regulatory Compliance

- All providers who are required by federal, state, or local law to be licensed, certified, or accredited must maintain current and valid credentials at all times.
- This includes, but is not limited to, licensed clinicians, certified Peer or Parent Support Specialists, landlords operating rental properties (e.g., rental certificates or housing inspections), transportation vendors (e.g., DOT-compliant), and utility providers (e.g., municipally approved vendors).
- Providers must also adhere to any city or county ordinances applicable to their services. For example, CICS will not authorize rental assistance for properties lacking required rental permits or occupancy certifications as mandated by local jurisdictions.

#### 3. Performance Monitoring

- All providers are subject to routine and as-needed monitoring, including documentation audits, service utilization reviews, and analysis of service delivery outcomes.
- Monitoring may include site visits, interviews with clients, review of compliance with service authorization terms, and verification of adherence to approved rates and billing protocols.

#### 4. Service Reviews

- CICS may conduct service reviews to ensure each service aligns with district-defined system of care principles, fulfills intended purposes, and contributes positively to individual outcomes.
- Specific attention will be paid to timely service delivery, client feedback, billing accuracy, and overall impact on quality of life.

#### 5. Incident Reporting

- All providers must report incidents involving client safety, abuse, neglect, exploitation, service interruptions, or other serious events as required by Iowa Code or CICS policy.
- Reports must be submitted within required timeframes, and follow-up information must be made available to CICS upon request.

#### 6. Corrective Action

- If performance concerns or non-compliance issues are identified through monitoring or complaint investigation, providers may be required to submit and implement a corrective action plan.
- CICS will monitor the implementation and effectiveness of the plan and may restrict referrals, suspend payment, or terminate provider status if compliance is not achieved.



**7. Provider Education and Technical Assistance**

- CICS may require participation in training or technical assistance to ensure providers understand and can implement expectations related to service quality, documentation, eligibility, and person-centered practices.

### **Section 3: Service-Specific Policies**

**Purpose:**

To define expectations, eligibility requirements, prioritization criteria, and approval procedures for each individual service funded through the CICS Short-Term Services and Supports (STSS) framework. These policies ensure consistency, accountability, and alignment with person-centered, recovery-oriented, and least-restrictive principles across all service categories.

**Individual Assessment and Evaluation**

“Individual Assessment and Evaluation” means the clinical review by a licensed professional of the individual’s current functioning in regard to the individual’s situation, needs, strengths, abilities, desires, and goals.

**1. General:**

- Must be conducted by a licensed clinician.
- Documentation must be clinically sound, individualized, and reflect strengths, needs, and recovery goals.

**2. Eligibility:**

- Resident of the CICS district
- Meets general eligibility criteria

**3. Prioritization:**

- Individuals at risk of institutionalization or hospitalization
- Those without recent evaluations (within 12 months)

**4. Approval:**

- Request submitted through a disability services navigator

**Transportation**

“Transportation” means services or aid provided for individuals to conduct business, medical, or essential errands, travel to and from employment or day services, and reduce social isolation. Minors will need to be accompanied by a parent, guardian, or designated adult.

**1. General:**

- Vehicles used must be insured, roadworthy, and meet applicable safety and accessibility standards.
- Drivers must have valid licenses and, where applicable, background checks.

**2. Eligibility:**

- Resident of the CICS district
- No other funding sources available
- Must demonstrate need to access essential services

3. **Prioritization:**
  - Medical and employment-related travel prioritized
  - Community or social outings are secondary
4. **Approval:**
  - Request submitted through a disability services navigator
  - Must include verification of purpose and need
  - Minors must be accompanied by an adult

**Peer and Parent Support**

“Peer and Parent Support” means services provided by a Peer or Parent Support Specialist that assist the individual or family of an individual to live successfully in the family or community, including, but not limited to, education and information, individual advocacy, family support groups, and respite to assist individuals in achieving stability in the community.

- “Peer and Parent Support Specialist” means an individual who has lived experience as an individual with disability or is a parent, primary caregiver, foster parent, or family member of an individual with a disability, and has successfully completed standardized training to provide peer or family support services through the medical assistance program.

