

Council on Health and Human Services

Meeting Minutes
May 29, 2025

COUNCIL MEMBERS		EX-OFFICIO MEMBERS	
X	Chair Rebecca Peterson		Senator Sarah Trone Garriott
X	Andrew Allen	X	Senator Mike Klimesh
X	Kay Fisk	X	Representative Heather Matson
X	Dr. Monika Jindal		Representative Carter F. Nordman
X	Dr. Donald Macfarlane		
X	Sandra McGrath		
X	Samantha Rozeboom, DNP		
X	Jack Willey		
X	Tom Brown		

1. **Call to Order**
Council Chair Rebecca Peterson called the meeting to order at 10:01 a.m.
2. **Roll Call**
The secretary conducted a roll call as indicated above; a quorum was present.
3. **Public Comment**
No public comment was received.
4. **Approval of Minutes**
Andrew Allen moved to approve the February 28, 2025, minutes (with the correction of Sandra's last name from Rozeboom to McGrath); seconded by Jack Willey. Motion carried by voice vote. Tom Brown abstained from voting, stating he was not an appointed Council member in February.
5. **Introductions**
Chair Peterson introduced new and re-appointed HHS Council Members
 - New Members
 - Tom Brown
 - Senator Mike Klimesh (ex-officio)
 - Representative Carter F. Nordman (ex-officio)
 - Reappointed Members
 - Kay Fisk
 - Dr. Monika Jindal
 - Senator Sarah Trone Garriott (ex-officio)
6. **Administrative Rules**
Denise Dutton, Appeals and Rules Bureau Chief, provided some highlights on the administrative rules.
 - HHS is working through "red tape review" under Executive Order 10 to review existing chapters and determining what rules can be repealed or need to remain.

Part of the process involves eliminating restrictive terms, removing outdated references and redundancies.

- Seven bulletins have been shared with the HHS Council since the last council meeting. Bulletins come out every two weeks (approximately).
- The 2025 rules include:
 - Noticed and adopted new Behavioral Health rules and Disability Services rules (implementing 2024 Iowa Acts, House File 2673)
 - ARC 4876C moving the Department on Aging rules to Health and Human Services
 - MEPD premiums updates
 - Orthodontia changes for Medicaid

7. **Legislative Session and Budget Update**

HHS Policy and Government Relations Director Carrie Malone provided an update of the 2025 legislative session.

- Governor Reynolds focused on Health and Human Services this session.
- Governor's rural health initiative passed.
 - HHS will seek federal approval to provide more Medicaid rate flexibilities for maternal health.
- Opioid settlement funds will be distributed. Several earmarks were made to specific organizations. Additional funds will be distributed 75% to HHS, and Attorney General's Office 25%.
- HHS Omnibus Bill Highlights
 - Ensures that child abuse and dependent adult abuse records are confidential.
 - Provides for an expedited process for kinship placement as allowed by federal law.
- Supporting Youth in Crisis Bill
 - Focuses on having a pathway for children to enter the system. Bill includes some Medicaid pieces and corrective changes.

Planning for the next legislative session

- Public Health System Alignment
- Opioid settlement funds distribution and effect on communities
- Medicaid for Employed People with Disabilities (MEPD). HHS will be researching that program.
- Ongoing conversations regarding Medicaid funding. The larger of these are the HOME and REACH initiatives.
- The Standings bill calls for an interim study committee on subacute services (legislatively convened).

Discussion followed regarding the interim study committee, federal cuts, and MEPD.

HHS CFO Jess Benson gave an update on the budget post-session. Some of the highlights include:

- \$25 million in flexible Temporary Assistance for Needy Families (TANF). HHS will use innovative approaches for use.

- \$210.5 million in Medicaid funding projected adjustment needs plus a 2% trend adjustment for acuity increases for programs.
- \$20 million for nursing home provider reimbursement rate rebasing.
- \$3 million for Intermittent Supportive Community Living
- Rate increases for Medicaid rate reviews.
- \$2.7 million general increase for the agency.
- \$1.1 million facility staffing annualization.
- \$1 million reduction for the More Options for Maternal Support (MOMS) program. This is due to having carryover funds. They will adjust next year.

8. **Aging and Disabilities Update**

Legal Counsel Jancy Nielson and Aging and Disability Services Division Director Zach Rhein provided an overview of the HHS Council's new duties related to Aging and Disability Services.

- Duties from the former Commission on Aging were reassigned to HHS Council, House File 2673 (90th General Assembly).
- Includes making recommendations to Iowa HHS regarding approval of State Plan, policies, and activities to support older Iowans and those with disabilities.

