

**Iowa Integrated Health Planning and Advisory Council (I-PAC)**  
**January 21, 2026, 9:00 am to 3:00 pm**  
**via Zoom**  
**Meeting Minutes**

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**IOWA INTEGRATED HEALTH PLANNING COUNCIL MEMBERS PRESENT:**

Teresa Bomhoff	Brad Richardson
Linda Dettmann	Kristin Roof
Vienna Hoang	Ellen Schardt
Alicia Karwal	Brianna Steffe
Michael Kaufmann	Dr. Shaad Swim
Todd Lange	Monica Van Horn
Megan Marsh	William Veltri
Todd Noack	Melissa Walker
Hannah Olson	Edward Wollner
Roxanne Petersen	Kelly Yeggy

**IOWA INTEGRATED HEALTH PLANNING COUNCIL MEMBERS ABSENT:**

Jennifer Day	Senator Janice Weiner
Jessica Goltz	Representative Ann Meyer
Lorien Harker	
Jennifer Riley	

**OTHER ATTENDEES:**

Theresa Armstrong	Ashley Hazen
David Danforth	Erin Longnecker
Quin Echard	Patti Manna
Jenny Erdman	Aubrie O'Haver
Maggie Ferguson	Flora A. Schmidt
John Hale	Annie Uetz
Kyra Hawley	Sherrie Watkins

**Materials Referenced:**

*I-PAC November 19 2025 Meeting Minutes DRAFT*  
*I-PAC Workgroup Reports Summary 202601*  
*Options Counseling Presentation Slides\_January 2026\_FINAL*  
*About ORN - General Info Slides*  
*HOME Waivers PC Informational Session Slides*  
*I-PAC Member Expectations 2026.01.21*  
*I-PAC Education Presentation 2026.01.21*

**Welcome**

Teresa Bomhoff called the meeting to order 9:13 am. Quorum was established with 16 members at 9:16 am.

**Review and Approval of Meeting Minutes**

Teresa Bomhoff entertained a motion to approve the I-PAC November 19, 2025, Meeting Minutes. Roxanne Peteresen motioned to approve the minutes; Monica Van Horn seconded the motion. There was no further discussion, the motion passed, and the minutes were approved.

### **Nominations Committee Report – Teresa Bomhoff**

Teresa Bomhoff shared the status of memberships. Memberships that have ended due to attendance include Rod Courtney, Kyra Hawley, and Jenny Erdman. Memberships that have ended due to resignations include Theresa Henderson, Lori Hancock-Muck, and LaShawna Dean.

The Council now has 9 vacancies. The vacancies are as follows;

- 3 vacancies representing **public and private entities** concerned with the need, planning, operation, funding, and use of mental health and substance abuse prevention, treatment, and recovery treatment services and related support services statewide.
- 1 vacancy for an **adult with** serious mental illness and/or substance use disorder and current or past persons with **lived experience** of mental health and/or substance abuse prevention, treatment, and recovery treatment services.
- 1 vacancy for a **family member** of an adult with serious mental illness and/or substance use disorder
- 2 vacancies for a **parent, guardian, or primary caretaker** of a child/adolescent with serious emotional disturbance
- 1 vacancy for an **other individual** with an interest in supporting the needs of children with serious emotional disturbance and/or substance use disorder and adults with serious mental illness and/or substance use disorder. (**military veteran**)
- 1 vacancy for a member representing the principal State agencies with primary responsibility for the following programs: **Medical Services (Title XIX--Medicaid)**

Teresa Bomhoff asked for a volunteer to fill the position of Secretary of the Council, and the duties were explained. Roxanne Petersen volunteered, Todd Noack motioned to nominate Roxanne Petersen, Kelly Yeggy seconded and the motion passed.

There is a need to fill a vacancy on the Nominating committee, and the duties of the position were explained. Teresa Bomhoff asked Hannah Olson if she was willing to fill the position, and she agreed. Roxanne Petersen motioned to nominate Hannah Olson, Todd Lange seconded the motion passed.

There is a need for an additional member on the Monitoring and Oversight Committee. The committee duties were shared. Alicia Karwal will agree to attend, and the committee will decide on a chair at their next meeting.

## Workgroups

Teresa Bomhoff reviewed the Council Committee and Workgroup Reports Summary, and each workgroup chair or representative provided a brief verbal update.

