

OLMSTEAD CONSUMER TASKFORCE MEETING

March 10, 2017 10am-3pm

Pleasant Hill Public Library

5151 Maple Drive

Pleasant Hill, IA 50327

Meeting Minutes

Taskforce Members Present:

Roxanne Cogil

Kevin Dalin

Randy Davis

Dawn Francis

Annie Gallagher

Kris Graves

Tracy Keninger

Ashlea Lantz

June Klein-Bacon

Kay Marcel

Gary McDermott (phone)

Kathleen O'Leary

Harry Olmstead

Mary Roberts

Len Sandler

Bruce Teague (phone)

Ingrid Wensel (phone)

Taskforce Members Absent: Paul Kiburz; Michele Meadors; Reyma McCoy McDeid

State Agency Representatives Present:

Theresa Armstrong *Department of Human Services*

Kim Barber *Department for the Blind*

Brian Dennis *Iowa Workforce Development* (phone)

Page Eastin *Department of Human Rights*

Connie Fanselow *Department of Human Services*

Kristin Haar *Department of Transportation* (phone)

Terri Rosonke *Iowa Finance Authority*

Guests:

Jim Aberg, *County Social Services MHDS Region*

Alex Bomboff, *Advocate*

Teresa Bomhoff, *NAMI Iowa*

Julie Christensen *Center for Dis. and Development*

Mark Dearden *UnitedHealthcare*

Marissa Eyanson *AmeriHealth Caritas*

Di Findley *Iowa Caregivers Association*

Frank Greise *League of Human Dignity*

Pam Heagle, *Managed Care Ombudsman Program*

John McCalley, *AmeriGroup*

Amy Muller, *Families First*

Staff: Bob Bacon, Caitlin Owens

Welcome and Introductions

June Klein-Bacon called the meeting to order at 10:05am. A quorum was established.

Approval of Agenda & January Minutes

Harry Olmstead motioned to approve the agenda, Dawn Francis seconded the motion. Motion passed.

Dawn noted an error in the January minutes reflecting she was in attendance when she was not. Caitlin Owens will correct. Dawn motioned to approve the minutes, Kathleen O'Leary seconded. Motion passed.

Ray Gerke and Terry Cunningham Systems Advocacy Awards – June Klein-Bacon

Terry Cunningham Systems Advocacy Award: The Olmstead Consumer Taskforce presents the Iowa Finance Authority with the first annual Terry Cunningham Systems Advocacy Award. This award was created in honor of former Olmstead Consumer Taskforce Chair and champion of Olmstead principles and the ADA, Terry Cunningham, who passed away in

2015. The award was established to honor an agency, organization, or group that demonstrates outstanding system-level work and advocacy that makes life in the community more possible for lowans with disabilities.

In particular, the Taskforce would like to recognize the long standing partnership of IFA, and liaison Terri Rosonke, to the Taskforce. IFA has long demonstrated support of Olmstead principles through programs and policies, and of note this past year by including a session at the HousingIowa conference that featured civil rights leader and litigator on the Olmstead court case, Sue Jamieson. In addition, offering scholarships to disability advocates so they could attend the session was above and beyond and meant a great deal to those who were able to attend. This is certainly not the only example of IFA going above and beyond, and we truly appreciate the work they do on behalf of lowans with disabilities and low-income lowans; their work enhances lives and communities.

Terri Rosonke accepted the award on behalf of IFA and thanked the Taskforce for the honor, noting it holds special meaning because Terry Cunningham was one of the first people she met and worked with on the Taskforce and she learned a lot from him.

Ray Gerke Systems Advocacy Award: The Olmstead Consumer Taskforce has chosen to honor Jackie Dieckmann's legacy of advocacy by awarding the 2017 Ray Gerke Systems Advocacy Award in her memory. Jackie served for several years on the Olmstead Consumer Taskforce, and was an active in many other advocacy efforts across the state before her tragic and untimely passing last March. Her tireless advocacy left a lasting impression on us all, and she is deeply missed.

This award was created in honor of Ray Gerke, a longtime advocate for individuals with disabilities and former member of the Taskforce. The award is meant to honor an individual who demonstrates outstanding system-level work and advocacy that makes a difference the lives of individuals with mental illness and/or disabilities, our communities, and our service systems.

Appreciation of Service – June Klein-Bacon

June shared that while Michele Meadors was unable to attend the meeting, she wanted to acknowledge her service to the Taskforce and thank her for her strong advocacy, both on the Taskforce, and in her work with other groups. She shared that Michele is a strong advocate who has used her personal and professional experience to push for making programs, policies, and communities more accessible and open to people with disabilities.

