

# Iowa Developmental Disabilities Council Meeting Minutes March 14, 2024

## **Council Member Attendees:**

<u>In Person:</u> Steve Steveson, Kevin Harris, Brady Werger, Kitty Hedderich, Alecia Balduf, George Thompson, Eric Evans, Kristen Aller, Rob Roozeboom, Paula Motsinger, Melissa Lawson, Joshua Lawrence, Emma Bouza, Amber Gale

<u>Virtual Attendance:</u> Matthew Conaway, Diane Brenneman, Caitlin Owens, Mike Vratsinas, Hugh Kelly, Kimberly VanBeek

Council Staff: Brooke Lovelace, Carlyn Crowe, Lindsay Hommer

Council Members Absent: Julie Bergeson, Mike Hoenig, Roxanne Cogil, Jim Kain

**Members of the Public:** Tonya Heiman – Iowa Total Care, Maggie Ferguson – Iowa Health and Human Services (HHS), Megan Marsh – Iowa Finance Authority, Kris Graves, Connie Fanselow, Eugenia Kendall – Aging and Disability Services, Alexandra Bauman - HHS

## **Call to Order:**

Council Chair Werger called the Iowa Developmental Disabilities Council (DD Council) meeting to order on March 14, 2024, at 10:30 AM. A quorum was established.

#### **Welcome and Introductions:**

All meeting attendees introduced themselves.

## Agenda Item/Approval of Minutes and Agenda:

Minutes from January 11<sup>th</sup> meeting were approved, Balduf made a motion, Hedderich seconded. Agenda for the March 14<sup>th</sup> meeting was approved, Hedderich made a motion, Aller seconded.

# **Executive Committee (EC) Report:**

#### **Actions and News since January meeting:**

There are two new DD Council members, Kimberly VanBeek and Jim Kain. In June, Aller and Cogil's terms will end. The council will need a new self-advocate and a family advocate. Steveson, Evans, Gales, Bergeson, and Lawson's first terms are ending in June, but they can reapply. Lovelace asked that members let herself or Werger know if they will be reapplying in the next few weeks. Lovelace stated there are a few people that have applied for the two positions that will be vacant. They are Caleb Primrose, Rachel Bussan, and Dakota who lives in an intermediate care facility. Lovelace stated it looks like the bill is going to pass that states council's no longer need to be gender balanced.

Thompson asked if any of the efforts on cultural diversity had yielded any candidates. Lovelace stated the council would like the members help with this effort. Motsinger stated that she has some tribal contacts



on their policy team so she could do some outreach.

Werger met with Governor Reynolds and discussed the Area Education Agencies (AEA) bill. He believes there was a good turnout for the legislative reception and the Allies in Advocacy reception. Yesterday, Werger was able to meet with Pat Grassley's office, Senator Sandy Salmon, Representative David Seek, Chad Engles, and Representative Bergen. They discussed the Work Without Worry bill and the AEA bill. The three representatives stated they agree with the AEA bill that the House is proposing but do not agree with the bill the Senate is proposing.

Council members are going to be asked to do a survey to self-evaluate the council. The EC will look over the survey and approve it. It will then be shared with council members.

#### **Current Budget Review:**

Werger stated the council is overspending for travel costs. Aller asked why this is. Lovelace stated the council did not budget enough for these categories as people are doing a lot more activities such as the legislative reception and sending council members to the SOAR conference. Next year, more will need to be budgeted for out of state costs and council support costs.

Lovelace stated that historically, the council has received a small appropriation from HHS. This amount is not used when calculating the budget. This year, the amount received was \$36,150. This should help offset some costs. One of Judy Warth's ideas when she was on the council was to reach out to HHS and see if the appropriation could be increased.

The DD Council still does not have an approved federal budget. There is still talk about this year's budget receiving a 1% decrease in funding. It is unknown whether this will happen or not.

Lovelace shared the spending chart. Aller asked if MYM! conference costs come out of administration funds. Lovelace stated they do not. MYM! conference costs come out of contract costs. Motsinger asked if the council has reached out to the three state managed care organizations (MCO) to see if they could help cover the costs of the MYM! conference. Lovelace stated that last year, all three MCOs were sponsors of the conference so that did help with costs. Motsinger proposed asking the MCOs to cover travel costs for people to attend the MYM! conference. Lovelace will reach out to the MCOs.

