

Meeting Notes

Division: Department of Health and Human Services, Iowa Medicaid

Meeting Topic: REACH Implementation Team: Quality Improvement and Assurance Subcommittee

Facilitator: Jenny Erdman, HHS

Date: 06/25/2025

Time: 4:00 PM

Location: Virtual

Meeting Objectives

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

Meeting Participants

- Jackie Brenner
- Addie Kimber
- Laura Leise
- William Linder
- Jenny Erdman
- Richard Whitaker

Agenda Topic and Items

- Quality Management Improvement and Accountability (QMIA) Plan - Introduction
 - The Quality Improvement Subcommittee will make recommendations to inform a QMIA Plan, which will describe the processes the state is creating to track quality measures and outline best practices for quality improvement.
 - The high-level draft of this plan will be submitted by the end of the year

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- The Subcommittee reviewed common components of QMIA Plans from Idaho and Washington.
 - QMIA Plan – Process for defining quality
 - Idaho had a committee develop initial indicators and a system to continuously refine metrics.
 - Washington developed principles on outcomes and functions. They also used a decision points model to assess access, engagement, service appropriateness, effectiveness, and linkages from the patient level to the system level.
 - Subcommittee members liked the idea of combining these models. Specifically, they were interested in using a decision points framework and developing initial indicators on process, outcomes, and system impacts.
 - QMIA Plan – Quality monitoring and reporting
 - Both states used several data sources including CANS assessment results, surveys, records reviews, and administrative data.
 - Washington also outlines benchmarks for monitoring progress.
 - Iowa currently has a dashboard and publishes reports related to quality monitoring
 - Subcommittee members noted that providers would be more invested if there was a larger purpose for collecting and reporting data, such as through scorecards or financial incentives. This would make data collection feel more meaningful and incentivize providers to share data.
 - Subcommittee members also suggested that there could be healthy competition among districts if outcomes data were reported at the district level.
 - QMIA Plan – Governance for quality improvement
 - Idaho has a QMIA council which regularly reviews reports, monitors and communicates on outcomes, and sets improvement goals.
 - Washington has multiple agencies who are responsible for different parts of the QMIA plan.

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- Subcommittee members agreed that a single council would be a better approach. They noted that including multiple agencies may lead to a lack of individual responsibility and ownership over quality improvement.
 - Subcommittee members suggested that the new HHS council may be able to take on quality improvement work. Under the redesign, districts also have their own advisory committees to ensure services are meeting metrics. As the HHS council is developed, we can evaluate whether it would be a suitable place for this work.
 - Next steps
 - The Quality Improvement Subcommittee will pause over the summer while other committees work to develop services. Subcommittee members are encouraged to join other committees in the meantime.
 - The Quality Improvement Subcommittee will reconvene in September to inform the QMIA plan due at the end of the year.

New Items: None.