Taskforce Nominations and Officer Election – June Klein-Bacon

Nominations: There were seven seats that needed to be filled, six for three year terms, one for a one year term due to a resignation last fall. All terms begin in May. Five of the six current members whose terms were ending were eligible to serve another term. Five current members submitted applications to serve another term, and 12 applications were submitted by individuals who don't currently serve on the Taskforce. The committee reviewed and discussed the nominations. The committee consisted of Mary Roberts (chair), Dawn Francis, Harry Olmstead, and Paul Kiburz. The committee recommends reappointments for the five reapplying Taskforce members (Annie Gallagher, June Klein-Bacon, Kay Marcel, Gary McDermott, and Tracy Keninger). The committee recommends appointing Frank Greise and Jenna Batten for the remaining two seats. June read short bios of Jenna and Frank. Kevin Dalin moved to approve the slate of nominations, Harry seconded. Gary McDermott, June Klein-Bacon, Kay Marcel, and Annie Gallagher abstained because all were included in the slate of nominees. Motion passed.

Officer Election Discussion: June shared that there are three seats open: Chair, Vice Chair, and Secretary. The slate of officers for consideration were Dawn Francis (chair), Kevin Dalin and Harry Olmstead (vice-chair), and Kris Graves (secretary). She shared brief bios of those interested in one of the positions with everyone, including why they were interested in the roles they sought.

Questions and Comments: Mary Roberts asked if both Harry and Kevin would be comfortable running the meeting if Dawn is absent. Both affirmed they would feel comfortable.

Officer Election Voting Results: Voting members of the Taskforce cast ballots either electronically or by paper ballot and the results were tabulated by Caitlin Owens. Dawn Francis was elected chair, Kevin Dalin vice-chair, and Kris Graves secretary.

Roxanne suggested Harry act as Medicaid Committee co-chair if he is interested in a leadership position, which he accepted. Harry suggested an amendment to the bylaws to ensure there is always a person on the executive committee who is a consumer. He made it clear that it was not because it was of the outcome of the election. Dawn agreed and added that the Taskforce should also ensure that at least half the members are actual consumers of services, not including people with disabilities who are also disability professionals. She said there is a difference between someone who has a disability and is working full time in a disability organization, and people who have disabilities and have to actually receive services. Kris agreed and noted she is one of those people who lives with a disability and is supported by the disability safety net, and agrees that there is a difference, and she also has experience living in an institution.

Department of Human Services Update – Theresa Armstrong & Deb Johnson

Updated Administrative Rules (Theresa Armstrong): Theresa shared that the MHDS Commission recently approved changes to crisis services, which will be published in the March 15th bulletin. She said the changes were mainly to address the staffing levels and a technical fix. She said the staffing issue was that there wasn't a staffing level for individuals with good behavioral health experience who didn't have a related human services degree, and the amendment allows such individuals to fill those roles. She said they had done a number of exceptions to that policy through waivers requested by agencies, and it was especially an issue in crisis residential services. The technical fix was related to the autism support program, she reported that through all of the reviews last year the definition of the eligible age was mistakenly not changed, even though it was discussed elsewhere in the rules package.

Legislation Update (Theresa Armstrong): Theresa shared information about several bills that might be of interest to the Taskforce.

- **HF 546** is a bill that would direct regions to develop plans to address the needs of individuals with complex mental health, disability, and substance use disorder needs, and directs a statewide stakeholder group to make recommendations based on these plans. It would also mandate mental health institutions and hospitals to participate in the psychiatric bed tracking system. Regarding the bed tracking system, she said over the past few months Director Palmer has been pulling stakeholders together and has been hearing that the bed tracking system is not working the way it was intended to. She said the main issue seems to be people are still having a hard time finding the right service at the right time. They pulled together some recommendations for services that might be needed, including mandating that hospitals participate as currently they are not required to, as well as requiring them to report more specifics on the types of beds that are open.
- **HF 343 and SF 365** are two property tax bills that made it through the funnel. Theresa reported for the past several years regions have talked about the need for sustainable funding. She said regions, ISAC, and other groups have been advocating for regions currently under the \$47.28 levy cap to be allowed to raise their levies. Both bills would allow county boards of supervisors to set the levy up to \$47.28 per capita.
- **SF 302** is related to transporting individuals with mental health and/or substance use disorders who have been either voluntarily or involuntarily admitted for treatment. Several regions currently provide this service, but there is some confusion about what the code actually allows, and this legislation would make it clear that regions, hospitals, and others could transport or contract with an entity to transport individuals rather than relying on law enforcement to do so. This is another issue that has been brought up in the stakeholder meetings convened by Director Palmer.
- **SF 464/HF 319** would change code for substance use disorder and mental health commitments so that mental health professionals who meet the Iowa definition of mental health provider can perform exams for commitments, sign off on exams, provide treatment, and provide information to the courts. This is already within their scope of practice, but not in code.
- **SF 400/HF 215** pertains to applied behavior analysis for individuals with autism, and would mandate insurance providers in Iowa to pay for the service for individuals up to the age of 19. Theresa said several of the larger employers in Iowa fall under federal requirements and wouldn't be impacted by this bill, but it is a good place to start. State insurance plans and Medicaid are already required to fund this service for qualifying individuals.

