

**Iowa Integrated Health Planning and Advisory Council (I-PAC)**  
**March 18, 2026, 9:00 am to 3:00 pm**  
**via Zoom**  
**Meeting Minutes**

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

Angela Albers	Roxanne Petersen
Teresa Bomhoff	Brad Richardson
Jennifer Day	Jennifer Riley
Quin Echard	Kristin Roof
Sue Gehling	Travis Robinson
Jessica Goltz	Ellen Schardt
Lorien Harker	Brianna Steffe
Vienna Hoang	Dr. Shaad Swim
Alicia Karwal	Monica Van Horn
Michael Kaufmann	William Veltri
Todd Lange	Melissa Walker
Megan Marsh	Ashley Watts
Todd Noack	Edward Wollner
Hannah Olson	Kelly Yeggy

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

Linda Dettmann

**OTHER ATTENDEES:**

Theresa Armstrong	Blair Oakley
Linda Brundies	Kayla Powell
Wendy DePhillips	Denise Rathman
Jim Irwin	Flora A. Schmidt
Laura Larkin	Melissa Walker
Patti Manna	Libby Whelan
Kristi McDonough	

**Materials Referenced:**

*Peer Support Inventory Summary - 2026.01.12*  
*Office of Youth and Family Engagement - 2026 – IPAC*  
*I-PAC January 21 2026 Meeting Minutes DRAFT*  
*Intensive Residential Services (IRS) Guidance Manual - 2026.03.02*  
*HHS Alignment Reference Guide - 2026.03.10*  
*Eyerly Ball I-PAC CCBHC Presentation*  
*CCBHC\_Model\_IPAC\_Meeting\_3.18.2026*  
*2025 Youth Justice Council Action Plan*  
*3-18-26 I-PAC PP – TVB*  
*3-18-26 -Notes for PP -TVB*

## **Welcome**

Teresa Bomhoff called the meeting to order at 9:03am. Quorum was established with 17 members at 9:03am.

## **Review and Approval of Meeting Minutes**

Teresa Bomhoff entertained a motion to approve the I-PAC January 21, 2026, Meeting Minutes. Todd Lange motioned to approve the minutes; Todd Noack seconded the motion. There was no further discussion, the motion passed, and the minutes were approved.

## **Nominations Committee Report – Brad Richardson**

Brad Richardson shared the Nominations Committee Report.

- **Current Vacancies (9 total)**
  - 3 public/private entity representatives
  - 1 adult with lived experience
  - 1 family member of an adult with SMI/SUD
  - 2 parent/guardian of a child with SED
  - 1 “other individual” (military experience)
  - 1 state agency representative (Medicaid)
  
- **Member Category Updates**

William Veltri moved from “adult with lived experience” to “other – military experience.”  
Ashley Watts assigned as Medicaid representative.
  
- **Applicant Recommendations Approved by Nominations Committee**

Angela Albers – Parent/guardian of child with SED.  
Quin Echard – Adult with lived experience.  
Sue Gehling – Public/private entity representative.  
Travis Robinson – Public/private entity representative.  
Todd Noack motioned; Kelly Yeggy seconded; motion carried.
  
- **Remaining Vacancies**
  - 1 public/private entity representative
  - 1 other individual
  - 1 family member of an adult with SMI/SUD
  - 1 parent/guardian of child with SED

**Workgroups** Teresa Bomhoff reviewed the Council Committee and Workgroup Reports Summary. Noted below is the individual reporting and the recommendations of the workgroup

- **Certified Community Behavioral Health Clinics (CCBHC)** – Todd Lange: Review insights from the CCBHC panel discussion to inform future recommendations.
- **Children's Issues** – Jessica Goltz: Monitor youth-related legislation, expand youth input, and advocate for increased prevention and early intervention funding.

- **Older Iowans** – Kelly Yeggy: Encourage attendance at the Governor’s Conference; invite Maximus to discuss PASRR and service verification; invite Janet McGinnis to present on environmental and lifestyle programming.
- **Public Safety** – Patti Manna: No new recommendations; attendance challenges continue; new chair needed.
- **Strategic Planning** – Kristin Roof: Stay updated on legislation; maintain awareness of the Peer Support Inventory; receive the HHS Alignment Reference Guide.
- **Substance Use Disorder (SUD)** – Edward Wollner: Invite Kevin Gabbert for update on Opioid Settlement Funds; encourage attendance at the Drug Endangered Children Conference and Governor’s Conference on Behavioral Health.