#### **Election Committee for EC:**

Werger stated they are looking for three volunteers to serve on the election committee. The election committee will come up with a slate of candidates for the EC. Owens, Lawrence, and Aller volunteered. The meetings will be virtual. The election committee will review the slate of candidates for the EC. The election committee will present the candidates to the council at the May council meeting and the candidates will be voted on by the full council. Werger asked if there is a limit of how many people can be on the EC. Lovelace stated the minimum amount of people is five but there can be more. The number of people on the EC just must be an odd number.

### **Workplan Review:**

Lovelace stated that supporting the mentors in the Talent Bank is on hold. There is a bill that eliminates over Creating change with and for persons with developmental disabilities so they can live, work, learn and play in the community of their choosing.



half of the boards and commissions, so the council is waiting to see what happens with that.

The council supports the Allies in Advocacy as a grassroots self-advocacy group. If there are other grass roots initiatives that the council could be supporting, please let the council know.

The council would like to know of rural communities that the council could reach out to do voting and advocacy training for young people. Harris suggested having the council go on podcasts and promote these trainings.

The council is hosting another IAble webinar on April 2<sup>nd</sup>. Aller asked if IAble impacts social security benefits. Lovelace stated that it does not.

#### Make Your Mark Update:

MYM! conference will be September 18-19 at the Gateway Hotel in Ames. Keynote speaker will be Aaron Golub. He is a person that has a vision impairment and played college football. Daniel VanSant with the Harkin Institute is the other keynote speaker. Lovelace stated the call for presenters is out. The sponsorship and exhibitor call will be out soon.

Owens volunteered to be added to the planning committee for the MYM! conference. The next meeting for the MYM! planning committee is March 22<sup>nd</sup> at 1:00PM.

Thompson asked what the theme for MYM! is. Lovelace stated it is "Grow Where You're Planted."

## **Public Policy Update:**

Public Policy Report 3/14/2024

Crowe stated that the council does a lot to inform advocates, the public, and our network about what's going on with bills in the legislature. Crowe would like to share how they are doing policy work and advocacy work through programs such as capitol advocacy days.

Hand in Hand is an advocacy group from the Quad Cities area that did a capitol advocacy day. They talked mostly about the AEA bill and a little bit about the Work Without Worry bill. Their Representative gave them a good amount of time and told them some very specific reasons why he didn't support it. Crowe stated that bringing small groups to the capitol and having them speak with their legislators seems to be impactful.

Crowe stated there are not many good bills this year. There are some bad ones depending on your opinion, there are a lot of confusing ones, and there are some ugly bills. Crowe stated the AEA bills fit into all of these categories. There are good parts of both of these bills. The bad depends on your perspective, the bills are really confusing for a lot of people, and the reason the bills are happening is the ugly part. These proposed bills have brought the AEAs and special education to the forefront and many people now know what AEAs do and new advocates have emerged because of this. As well it has inspired people to run for office such as one of our Council members.



Bouza is heading to the capitol after the meeting to put in her paperwork to run for office.

Crowe shared a list of the groups that are participating in capitol days this year.

Senators Costello and Edler are the two senators that have a lot to do with Health and Human Services and they met with a lot of the groups that did capitol days.

Some notable bills are the AEA bills (HF2612 and SF2386), the Work Without Worry/right to repair bill (HF2589), the comprehensive transition program bill (HF252), the voting and election bill (SF2380/HF2610), the guardianship and conservatorship bill (SF295), accessible prescription label bill (HF2456), service animal and assistance bill (SF2268), and the interpreter/transliterator bill (HF2232).

One of the means of communication this year about what the DD Council is working on, is through a weekly flyer called "Bill of the Week." Crowe stated that the groups that have attended capitol days have been encouraged to prepare a "leave behind" to leave with their legislators to educate them about their group and on issues.

Harris shared that the policy committee has been meeting every other week during session. It's difficult to keep up on bills because things move so fast so it's helpful to meet with Crowe. Harris also shared that the council facilitated the townhall meetings about the AEA bills. Because of these townhalls, the DD Council's network has grown. He stated the Bill of the Week documents are a great tool to communicate the high-level facts about bills.

Harris stated there is information on the DD Council's Facebook page and on the InfoNet Facebook page and this can be confusing. The council may want to look at consolidating or rebranding. One option would be to transition one of the pages to an advocacy group to get more dialogue. Once session is done, the public policy committee would not have to meet so often. They will need to meet in the summer to help with the Public Policy Agenda.