9. **Behavioral Health System Update**

Marissa Eyanson, Iowa HHS Director of the Division of Behavioral Health

- MHDS Commission Sunset Report. Director Eyanson provided an overview of the Mental Health and Disabilities Services (MHDS) Commission Sunset Report. The report was not required, but laid out barriers, recommendations, achievements, and resources by the Commission.
- District Profile and Plan. Director Eyanson shared a draft of a District Behavioral Health Profile which includes items like geography, demographics, risk factors, data, funding, future plan, and reporting.
 - The District Plan does not reflect diagnostic groups such brain injuries, but they part of integrated systems complemented in strategies and tactics of the Statewide Plan.
- Ex-officio Membership in Behavioral Health District Advisory Councils. Behavioral Health District Advisory Councils will be established as of July 1, 2025. HHS recommended that HHS Council voting members serve on each of the Behavioral Health District Advisory Councils as a local connection point and liaison.
 - HHS showed the map of the Behavioral Health Districts and proposed assignments of the HHS Council voting members. The item will be on the HHS Council agenda in August for continued discussion and vote.

Iowa Primary Care Association Presentation

Iowa Primary Care Association (PCA) CEO Aaron Todd and Chief Behavioral Health Officer Jeni Hanselman gave a presentation on how PCA will serve as the state's Behavioral Health Administrative Services Organization (ASO).

- PCA is a nonprofit association which consists of 14 Community Health Centers across the state. They support a range of care including integrated behavioral health, medical, oral health, and pharmacy services.

- As the state's Behavioral Health Services Organization, its statewide approach will include community needs assessment and planning; system navigation; funding and resource management; community engagement and education; collaboration and partnership building; and local service provision.
- Goals for July 1, 2025
 - Iowans continuing to receive the services they need
 - Ensuring providers are paid for their services
 - Installing behavioral health system navigation
- Accomplishments
 - Coordination across all Mental Health and Disability Services Regions, Disability Access Points, and Iowa HHS to plan for transition.
 - Seven District Advisory Councils have been formed.
- Contracts are being finalized.
- Behavioral Health System Navigation involves information, education, referrals, and support. Iowans can continue to call Your Life Iowa (call, text, chat).
- Having continued conversations about helping incarcerated individuals leaving jails/prisons who have a need for housing and other services.
- System navigation will assess how many people are seeking care which will determine target funding and building capacity, particularly for treatment.
- System navigation platform will assist with connecting to primary care providers.

10. **Director's Update**

Chief of Staff Sarah Ekstrand provided several updates on behalf of Director Kelly Garcia, including the following:

- **Healthy Kids Iowa.** Healthy Kids Iowa (summer feeding program) is a pilot project which provides \$40 of healthy foods per eligible child each month during June, July, and August. The food can be picked up from participating sites selected by the seven Foods Banks. There is at least one site in every county where families can access nutritious food.
- **Healthy Foods SNAP Waiver.** Iowa HHS received federal approval from the USDA for a demonstration waiver to align SNAP purchases with Iowa's sales tax rules. SNAP recipients will only be able to purchase non-taxable food items, primarily excluding items like sugary drinks and candy. The implementation date begins January 1, 2026. HHS continues to work with retailer partners and on consumer education.
- **Child Care Assistance (CCA) Pilot.** Governor Reynolds extended the Child Care Assistance program which allows childcare workers to be eligible for state childcare assistance funding. Serving 900 families. The program is supported and well utilized.

- Continuum of Care Grant. Iowa HHS is releasing a Request for Proposal for the Early Childhood Continuum of Care grant to ensure a full day of care. Five million dollars total will be used to incent partnerships between childcare providers and statewide volunteer preschool programs. The funds are discretionary and authorized by the agency to have Statewide Voluntary Preschool Program sites and child care centers apply for up to \$100,000 per year for three years.
- Work Requirements for Iowa Health and Wellness Plan (IHAWP) Members. On April 15, 2025, Governor Reynolds directed Iowa HHS to submit a waiver to the federal government to establish work requirements for Medicaid IHAWP recipients who are able-bodied and aged 19-64. HHS is analyzing feedback gathered from public hearings related to the proposed waiver. State legislation requires members to work at least 80 hours per month to maintain their health coverage under IHAWP; the Iowa HHS waiver meets the 80-hour minimum requirement by proposing 100 hours per month. Approved activities to meet the 100-hour requirement may include education, job training, other activities, or a combination thereof. HHS is working through operational details as part of negotiations with CMS. Certain groups are exempt from the requirements. Monitoring issue at federal level.