- **Certified Community Behavioral Health Clinics (CCBHC):** Todd Lange reported the recommendation to schedule a CCBHC panel presentation by Spring 2026, inviting providers and/or HHS contacts Wendy DePhillips and Laura Larkin to share first-year implementation impacts.
- **Children's Issues:** Alicia Karwal noted the workgroup met with Joe Criger from Iowa PCA and recommended inviting him back for further discussion; no new formal recommendations.
- **Older Iowans:** Kelly Yeggy reported recommendations to request presentations from John Hale, Dean Lerner, and partners on nursing home legislation and related issues and a presentation on Options Counselors.
- **Public Safety:** No new recommendations; a new chairperson will need to be selected.
- **Strategic Planning:** Kristin Roof reported recommendations to continue follow-up on logo use, discuss usage with the Executive Committee, and remind workgroup chairs to update the shared repository.
- **Substance Use Disorder (SUD):** Edward Wollner reported recommendations to monitor the impact of marijuana reclassification from Schedule I to Schedule III, draft a letter to legislators with recommendations, and invite Kevin Gabbert (HHS) for an update on Opioid Settlement Funds.

## I-PAC Chair update/planning for future meetings – Teresa Bomhoff

Teresa Bomhoff reminded Council members that stipends are available for attending virtual meetings and noted that instructions for the process have been shared with all members. She also reminded members to return their conflict of interest statements; all but one have been received.

Teresa Bomhoff shared that Iowa Health and Human Services presented plans to consolidate six diagnosis-based Home and Community-Based Services waivers into two streamlined, age-based waivers: the Children and Youth Waiver for individuals from birth through age 20 and the Adults with Disabilities Waiver for those age 21 and older, while continuing the Elderly Waiver for individuals age 65 and older. The transition will occur in two phases, beginning in late 2026 and concluding in 2027. A public comment period for the HOME Project redesign is open from January 12 through February 13, 2026, and has been extended to five weeks to allow for additional input.

Teresa Bomhoff shared that the Subacute Mental Health Care Services Interim Study Committee met on January 6, 2026, to review service needs, delivery structures, and legal requirements for subacute mental health care in Iowa. Key discussion points included revising state law to remove the 10-day discharge requirement, eliminating the 15-bed facility limit, and aligning staffing requirements with those for acute mental health hospitals; no formal recommendations were adopted.

Teresa Bomhoff shared several resources and reminders, including registration for the Governor's Conference on Behavioral Health (April 21–23), sign-up links for the Iowa Primary

Care Association behavioral health newsletter and the Iowa Developmental Disabilities Council newsletter, and a link to Alzheimer's Association free educational videos.

Teresa Bomhoff provided an overview of the proposed changes to the Interim Strategic Plan dated January 10, 2026. Key points included:

- The plan timeframe will be extended from 1.5 years to 2.5 years, ending July 1, 2027, to align with implementation of the state plan.
- Vision and mission statements remain unchanged.
- A new SWOT analysis will be required in preparation for the 2028–2030 Strategic Plan.
- Goals, website location for I-PAC information, and status of workgroups remain the same.
- Websites have been identified, verified, and reorganized.
- Milestones were set for plan approval, extension, monitoring, and drafting the 2028–2030 Strategic Plan.

Members were provided with an opportunity for feedback on the proposed changes. Members discussed the Council's progress and raised concerns that its recommendations are not being acted upon by HHS, along with concerns about lack of funding to programs.

A motion to approve the extension of the Strategic Plan was made by Todd Lange and seconded by Michael Kaufmann; the motion carried.

There was a suggestion to invite Democratic caucus staff outside of legislation to the meeting.

#### **Orientation Committee – Todd Lange**

Todd Lange reviewed the presentation Council Member Expectations, which covered the Council's purpose, standing committees, monthly and special workgroups, conflict of interest guidelines, and attendance requirements.

#### **District Advisory Council Meetings – Todd Lange**

Todd Lange shared information about the Iowa Primary Care Association's District Advisory Councils, which provide regional collaboration and input on behavioral health initiatives. Additional details and resources are available on the Iowa PCA website.

#### **Block Grant Education Committee – Todd Lange and Monica Van Horn**

Todd Lange shared an overview of the 2026–2027 Combined Block Grant Application. The presentation covered key components, including state information, planning steps, budget tables, and environmental factors such as access to care, prevention, crisis services, and the statewide behavioral health plan. Priorities highlighted in the application were crisis services, CCBHC implementation, early serious mental illness treatment, public awareness, workforce development, recovery support, primary prevention, and services for pregnant women and persons who inject drugs. I-PAC recommendations included expanding peer support, funding prevention and early intervention, implementing crisis intervention training for first responders, increasing workforce capacity, and broadening evidence-based practices. Opportunities for involvement and expanding knowledge include joining the Block Grant Application Committee or the Monitoring and Oversight Committee.

## **Iowa Health and Human Services (HHS) Updates – Theresa Armstrong, HHS**

Theresa Armstrong provided an update from HHS.

