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## APRIL 25, 2023, 3:00-4:30 PM CENTRAL TIME

## Summary of Meeting Themes:

- Mathematica provided a recap of the three main recommendations from the community-based services evaluation and the related planned activities for the community-based services (CBS) redesign. The Iowa HHS website has more information: <a href="https://hhs.iowa.gov/CBS-Redesign">https://hhs.iowa.gov/CBS-Redesign</a>.
- Mathematica also reminded committee members that people interested in participating in
  engagement activities should complete an expression of interest form (<u>linked here</u>). The CBS
  redesign team will schedule focus groups and interviews on a rolling basis.
  - Mathematica asked committee members to help recruit individuals who receive case management services from integrated health homes or who work as case managers employed by integrated health homes.
  - Committee members asked who will be trained to support system navigation under the maximize access to CBS task. Mathematica clarified that these would be new positions with staff specifically trained to provide system navigation services.
- Mathematica provided an overview of the point in time (PIT) screening, which will help identify
  the needs of individuals on the waiver waitlist.
- Mathematica explained the different screening tools used by various states, the common domains measured across tools (Activities of Daily Living, Instrumental Activities of Daily Living, informal supports, cognition, health, and behavioral health), and the three deciding factors for selecting a screening tool – length, uniformity, and priority domains.
  - Committee members asked when the PIT screening would occur in the waiver process. Mathematica explained that Iowa will use the PIT screening to screen waitlist individuals early and identify the best waiver to meet their needs. Then, an in-depth assessment would happen once an individual is on the waiver, to support service-planning and case management.
  - Committee members asked what would happen in the new system if the best waiver had a longer waitlist than the second-best waiver. Mathematica responded that the goal is to collect information from individuals on the waitlist to inform the decision-making around a better waiver structure system that avoids overlapping eligibility across waivers and long waitlist times.
- The steering committee broke up into 3 groups to discuss the 5 questions below:
  - What is your reaction to the concept of a single screening tool across waivers for the purposes of the point-in-time screening?

- Committee members had a mostly positive reaction to the use of a single screening tool but there were concerns with a one size fits all approach. The consensus was that one tool would not be able to accommodate all disabilities and be responsive to multiple diagnoses and hidden disabilities. Members also cautioned that a long assessment could be a barrier to waiver entry.
- Committee members were concerned that the screening tool would not account for the unique needs of children and their families.
- Committee members suggested having a set of basic questions and then more specific questions that could focus on individual needs.
- What do you think about the priority domains? Are these the right ones? Are some missing?
  - Committee members suggested adding questions to assess the age and health status of an individual's caregiver, social determinants of health, level of intensity, level of crisis, and risk of injury.
  - Committee members suggested age-based screening tools with age-appropriate questions that center on social, behavioral, and environmental factors would help account for children at different developmental stages.
- What factors do you think are important for HHS to keep in mind as it moves towards implementing the point-in-time screening?
  - Committee members highlighted the need to conduct periodic screening for individuals with changing needs (i.e., progressive diseases).
  - Committee members suggested a forecasting component that asks individuals, "Where do I see myself in 5 years?" to encourage people to apply for the waiver before they need it. Committee members noted that it is not possible to project injuries, traumatic events, or changing health and behavioral health conditions, so this exercise won't work for all people and situations.
  - Committee members mentioned it is important for the CBS Redesign team to review the tools managed care organizations (MCOs) already use to make sure the PIT screening is not redundant. Keeping the screening shorter is important too, to reduce the frustration for families and individuals who have already provided similar information.
  - Committee members also suggested requiring standardized training for staff administering the PIT screening for consistent scoring and evaluation of results.
- When thinking about a Medicaid member who is waiting for a waiver slot, how do they find out about other available community-based services?

- Committee members said that it is difficult to find both waiver and non-waiver services, and that many of the resources and dashboards created during COVID are out of date.
- Committee members mentioned some ways to receive information about other available HCBS, including the Area Agency on Aging (AAA), friends and family, social workers, support groups, county-based resources, and advocacy organizations.
- Committee members suggested converting the Medicaid billing authorizations into a database to help compile all resources into one place.
- Committee members also suggested creating a list of available resources that staff conducting the screenings could share with individuals.
- Committee members suggested using schools to connect individuals to available resources.
- In the current system, how would they go about accessing those community-based services?
  - Committee members noted that most people don't know where to go to find or access services in the current system. However, the committee offered ideas about channels for sharing clear information:
    - The Central/Southwest Iowa counties have resource fairs each month.
    - Rural counties have listservs that, with improvements, could help direct individuals to HCBS resources.
    - Title V employs family navigators; this could be a good starting point to inform the new system navigator workforce.
- Mathematica ended by confirming the next steering committee meeting on Tuesday May 30, from 3:00-4:30, which will focus on journey mapping. Mathematica will send the agenda and slides in advance.