11. **Refugee Services Update**

Erin Drinnin, Division Director of Community Access and Eligibility, provided an update on Refugee Services.

- New Arrivals
 - New refugees are determined by the State Department who has a contractual relationship with resettlement agencies such as Catholic Charities, LSI, IRC, USCRI, and others. The resettlement agencies receive funding to assist refugees within first 90 day of arrival such as housing, employment, schools, healthcare, etc.
 - Iowa HHS does not receive funding or provide direct service regarding refugees acclimating and coming to Iowa.
 - New arrivals were put on pause and those contracts were canceled with resettlement agencies.
- Overview of Iowa HHS Bureau of Refugee Services (BRS)
 - The Iowa HHS Bureau of Refugee Services serves as the State Refugee Coordinator, providing strategic leadership and direction for refugee-related efforts across Iowa. BRS serves newly arrived and certain eligible groups within their first five years in Iowa.
 - BRS receives federal funding from the Office of Refugee Resettlement (ORR) to provide some direct services and contract out some funding for employment services and strengthening community partnerships.
- Afrikaners
 - First cohort of South African individuals and families (about 59 individuals total) came to the U.S.; 11 or 12 of them came to Iowa. Resettlement agencies are directly working with those individuals and families.
- Future State of Bureau of Refugee Services
 - Strategically assessing priorities and enhancing support systems for current and future refugee populations in Iowa.
 - Strengthening partnerships with communities and other state agencies

- Expanding data collection and accountability

12. Medical Director's Update

Measles

State Medical Director Robert Kruse gave an update on measles—cases, symptoms, treatment, and Public Health response.

- National Overview 2025
 - 1,046 cases report by 31 jurisdictions as of May 22, 2025
 - Under 5 years: 311 (30%)
 - 5-19 years: 389 (37%)
 - 20+ years: 336 (32%)
 - Age unknown: 10 (1%)
- Iowa Case
 - One confirmed case as of May 22, 2025, of an unvaccinated individual who returned to Iowa after international travel
- Recommendations and HHS Response
 - MMR vaccine protects against measles (two doses 95% effective)
 - HHS Public Health worked with local public health agencies to focus on MMR administrations which resulted in significant increase in MMR administrations for the first 4 months of the year.
 - Check for outbreaks before traveling.
 - Stay informed about symptoms and seek medical evaluation if needed.
 - If seeking medical care, notify clinic/hospital before arrival.
 - Avoid contact with others to prevent further spread.

HHS Strategic Plan and Plan in Action: Accomplishments and Updates

Dr. Kruse also gave a presentation on the Public Health and Performance teams' work to develop a Strategic Plan in Action, highlighting accomplishments and updates.

HHS Strategic Plan and Plan in Action: Identify accomplishments, develop new strategies, tactics, milestones and measures of success. Final reporting.

Strategic Priorities (January 2024 to December 2026)

- Elevate Organizational Health
- Advance Operational Excellence
- Help Iowa Thrive

Implementation Updates

- Version 2 Release
 - Scheduled for July 2025
 - Covers implementation period July 2025 – December 2026.
 - Additional details to be shared at the August HHS Council meeting.
- New Tactics
 - Reflect progress made over the past 18 months
 - Outline direction for the next 18 months.
- New Milestones
 - Designed to ensure accountability in ongoing work
- Baseline Data
 - Incorporated from the 2024 employee engagement survey

Provides feedback on organizational performance

Strategic Plan Implementation Timeline

- To meet reporting requirements for the Department of Management (DOM)
- Collect FY2025 program performance measure data
- Share performance report
- Provide budget allocation updates

Strategic Plan: Operations: Identify accomplishments, develop new strategies, tactics, milestones, measures of success – as needed. Quarterly check in on progress.

Strategic Plan: Operational Timeline Due to DOM

- Strategic and operational plans drafts are due in May 2025, and final versions are due in July 2025.
- Data for performance metrics (program-level) due in October 2025.
- Performance reports due in November 2025.
- Budget unit allocations due in December 2025.

HHS Council is interested in learning more about Behavioral Risk Factor Surveillance System (BRFSS) data.

13. **Council Discussion**

Future HHS Council Meeting Dates. Jack Willey moved to approve proposed future HHS Council meeting dates; seconded by Kay Fisk. The motion carried by voice vote.

14. **Adjournment**

Jack Willey moved to adjourn; seconded by Samantha Rozeboom. Motion carried by voice vote. Meeting adjourned at 2:09 p.m.