Crowe shared that she and Werger are going to be attending the Disability Policy Seminar on April 8-10 that is hosted by the National Association of Councils with Developmental Disabilities. They will be meeting with members of Congress while in Washington DC at the conference.

#### **Public Comment:**

None

## **Aging and Disability Resource Center Expansion Proposal:**

Alexandra Bauman, Health and Human Services, <u>Alexandra.bauman@iowa.gov</u> – Navigation and Supportive Services Director

**ADRC Presentation** 

Before the merge, Alexandra Bauman worked at the Iowa Department on Aging for the last five years as



the Nutrition Director. Now, her role encompasses the older Americans Act programs and services and aging and disability resource center.

An Aging and Disability Resource Center (ADRC) provides information, advice, counseling, and assistance. They also empower people to make informed decisions about their long-term services and supports and help people access public and private programs. Aller asked what "older" means. Alexandra Bauman stated the Older Americans Act defines older as 60 years and above.

There are six designated areas in Iowa that have ADRC's. The current ADRC's have a focus and expertise on older Americans. There is legislation currently making its way through the legislature that would change the Area Agencies on Aging to Aging and Disability Resource Centers as of July 1, 2024. On July 1, 2025, the disability services that are currently in the Mental Health and Disability Services will go to the Aging and Disability Services department.

The goals of the ADRC expansion are to serve individuals with disabilities, include accessible physical locations, co-locations of key ADRC partners, add additional services, follow the behavioral health service organization model, and build upon the existing infrastructure.

Alexandra Bauman shared the organizational chart for the ADRC system.

An Administrative Service Organization's (ASO) role would be to administer the funding, develop service definitions and reporting standards, provide training curriculum, define performance outcomes, and approve district plans. ASO's ensure adequate service provision in every county within their district, develop comprehensive ADRC networks of member organizations within districts, they are responsible for training and technical assistance of ADRC partners in the regions, ensure service quality and performance outcomes, develop and maintain data systems for tracking, act as intermediaries for funding, and ensure that locations clearly identify as an ADRC.

ADRC member organizations provide minimum services, identify as ADRC member, provide navigation and person-centered planning, coordinate among ADRC organizations, maintain knowledge of local resources, receive pass through funding from the ASO, and participate in Medicaid administrative claiming. The people that would be served by ADRC's are older lowans, lowans with disabilities, caregivers, and anyone who calls for information. Services that must be provided by an ADRC are information and referral services, options counseling, application assistance to all HHS programs and services, waitlist prioritization screening, and connect people to concrete services and supports. Lawrence asked if the jobs created will be public or private. Alexandra Bauman stated that they will be doing a competitive bidding process, and the applications must provide letters of support stating who the local ADRC members would be. Alexandra Bauman stated this presentation has only been given a couple of time but will be given more throughout the summer which will give them ideas on who the local organizations could be. Lawrence asked who is providing assistance currently to people with disabilities. Alexandra Bauman stated that currently, the funding is with the Mental Health and Disability Services (MHDS) regions. Motsinger stated that disability services is being moved to Aging so there can be more focus on getting people with disabilities assistance.



ADRC services will be able to be accessed in-person, by phone, or via email.

Alexandra Bauman shared the proposed behavioral health districts map. ASO's would need to apply for a minimum of one of the districts but can apply for multiple districts. Lawrence asked if people receiving these services are on Medicaid. Alexandra Bauman stated these services are not through Medicaid.

Options counseling is a service of providing an interactive process where individuals receive guidance in their deliberations to make informed choices about long-term supports.

Crowe asked how case managers will know what's available since this will be managed so locally. Alexandra Bauman stated there will be some standard trainings and it will be up to local ADRC's to know what is available.

Lovelace asked when an RFP will be going out. Alexandra Bauman stated that tentatively, an RFP will be going out this summer. Thompson asked if there are going to be new core services offered. Alexandra Bauman stated they are working right now with the MHDS to see what services are currently being offered because they don't want to lose any of those services. Bouza asked how this is going to work in rural areas since there are not very many providers. Alexandra Bauman stated the ADRC's will try to give information and referrals for what is available.