### **HHS Alignment Guide**

Todd Lange created and shared the document *HHS Alignment Reference Guide* to provide a structured overview of Iowa’s aligned Health and Human Services (HHS) system, outlining how Behavioral Health Districts and the Aging & Disability Resource Center (ADRC) Network are organized across the state.

The document includes:

- A directory of key contacts for all seven Behavioral Health Districts, including administrative oversight and district leadership roles.
- A detailed explanation of the three-part ADRC Network (Iowa Compass, Disability Access Points, and Area Agencies on Aging), along with statewide and district-level contact information and service coverage.

### **Intensive Residential Services (IRS)/Intensive Residential Service Homes (IRSH)**

Todd Lange provided an overview of Intensive Residential Services (IRS) and Intensive Residential Service Homes (IRSH). IRS are intensive, community-based services delivered 24 hours per day, 7 days a week, 365 days per year to adults with a severe mental illness who have significant functional impairments, including those with multi-occurring conditions. These services include continuous supervision, behavioral health services, and rehabilitative supports within a community residential setting.

### **Peer Support Inventory**

Todd Lange created and shared the document *Peer Support Inventory Summary* to provide an overview of Iowa’s Peer Support Inventory (PSI), a statewide collection of data on Peer Support Specialists, Family Support Specialists, and Recovery Coaches. It outlines where peer support services are delivered, the distribution of roles across Behavioral Health Districts, and employment patterns for each support type.

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

Teresa Bomhoff provided an overview of these documents:

- *3-18-26 Notes for PP – TVB.pdf* – a broad summary of 2026 legislative activity, including updates on education, health and human services, criminal justice, taxes, local control, and environmental bills. It also outlined retiring legislators and upcoming primary election candidate information.

- *3-18-26 I-PAC PP – TVB.pdf* – a condensed slide-style overview highlighting retiring senators and representatives, major policy themes, and a link to the Secretary of State’s candidate list.

### **Key points Teresa emphasized:**

- Significant turnover expected in the legislature due to numerous retirements.
- Wide-ranging bills affecting behavioral health systems, schools, Medicaid, aging services, criminal justice, environmental health, and local government authority.
- Only two bills signed so far this session; many proposals still in motion ahead of the second funnel deadline.
- Council members encouraged to stay informed as many legislative changes will directly impact planning and service delivery.

### **Monitoring and Oversight Committee – Roxanne Petersen**

The Monitoring and Oversight Committee, chaired by Roxanne Petersen, discussed ongoing challenges in reviewing the Center of Excellence for Behavioral Health (CEBH) contract with Iowa HHS. Members expressed that they do not have the documentation needed to evaluate the contract or meet the responsibilities outlined in the Council bylaws, including access to contract details, funding information, deliverables, and expenditures. Because these gaps remain unresolved, the committee determined it could not prepare a report or recommendations for the March 18, 2026, Council meeting.

HHS staff clarified that the committee is not responsible for contract monitoring but is to act in an advisory role. Committee members expressed concern about the disconnect between the written duties developed by the Council and the verbal guidance provided by HHS. A meeting with HHS and Council leadership will be scheduled to develop improved transparency and clearer processes.

### **Iowa Health and Human Services (HHS) Updates – Theresa Armstrong, HHS District Advisory Councils and Planning**

Theresa reported that the Iowa Primary Care Association is completing district assessments and plans for all seven Behavioral Health Districts. These will be submitted to HHS on March 31 for review. Assessments incorporate survey feedback (over 1,600 responses), input from District Advisory Council meetings, and guided provider discussions.

