

# Consumer Steering Committee Meeting

August 14, 2025



# Agenda

- ▶ Assessment Tool Feedback
- ▶ Review findings on school-based services from Statewide Access and Provider Capacity Assessment (SAPCA)
- ▶ Public Comment

# Assessment Tool Feedback

# Introduction

- ▶ Assessment Tool Subcommittee has a formal recommendation
  - Child and Adolescent Needs and Strengths (CANS) Assessment
- ▶ Your feedback is essential as we consider implementation

# Overview of CANS

- ▶ Strength-based assessment tool that considers both a person's strengths and needs.
- ▶ Uses input from child/youth, family, and other people involved in the person's life.
- ▶ Other states have used the tool for similar settlements
  - Washington WISe developed a website to centrally store CANS data

# Previous Feedback

## Challenges

- ▶ Assessments can be overwhelming
- ▶ Assessment information does not seem to be shared across providers

## Solutions

- ▶ Regular touch-base with case managers
- ▶ Regular assessment schedules
- ▶ Relevant progress assessments
- ▶ Sharing assessment data across providers

# Discussion

- ▶ As the state moves forward with implementing a uniform assessment process, what else should the state keep in mind?

# School-Based Services



# School-based CBS use, by populations of interest, SFY 2019 through 2023

SFY	Overall Medicaid enrollees who used CBS			Enrollees with DD who used CBS			Enrollees with ID who used CBS			Enrollees under age 21 with SED who used CBS		
	Total	Used SBS	%	Total	Used SBS	%	Total	Used SBS	%	Total	Used SBS	%
2019	126,821	4,596	4	11,347	1,640	14	13,461	1,364	10	42,588	1,093	3
2020	123,209	6,392	5	11,336	2,130	19	13,373	1,504	11	40,074	2,324	6
2021	123,436	5,908	5	11,294	2,028	18	12,969	1,289	10	40,011	2,290	6
2022	126,822	6,759	5	12,260	2,502	20	13,068	1,345	10	40,811	2,539	6
2023	126,707	6,523	5	12,880	2,439	19	13,287	1,301	10	39,552	2,357	6

Source: Mathematica's analysis of Iowa Medicaid enrollment and claims/encounter data from July 1, 2022, through June 30, 2023.

Note: Service use for DD and ID enrollees is not restricted to those under age 21.

CBS = community-based services; DD = developmental disability; ID = intellectual disability; SED = serious emotional disturbance; SFY = state fiscal year; SBS = school-based services.

# School-based CBS use, by type of CBS, SFY 2023

	Any CBS	Mental health	Home-based services	Transportation	Nursing
Unique enrollees	6,523	3,930	2,235	1,528	382
Percentage	100	60	34	23	6

CBS = community-based services

SBS = school-based services

SFY = state fiscal year

Source: Mathematica's analysis of Iowa Medicaid claims/encounter data from July 1, 2022, through June 30, 2023.

Note: Category totals exceed the "Any CBS" total and percentage row does not add to 100, as unique enrollees may use services in multiple categories. The CBS categories included in this table are the only CBS types that had enrollee counts greater than zero where the National Provider Identifier number matched that of a LEA in Iowa. Case management is not included here, given that Iowa's contracted managed care plans receive administrative payments for providing community-based case management to all members enrolled in HCBS waivers, which is not captured in the claims/encounter data. In the available claims/encounter data, we only found 620 enrollees using case management services that was billed directly from providers through SBS, which is likely an undercount from the number of enrollees eligible for this service.

# School-based providers' self-reported ability to identify, screen and treat CBS needs in schools

- ▶ A majority (74%) of school-based providers felt they could identify and screen for needs
- ▶ 74% also agreed they understood how to best treat and support children's needs
- ▶ But 27% of providers did not feel capable of providing direct services within schools to meet those needs

Source: Mathematica's analysis of 2024 SAPCA Iowa CBS provider survey

Note: Only providers of SBS were directed to respond to these questions (n=15).

CBS = community-based service;

IEP = Individualized Education Program

SAPCA = Statewide Access and Provider Capacity Assessment

SBS = school-based services.

# Challenges specific to school-based services

## ► SBS providers report gaps including:

- feeling less equipped to provide mental and behavioral health services compared to physical health services
- facing barriers connecting students to services in the community due to limited behavioral health providers, especially in rural areas.

► SBS providers feel overwhelmed with the expectation to fill service gaps and feel that it can come at the expense of their primary role as educators.

► SBS providers face challenges placing students with intensive needs in care.

# Recommendations to HHS for improving CBS among children and youth with SED

**1. Define roles of school-based providers**

**2. Provide better access to quality and licensed mental and behavioral health support.**

**3. Facilitate partnerships between LEAs, AEAs, community agencies, and families.**

**4. Incentivize hiring of trained staff within schools to address challenges accessing mental and behavioral health services in rural areas.**

**5. Build capacity to complete vital activities, such as referrals and care coordination, and provide services outside of an IEP by increasing reimbursement opportunities.**



# Discussion (cont.)

- ▶ Do these challenges seem accurate to your experience?  
Is there anything you would add?
  - SBS providers do not feel prepared to treat mental and behavioral health
  - It is hard to connect to services, especially in rural areas
- ▶ What do you see as the role of SBS providers?
- ▶ What would strong partnerships between SBS and other entities look like for families?



# Public Comment

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Health and  
Human Services