1. **General:**
  - Providers must maintain standardized certification and have documented supervision.
  - Peer notes must reflect supportive, non-clinical engagement in line with recovery principles.
2. **Eligibility:**
  - Individual or family member experiencing disability-related challenges
  - Must meet general eligibility requirements
3. **Prioritization:**
  - Individuals recently discharged from a higher level of care
  - Families lacking sufficient natural support systems
4. **Approval:**
  - Request submitted through a disability services navigator
  - Must include a support plan

**Time-Limited Rental Assistance**

“Time-Limited Rental Assistance” means non-recurring set-up expenses for individuals who are transitioning from an institutional or another provider-operated living arrangement to a living arrangement in a private residence where the person is directly responsible for their own living expenses. When no other funding source is available this assistance can be provided for up to 3 months or 90 days.

1. **General:**
  - Landlords must provide a current rental certificate or equivalent documentation required by local housing authorities, if applicable.
  - CICS reserves the right to deny payment to landlords not in compliance with municipal rental regulations.

2. **Eligibility:**
  - Resident of the CICS district
  - No other funding sources available
3. **Prioritization:**
  - Clients exiting residential or psychiatric facilities
  - Homeless or unstably housed individuals
4. **Approval:**
  - Request submitted through a disability services navigator
  - Reviewed monthly for continued need

**Home and Vehicle Modifications**

“Home and Vehicle Modifications” means physical modifications to the individual’s home or vehicle that directly address the individual’s medical or remedial need. Modifications shall be necessary to provide for the health, welfare, or safety of the individual and enable the individual to function with greater independence in the home or vehicle. Home and vehicle modifications are not furnished to adapt living arrangements that are owned or leased by providers of services, including any facilitybased setting. Home and vehicle repairs, motorized vehicle purchase or lease, and regularly scheduled upkeep and maintenance of a vehicle are not allowable. DAPs shall utilize Iowa Medicaid HCBS waiver services timeframes and rates for provision of home modification services.

1. **General:**
  - Work must be completed by insured and qualified contractors.
  - Projects must meet local building codes and pass any required inspections before payment is issued.
2. **Eligibility:**
  - Resident of the CICS district
  - Must support a medical or remedial need and promote independence
3. **Prioritization:**
  - Individuals at risk of losing housing or requiring higher levels of care
  - Barriers to essential daily functions
4. **Approval:**
  - Request submitted through a disability services navigator
  - Professional evaluation required
  - Quotes and scope of work must be submitted
  - Must follow Iowa Medicaid HCBS standards
  - Excludes provider-owned properties and routine maintenance

**Adaptive Equipment**

“Adaptive Equipment” means practical equipment products that assist individuals with activities of daily living and instrumental activities of daily living that allow the individual more independence. Adaptive equipment is not medical in nature. Products shall align with items approved by Medicaid. Adaptive equipment includes, but are not limited to:

- Long reach brushes
- Extra-long shoehorns
- Non-slip grippers to pick up and reach items

- Dressing aids
- Shampoo rinse trays and inflatable shampoo trays
- Double handed cups
- Sipper lids
- Enabling technology.

**1. General:**

- Items must be purchased from reputable vendors with quality guarantees.
- Equipment must be safe, durable, and match approved needs as documented by supporting professionals.

**2. Eligibility:**

- Request submitted through a disability services navigator
- Resident of the CICS district
- Must meet medical, functional, or independence-related needs
- Items not covered by other sources

**3. Prioritization:**

- Requests improving health, safety, or independence
- Clients with limited informal support

**4. Approval:**

- May require recommendations from a health professional
- Must align with Medicaid-approved items
- Vendor invoice required

**Other Basic Needs**

“Other Basic Needs” means needs and items for personal or household use by the individual which provide for the health and safety of the individual that non-insurance covered items to support the individual to remain in their current living situation and community.

**1. General:**

- Providers of items such as utility services or durable goods must demonstrate legitimacy (e.g., business licensure, vendor tax ID).
- Any items purchased must directly support the individual’s health, safety, or independence.

**2. Eligibility:**

- Resident of the CICS district
- Request must support the health and safety of the individual in their home/community

**3. Prioritization:**

- Individuals facing immediate risk to safety or housing stability
- Lack of informal or alternative supports

**4. Approval:**

- Request submitted through a disability services navigator
- Application with itemized list and justification
- Reviewed by CICS for compliance with policy
- Documentation of lack of other funding required