### **SNMIS Billing System and Fee Schedule Updates**

Theresa provided an update on the Safety Net Management Information System (SNMIS) and outlined several additions to safety-net fee schedules intended to improve access to reimbursable behavioral health and recovery services. Key additions include:

#### **• For SUPTRs (SUD Block Grant) providers:**

- Recovery peer coaching
- Transportation (gas cards)
- Medications for opioid use disorder (MOUD)

#### **• For the new Community Mental Health Center (CMHC) fee schedule:**

- Outpatient SUD treatment
- Transportation via gas card

- Multisystemic therapy (MST)
- Long-acting injectables
- Psychological testing
- SUD counseling

• **For the Behavioral Health fee schedule:**

- Peer support services
- Outpatient SUD treatment
- Multisystemic therapy
- Long-acting injectables
- Psychological testing

Theresa noted that long-acting injectable medications were added because they cannot be billed through other assistance programs.

**Governor’s Conference on Behavioral Health**

Theresa encouraged participation in the Governor’s Conference on Behavioral Health, held April 21–23 (virtual, \$25), noting that CEUs will be available.

**Town Hall Schedule**

There will be no Behavioral Health Town Hall in March due to the District Advisory Council meetings occurring throughout the month.

**Office of Youth and Family Engagement – Kayla Powell, HHS**

Kayla Powell and Blair Oakley presented an overview of the Office of Youth and Family Engagement, which strengthens youth and family involvement across HHS through authentic, lived experience driven engagement. The team supports statewide initiatives, youth councils, and system improvement efforts.

**Key Highlights**

- **Youth Advisory Council (SIAC):** Conducts statewide youth surveys, leads legislative advocacy, and supports bills such as SF 2319 requiring Your Life Iowa resources on school websites.
- **Talking Wall Project:** 4,055 youth responses gathered this year, leading to policy changes such as increased clothing allowances and improved access to hygiene products.
- **Youth Justice Council:** Develops annual action plans addressing mental health, dignity in care, prevention, and policy participation; co-hosts the Family & Youth Engagement Summit.
- **Credible Messengers Program:** Davenport pilot pairing youth involved in gun/gang violence with trained mentors; expansion planning underway.
- **Behavioral Health Engagement:** Youth-led suicide prevention work, expanded Talking Walls, youth-designed 988 messaging, and development of a youth peer support model.

**Public Comment**

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

## **Break for lunch**

12:00 pm to 1:00 pm

## **CCBHC Panel Discussion**

### **Panelists:**

Laura Larkin, Iowa HHS

Monica Van Horn, Unity Point Health - Eyerly Ball

Kristi McDonough, Southern Iowa Mental Health Center

### **Overview of Iowa's CCBHC Initiative**

Laura Larkin presented an overview of Iowa's Certified Community Behavioral Health Clinic (CCBHC) model. She noted that Iowa joined the federal demonstration in 2024 and began service implementation on July 1, 2025. Ten providers were certified across the state. CCBHCs must meet 113 federal criteria and provide nine required services, including mental health, substance use treatment, crisis response, and care coordination. CCBHCs serve individuals of all ages regardless of diagnosis or insurance status.

There was clarification on peer support services, which are a required component of CCBHCs. Clinics employ peer support specialists, recovery coaches, and family peer support workers. Several providers have expanded peer roles into crisis response teams, support groups, wellness center programming, and veteran-focused peer services.

Monica Van Horn reported on Eyerly Ball's implementation work, including expanded partnerships with schools and hospitals, a redesigned intake process, enhanced case management, and development of an on-site pharmacy. Peer supports have been expanded, including the addition of a peer drop-in center. Eyerly Ball has also broadened services in children's behavioral health, Medication-Assisted Treatment (MAT), Certified Alcohol and Drug Counselor (CADC) staffing, and peer recovery coaching, with upcoming implementation of Functional Family Therapy (FFT) and Trauma-Focused Cognitive Behavioral Therapy (TF-CBT). Operational updates touched on billing differences across counties, Medicaid secondary payer questions, Designated Collaborating Organization (DCO) relationships, and upcoming cost reporting responsibilities.

Kristi McDonough emphasized the CCBHC model's reliance on peer support within crisis services and described how peers are incorporated into crisis operations.

The panel addressed questions related to:

- Expansion and integration of peer services.
- Access timelines for both CCBHC and crisis services.
- Implementation successes and remaining challenges.
- Impacts of the Medicaid PPS (Prospective Payment System) reimbursement model.
- Coordination requirements across counties and with crisis response systems.

**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.*