# **Multi-Sector Plan for Aging:**

Eugenia Kendall, <u>eugenia.kendall@iowa.gov</u> Health and Human Services, Aging and Disability Services – Strategic Planning and Assessment Coordinator

PowerPoint presentation MPA

This presentation will introduce everyone to what the multi sector plan on aging (MPA) is and what the overall approach will be in Iowa as they begin to develop it. MPA's are designed to create a coordinated system of high-quality care supports and services that promote healthy aging, independent living, and social engagement and also address issues related to health care, housing, transportation, and other social determinants of health. The MPA is a cross-sector, state-led strategic planning resource, provides a clear framework to plan for ten years, provides a common vision and clear priorities, coordinates resources and services, and reflects input from a variety of voices. There are other states that have developed or are fostering development of a multi sector plan for aging. Iowa HHS division of Aging and Disability services was invited to participate in an MPA learning collaborative with nine other states. Members of the Iowa team include Easterseals, AARP, Iowa Finance Authority, Iowa DD Council, Iowa Medicaid, and Iowa HHS Aging and Disability Services. Iowa looked at how other states are doing this, and lowa wants to highlight how they can leverage existing programs and initiatives. Eugenia Kendall stated that a draft of the MPA will be posted in fall/winter. Then they'll adopt the final plan and there will be a lot of ongoing oversight and making sure that goals are being met. The mission statement and purpose statement are under development at this time. The team wants to build upon lowa's strengths such as the comprehensive Medicaid program and current HHS initiatives. There will be multisector collaboration with the community, non-profits, private sector, tribal governments and organizations, and state agencies.



The MPA website will hopefully be up and running by the end of this month. The engagement strategy will be focused on the MPA webpage, the steering committee, the community survey, focus groups, agency and partner interviews, and townhall sessions.

Eugenia Kendall shared the overall MPA timeline. Efforts started in February and will end in January 2025.

Steering committee members include several state departments and divisions and several community partners. The steering committee chose several topics of discussion. They are aging in place, aging with economic security, living better longer, supporting caregivers, and social engagement.

## **Medicaid Update:**

**Paula Motsinger** 

Medicaid update PowerPoint

Motsinger stated she will provide updates about Hope and Opportunity in Many Environments (HOME), the governor's budget recommendations, federal updates, and other state initiatives.

Related the HOME initiative, one of the things they are working on is the Needs on Waitlist (NOW) survey. This survey looks at system navigation issues, provider network adequacy, and In Lieu of Services (ILOS). Another thing they are looking at is case management. Case managers with the managed care organizations are really struggling to understand services that are outside of waiver services. They are going to be working on that. Some case managers currently can have a 70+ caseload. In the future they would like case managers to have no more than a caseload of 46. They are also going to work on getting people competency-based training. They will also be streamlining their waivers and going from seven waivers down to two. They are also working on a uniformed assessment for all waivers. Roozeboom asked if 46 cases is a manageable caseload and if the MCO's are going to hire more people. Motsinger stated that they will need to hire more people. Thompson asked how soon the uniformed assessment will be implemented. Motsinger stated it will be implemented by January 2025. Motsinger stated that they are hoping that the legislature funds the waiver redesign this session. The center for Medicare and Medicaid Services (CMS) has to approve the waiver redesign also and Motsinger stated that her department is working with them now.

There is a link in the PowerPoint that is 191 pages long, and it is the governor's budget report. Page 160 shares what the governor's budget recommendation is for Medicaid. She is recommending \$16.5 million to be appropriated as American Rescue Plan Act (ARPA) rate backfill. There is also \$5 million recommended to go towards enhanced case management. Lastly, there is a \$14.6 million recommended for increased access to Home and Community based Services (HCBS). Motsinger stated that under case management, there is a focus on case management ratios and competency-based training. The targeted investment for \$14.6 million, they are expanding access to intermittent supported community living and residential supported community living. Right now, children are being sent out of state to receive care, so investments were needed to be able to expand services. Also, they are looking at doing an across-the-



board rate increase for HCBS providers. They did a lot of research on the rates and a majority of providers were being paid significantly under cost. Roozeboom asked why the children were being sent out of state. Motsinger responded that lowa does not have enough providers in state for these children that need to be in institutions, so they are sent all over the country using Money Follow the Person (MFP) funds.

Motsinger stated that for those individuals that need remote monitoring, there is great technology now available. Touchscreen monitors are in place throughout the home, and users can just touch the screen and be connected to someone to answer their questions and assist them. There are also monitors on the doors so someone would be alerted if there is activity throughout the night and could go check to see what is happening. Users of this technology can use the monitors for all questions or if they need assistance 24/7. Werger asked how this technology is being funded. Motsinger stated that this technology is being funded through the waivers. Motsinger stated that one individual had a five-year plan to move out of a group home. Using this technology, he was able to move into his own apartment and gets services two hours a day. He is incredibly happy, and his family can come and visit all the time. The agency that is using this technology has been able to decrease their time in waiver homes by 700 hours per month. This means that more people can be served like the ones that only need fifteen minutes of care that weren't receiving care before.

