

Meeting Notes

Division: Department of Health and Human Services, Iowa Medicaid

Meeting Topic: Intensive Care Coordination Subcommittee

Facilitator: Jenny Erdman, HHS

Date: 08/20/2025

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

- Jenny Erdman
- Kati Swanson
- Daron Harris
- Nicki Enderle
- Katie Fuller
- Sarah Richardson
- Tresa Tanager
- Gretchen Hammer
- Kelsey Ruane

Agenda Topic and Items

- Role of peer support services in Iowa
 - Members noted multiple additional roles for peer support specialists in Iowa, including:
 - Providing care support before a crisis
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- Supporting creation of Individual Education Plans
 - Emotional support for parents/caregivers
 - Participants noted that parent cafés/support groups allow caregivers to meet with peer supports and help facilitate conversations.
 - Participants also noted several limitations to the current peer support system, including that:
 - Family supports are not available in all areas in the state. After COVID, groups/support groups either stopped or moved online. Having more options for communication would be beneficial.
 - Peer supports are underfunded, leading to high caseloads and workloads for peers.
 - A lack of support for peers, who may themselves be in crisis. Participants noted that support groups for peer support providers, and quarterly check-ins on goals and health may help.
 - Difficulty becoming certified. For individuals who may be in recovery and working and/or in college, it is difficult to balance the training and requirements in addition to their own obligations.
 - Peer supports training in the Washington WISe program
 - Participants felt that the number of hours of training that WA requires could hinder some of the incoming peer supports. However, participants noted some areas where additional training could be beneficial, including:
 - Assessment tool training
 - Crisis training for anyone working with people in crisis
 - Overall, participants felt that the focus should be more on skills and knowledge than number of hours. Being too stringent on required hours would likely create unnecessary barriers to developing the peer support workforce.
 - Participants largely felt that peer support specialists need more supports rather than more training. Participants agreed that peer specialists are looking for individual conversations, mentorship, and guidance in
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specific situations. Voluntary opportunities for ongoing or additional training would be helpful.

- One participant noted that the transition age youth program from Washington is something that is missing from Iowa's program and supported the idea of adding a similar program in Iowa.
 - Discussion
 - Participants noted that the lived experience and personal connections of a peer support specialist make them a helpful service who can provide credible, personalized care coordination and education.
 - Peer support specialists often collaborate with the care team by:
 - Sharing information in a relatable way for families and youth
 - Participating in planning meetings and uplifting families' voices
 - Participants noted that the roles of peer support specialists should be clear and suited to their role.
 - Additionally, there are situations where peer support specialists would be qualified to take the lead on certain tasks but are not permitted under state regulations. Participants encouraged further discussion on where the work of care teams can be flexible.
 - The requirement of lived experience can be difficult to fill. There are a lot of types of lived experience that can make a fantastic peer support other than having someone with a specific mental health need. Participants recommend finding ways of balancing what makes peer support specialists valuable with the specific requirements of lived experience.
 - Public Comment
 - None
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