

Meeting Agenda

Division: Department of Health and Human Services, Iowa Medicaid

Meeting Topic: REACH Implementation Team: Communications Subcommittee

Facilitator: Will Linder, HHS

Date: 09/16/2025

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

- Will Linder
- Amy Berg-Theisen
- Christina Smith
- Anne Crotty
- Laura Leise
- Klaire Wisniewski
- Addie Kimber

Agenda Topic and Items

- Communications Materials
 - Iowa HHS shared information about the REACH communications which are in development, including:
 - The ongoing REACH roadshow which fosters a dialogue about REACH
 - An example one-pager with details on the REACH initiative and contract information for questions and further discussion

-
- A video for families from the Medicaid Director which will be posted to the website and explain REACH and HOME
 - Brochures and rack cards for community spaces like rec centers, health clinics, community centers
 - HHS is also working to update mailing lists and include more folks on newsletters explaining updates in REACH and HOME
 - Platforms for engagement
 - HHS shared that the new Medicaid director is interested in doing more in-person meetings with members and providers, and wants to do a roadshow similar to the HOME Town Conversations series.
 - Participants said that this series was great for getting information to folks and reducing confusion. These events should give people plenty of time to ask questions and get resources for additional information.
 - Participants noted that these events are not always well attended, and sometimes many of the participants are from MCOs. In order to increase participation, there should be ample notice about meetings and the meeting should be on a bus route. If providers are told about the meeting ahead of time, they can spread the word to their patients who may be interested. To ensure distribution of information, the meeting should also be recorded. Providing food and childcare can also bolster attendance.
 - Participants recommended that the answers to all questions should be posted to the website. HHS staff should also come in prepared to field questions, and the group should know which staff members can answer which types of questions.
 - Participants also emphasized that all information should be shared in multiple ways, including in-person meetings, recordings, written materials, and website materials.
 - Participants noted several best practices for ensuring that town hall engagements are accessible and informative
 - Youth and people with disabilities should be brought into these meetings to ensure we are getting their perspectives. Participants shared information about potential contacts to connect with those communities.
 - The state should also provide education about the Medicaid system itself. People may be afraid to speak up if they do not know something, so sessions should be approachable and give plenty of context on what the different programs are.

-
- Meeting goals and agendas should be shared ahead of time so participants are prepared for the meeting. It can also be helpful if folks can submit questions ahead of time.
 - There should be a dedicated individual to write down specific questions and be in charge of follow-up. Sometimes folks get into the specifics of their case instead of thinking about the larger picture, and having a dedicated person to follow up can help refocus the conversation.
 - Debriefs or short surveys can be a helpful way to gauge the success of a meeting.
 - Subcommittee updates
 - HHS shared a brief overview of the subcommittees involved in REACH.
 - HHS shared that they will rely heavily on the steering committee to provide more feedback on communication materials. They want folks to feel like they are part of the process.
 - REACH timeline
 - Participants shared that folks are upset with all of the change that is happening, including losing IHH services they are deeply engaged in, and they need to know what is coming next. HHS needs to be clear that it will be a while before REACH services are available, and let people know what is available for them now.
 - Participants raised that folks will definitely ask about timelines and what is currently available at any upcoming town hall meetings. This is a good opportunity to talk about the new things that are already available, such as the new navigation system and Disability Access Points.
 - We should also emphasize what is still available, such as BHIS and individual therapy. People did not expect the transition away from IHH, and we should be clear about what is not changing.
 - Participants mentioned that outreach should be cognizant of people's current state. Describing how great the future will be when people are struggling now may come across poorly.
 - Participants shared several principles to build and maintain trust through communication, even when the future of REACH is uncertain.
 - It is important to be transparent that the state does not fully know how REACH will look yet. Instead, the state can show what is available now and connect folks to the current behavioral health system which REACH will join.
 - If folks are giving input, it needs to be clear how their input is being used. Folks should be able to directly see how the system has changed based on their feedback.

-
- This could look like posting notes from guided discussions, outlining meeting goals and takeaways, reporting on how engagement has led to recommendations and influenced state decisions.
 - Participants shared that there is currently a lot of confusion around REACH and timelines- some folks thought REACH services were starting in 2026. A basic timeline should be shared with people to address this. Even if the timeline shifts, people will understand as long as there is consistent communication around why changes are happening.
 - An ideal timeline would describe what consumers can expect and what providers can expect during the next 3 months, 6 months, etc.