

# HOMEtown Conversations

A series of forums for people receiving long term services and supports to talk with Iowa Medicaid leaders



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# HOMETOWN CONVERSATIONS GOALS

- Engage Iowans and build trust by increasing HHS leadership's on-the-ground presence across the state
- Share information about HOME, including redesign goals, timeline, accomplishments, and upcoming activities
- Receive feedback from Iowans about the redesign effort to inform decision-making



# HOME guiding principles



Equitable  
access



High quality  
service



Coordinated  
across systems



Proven  
valuable



Effective and  
accountable

# HOME activities



Streamline screening and enrollment



Align services to needs, goals and preferences



Improve access to services and supports for lowans



# We need your input!

## Discussion Norms

- Listen with an open mind
- Be ready to engage, using your experience to reflect the diverse views of Iowans
- Be respectful of other's views
- Aim for a balanced conversation
- Focus on forward-looking solutions rather than past challenges



# HOMEtown Engagement



22 – 118 attendees per event



659 in-person event attendees total



19 legislators



400 indicated interest in virtual events



>300 written comments

"Services shouldn't be 'you have this disability, here are these services.' But rather 'you have these needs, here are services that align with this.'

- *Family Member*

# HOMETOWN CONVERSATIONS INPUT AREAS

## WHAT HAVE WE LEARNED?

Highlights of information shared by Iowans at  
in-person HOMETOWN Conversations



Provider Capacity



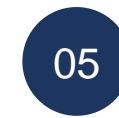
Assessment



Systems Navigation



Case Management



05 Waitlists



# PROVIDER CAPACITY

## KEY ISSUES

- Flagging need to address capacity to achieve HOME goals
- Rural workforce shortages
- Rates
- Training
- Provider administrative burden
- Recruitment & retention strategies

“I’m feeling this energy of “Yeah they’re right, we need to get folks younger”. But I work in HCBS. Have we had an increase, yes, just in the last 2 years. I make \$1.45 more per hour today than I did in 2010. **I know this whole HOME thing isn’t about the money part of it, but that does need to change to get into rural areas. To get more people interested, that would have to go along with it.”**

- Provider

# WAIVER REDESIGN

## Support for need-based waivers

- Age-based waivers input

## Specific service issues

- Autism
- Barriers to accessing SCL, day hab, home mods, NEMT
- CCO
- Habilitation

## Redesign messaging needs

- Fear of losing slots/waitlist spots/services
- Questions about resources, timeline, & evidence

"I have a 15 year old son with autism and ID. I love the idea of streamlining waivers... I love that we're seeing that no one size fits all. Every parent feels this way, kids don't fit into a box. Everything said today speaks to my experience as a caregiver."

- *Family Caregiver*

# WAITLIST

## CHALLENGES

- Widespread dissatisfaction with current waitlist length
- Frustration with high-need individuals not getting services soon enough
- Frustration with lack of eligibility screening prior to being put on a waitlist resulting in wasted time waiting for the wrong waiver

## INPUT/QUESTIONS

- General support for considering need in waitlist prioritization
- Suggestion to balance prioritizing high-need individuals on the waitlist with ensuring those with lower levels of need also have access to services
- Question about how changing need levels while on the waitlist, moving, and waiver redesign will affect individuals' place on the waitlist

# ASSESSMENT

## CHALLENGES

- Inaccuracy and bias in current assessment
- Frustration with assessment frequency
- Request to reduce wait time for assessments
- Limitations of SIS
- Concern with IQ in assessments

## SOLUTIONS

- Interest in how assessment will work for needs-based waivers
- Universal assessment must work for all populations
- Suggestion for improved assessment training

# SYSTEM NAVIGATION

Navigating the system and trying to figure out which MCO is doing what services and how to secure needed services is hard even for providers, and especially challenging for families. It's frustrating for providers not to be able to get people the services they need.

*-Provider*

## Challenges

- Frustration with current communications and systems navigation experience
- Difficulty learning about non-waiver services
- Lack of support from local DHS offices

## Solutions

- Holistic improvements to communications
- Improve communications and referral when diagnoses are made, and during intake process for waiver services
- Local “one stop shop” for systems navigation

# CASE MANAGEMENT

## CHALLENGES

- Case management turnover
- Case management workforce shortages outside Des Moines
- Conflict-free case management
- Consumer frustration with inadequately resolved service issues and limited case manager knowledge of eligibility

“As a caregiver I feel there is a lack of cohesiveness of providers and information sharing with family caretakers. The case managers can be hard to reach and change frequently and the lack of consistency is difficult to navigate and stay informed with current resources and contacts.”

*-Family Caregiver*

## SUPPORT FOR TRAINING & RATIOS

- Concern about MCOs implementing ratios

# OTHER AREAS

- Unclear administrative rules
- Improved collaboration with schools
- Economic difficulties and underemployment for caregivers
- Approach to racial equity
- Concerns around privatization

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