Theresa Armstrong provided an update from HHS regarding recent federal grant activity. On January 13, 2026, SAMHSA issued termination notices to approximately 2,000–2,800 discretionary grantees, canceling nearly \$1.9–\$2 billion in mental health and substance use disorder grants, citing that projects “no longer align” with new agency priorities.

At Iowa HHS, five grants totaling about \$3.7 million—primarily prevention programs—were impacted. The federal terminations were rescinded within 24 hours, and contracts that HHS initially terminated have all been reinstated.

These actions are prompting HHS to exercise caution moving forward, assuming fewer discretionary grants may be available in the future. Theresa emphasized that no immediate changes are planned and that the Community Mental Health Services Block Grant (MHBG) and Substance Use Prevention, Treatment, and Recovery Services Block Grant (SUPTRS) were not affected.

There was a question on where Iowa’s peer support funds are coming from. Theresa clarified that Community Mental Health Centers often use block grant funds for peer support, and trainings are supported by block grant dollars. The safety net behavioral health system combines block grant and state funds, while accredited organizations utilize Medicaid funds.

Theresa provided additional updates on the work of Iowa Primary Care Association (Iowa PCA). Iowa PCA oversees monthly District Advisory Council meetings across seven behavioral health districts, with recordings and resources available online. Members are reminded to attend upcoming meetings and review the Iowa PCA stakeholder newsletter for training opportunities; Patti Manna will ensure members are signed up and forward newsletters. The district assessment survey, completed with 1,600 responses, is informing guided provider discussions through mid-February. Draft district plans are due to HHS by March 30, with final plans by June 1 to guide FY27 operations. Iowa PCA reported strong engagement in recent meetings and will collaborate with HHS on an earlier FY27 contracting process, with details expected before April 2026.

At the end of December, Iowa HHS announced opioid settlement funding for ten priority areas—such as naloxone distribution, medication-assisted treatment, services for pregnant and postpartum women, neonatal abstinence care, warm handoff and recovery supports, treatment for justice-involved individuals, prevention programs, syringe services, and evidence-based data collection—and indicated that additional funds will be available for new proposals in the spring.

Iowa was awarded \$209 million annually to expand and sustain rural healthcare through the Healthy Hometowns – Rural Health Transformation Plan. This Centers for Medicare and Medicaid Services funded initiative focuses on building health systems with telehealth, improving cancer prevention and treatment, co-locating services for chronic disease care, creating a statewide health information exchange, and providing mobile community care for prenatal, postpartum, and chronic conditions.

The next Iowa HHS Behavioral Health Town Hall will be held tomorrow at 4:00 PM. Links to join the meeting are available on the HHS webpage.

### **Public Comment**

There was an opportunity for public comment, with none offered.

### **Break for lunch**

12:00 pm to 1:00 pm

### **Options Counseling – Erin Longnecker, HHS**

Erin Longnecker presented on Options Counseling, a person-centered approach that differs from system navigation by empowering individuals to make informed choices about long-term supports. The process includes a personal interview, development of a person-centered plan, access to public and private resources, and follow-up. Eligible participants include adults 60+, adults with disabilities, parents of children with disabilities, and caregivers. Iowa's Aging and Disability Resource Center (ADRC) facilitates this interactive process, guiding individuals through resource exploration and action steps toward their goals. Tools and resources used include training through Iowa's ADRC Training Network.

### **Long Term Care for Older Adults in Iowa - John Hale**

John Hale shared that he advocates for older Iowans, people with disabilities, and caregivers through policy and grassroots efforts. He highlighted that Iowa's 65+ population is growing, with the fastest-growing group being those 85 and older and noted that 70% of people over 65 will need long-term care. He stated that Iowa faces gaps in choice, quality, and affordability, with care shifting from non-profit to for-profit models and most individuals eventually relying on Medicaid. Hale urged policy changes and constituent advocacy, citing the influence of nursing home campaign contributions, and encouraged monitoring 2026 long-term care legislation after a previous 14-bill package failed. Council members agreed on the urgency of these issues.

### **Opioid Response Network – Sherrie Watkins**

Sherrie Watkins presented an overview of the Opioid Response Network (ORN), a SAMHSA-funded initiative led by the American Academy of Addiction Psychiatry and a coalition of over 50 national organizations. ORN provides free, evidence-based education and training on prevention, treatment, and recovery for opioid and stimulant use disorders, as well as co-occurring conditions. Services are delivered locally through Technology Transfer Specialists in every state and territory, ensuring customized technical assistance for government agencies, organizations, and individuals. Examples of support include naloxone training, prevention curriculum development, telehealth expansion, medication-assisted treatment guidance, and recovery support models.

### **Public Comment**

There was an opportunity for public comment, with none offered.

### **Adjournment**

The meeting adjourned at 2:56pm.

*Meeting minutes respectfully submitted by Patti Manna.*