From a federal perspective, there are several new rules. One of them is called the Notice of Proposed Rule Making (NRPM). Under the NRPM, there is a Medicaid access rule that they are anticipating will be finalized in April. This rule is to improve access, quality, outcomes, and transparency across fee for service and managed care delivery systems. There's a strong focus on person centered planning, HCBS grievance system, payment adequacy and rate transparency, critical incident management and reporting system, HCBS quality measure set, and timeliness of access reporting. For the HCBS quality measure set, only four tools will be approved to use. Currently lowa uses a survey that is homegrown, and this will not be allowed to be used in the future.

Other state initiatives that are being worked on right now are the learning management system (LMS), HCBS settings, steering committee work, and Glenwood Resource Center (GRC) update. The LMS is going to house a bunch of competency-based training materials for providers and others to be able to access. This will help when people change jobs to see what trainings they have taken already. Staff will be able to get certifications in some areas also which will help with career advancement. Trualta was awarded the contract for this training and should be live on the platform on April 8. CMS is coming to audit lowa in August for the settings rule. The steering committee will make recommendations on what the future state of services needs is to look like and it will be proposed to Director Liz Matney. As of March 7, there are only 53 people in GRC. They will all be transitioned out by June 14. The Department of Justice is coming to do a visit next week. Lawrence asked if they are planning on closing Woodward. Motsinger stated there is no plan for closure right now but there could be a plan in the future to make Woodward a Center for Excellence.

## **Council Members and State Partner Updates:**

Evans stated that Vocational rehabilitation has a waiting list right now. The reason for this is because they are serving approximately 5,000 more people than they were five years ago but, their staff has not



increased. They hope to start serving some of the people on the waiting list in June. Evans is going to be supervising two people that are going to make up a mobile team and they can be sent anywhere in the state where they are needed. Aller asked if more positions will be opened to hire more staff. Evans stated they aren't right now but that is his hope.

Lawson stated the Department of Education is awaiting the legislative session to be done, decisions to be made at that level, and let them know whether there will be a restructure or not. The Department of Education will be having a federal visit in September, so they have been preparing for this.

Owens stated that Wellpoint, formerly Amerigroup, gave the Center for Disabilities and Development some funding at the end of last year to focus on four projects. The big project they've been working on is a health equity training series that they are partnering with the College of Public Health on. It will have online self-paced modules. This should be rolled out in the fall. The first module is an introduction, the second is demographic changes and emerging trends, the third is on historical context of isms such as ablism and unpacking health inequities, the fourth is on perspectives from individuals with disabilities and family members, the fifth is on creating an equitable service system, and the sixth one is about implementing strategies to address health inequities into strategic plans. Another project is to offer trainings in the spring and summer about autism diagnostic observation schedule training and training peers for adolescence. They are also going to do a little more work with the community living ambassadors. They are looking to develop some additional marketing and promotional materials. Lastly, they will be partnering with the DD Council to support the Youth Leadership Academy. They will use funding to develop materials, provide technology if needed, and provide interpreting services if needed.

Brenneman stated that tomorrow the Child Health Specialty Clinics kick off their 2024 Iowa Family Leadership Training Institute in Cedar Falls. Brenneman will highlight at the training that the DD Council has openings for family advocates.

Werger shared that he has been doing advocacy for his sister to get her moved back to lowa. With Motsinger's assistance, Werger's sister was able to get approved for the brain injury waiver and will be moving back to lowa next week.

Bouza stated that sometime in the last month, Medicaid opened up the billing code for Sire which is a sleep apnea device. It was recently approved for children with Down's Syndrome aged 13 and up. This is a big step but many providers don't cover it.

Harris shared that his son in Boy Scouts and they will be starting a committee to support volunteers. They are hoping to make things more accessible. In the coming year they will be having a safety summit to do training for general safety and a focus on disabilities.

## **Public Comment:**

None



# **Adjourn:**

Gale made a motion to adjourn, and Aller seconded the motion. The meeting adjourned at 2:51PM.

## **Action Items:**

Council members whose first terms are ending need to let Lovelace and/or Brady know if they are reapplying for their second term.