Questions and Comments: Dawn asked if there is a bill to eliminate the levy cap? Theresa said she did not think so, there could have been one drafted but no such bill has been reviewed by MHDS. She said in her conversations with the regions the two bills to allow counties below the current cap to raise their levies are the ones the regions are advocating for.

Iowa Medicaid Update (Deb Johnson): Deb Johnson shared that the managed care second quarterly report for state fiscal year 2017 was published on March 10th. She said they are continuing to refine those reports to make sure the data they are collecting and reporting is meaningful. She addressed several issues shared with her from the Taskforce ahead of the meeting:

- AmeriHealth Contracting Issue: She addressed the news reports that Mercy Health Network may not contract with AmeriHealth. She said typically in insurance contracts there are times when the insurance company and provider work out agreements to keep that provider in their network, and typically they negotiate a deal. The insurer may send a letter to the provider letting them know they are terminating the contract, but this typically means negotiations are ongoing. Per the contract with Iowa Medicaid, if a letter is sent to a provider they must notify members as well, which is why the news has been reporting on this issue. She said the intent is for AmeriHealth to continue their contract with Mercy.
- AmeriHealth Transitioning to In-House Case Management: Regarding AmeriHealth's transition of case management from a primarily community-based to an in-house model, Deb suggested the best source of additional information on that would be AmeriHealth. She said it is her understanding that they are going to have a hybrid model but will be doing most of it in-house. She said they will still be contracting with a handful of providers, but are moving members to in-house case managers.
- Provider Reimbursement: Deb shared that she has heard there have been some improvements, but some issues remain. She said there are problems on both sides, and many of the issues were present with fee-for-service Medicaid as well, though the issue is a little bit bigger now. She said the MCOs have been working with provider associations on how to resolve the issues systematically and by individual providers, and while there have been some improvements there is still more work to be done.
- Waiver Waitlist Update: The Taskforce asked if Deb could share any information on the wait time people are experiencing after being approved for the waiver and when they actually start receiving services. She said she does not have specific information on that, but IME is continuing to give out slots and providers continue to have serious issues finding direct care providers. She said she hasn't heard people aren't able to find a provider, but perhaps Taskforce members have. She said they could look at when a person enrolls and when they first bill for services but would not be able to prove that it is a provider capacity issue.

Questions and Comments: Kay Marcel said she can only speak from her own experience, but that she has experienced significant wait times with her son's provider. She said her son is not difficult to serve and doesn't have a lot of services, and between when they were notified of a waiver slot in November things moved relatively quickly, but their provider is still waiting on direct support staff and she has been told it will likely be June when they have the capacity to provide the services. She said when they moved to Iowa three years ago they applied multiple times for county funds and couldn't get direct support back then either, so it was definitely an issue before managed care. She said she does believe one of the main issues is the wage paid to most direct care staff, and if they are going to be asked to increase their abilities and professionalism it is not sufficient to pay them minimum wage or barely above. She said the wage needs to demonstrate the respect we have for the position and what we they are charged to do so people can make it a career. She said she thought the MCOs were expected to improve provider capacity. Dawn said it wasn't explicitly required in their contracts. Kay said regardless it is required under federal law that they have adequate capacity, and it was her expectation they would address this whether it was in the contracts or not. Deb said Kay makes good points and it is IME's expectation that they address the issue. She said direct care workers do have a tremendously important job, and the issue of higher compensation has been discussed at the state and national level for years, including by the Iowa Caregivers Association.

June said she is seeing the numbers of people on waitlists go down but is curious about the in-process numbers. She said she has several clients who have been in-process for a long time and has been trying to work with IME and the MCOs to see why that is happening. She asked if IME collects data on the in-process individuals. Deb said they are tracking that for every member, and they have given out a lot of slots on the past year. She said they provide the MCOs the number of slots they have given out on a weekly basis and want to know where they are with their level of care assessments. She

said the information they have is in large categories, like MCOs reporting they are unable to find people. She said if June can provide them with names they can follow up on the individuals cases.

Executive Committee Report – June Klein-Bacon

Letter to congressional leaders regarding ACA repeal and replace: The letter was sent in mid-January to Grassley, Ernst, Young, Blum, Loebbeck, and King. June shared that most legislators responded with a form letter and she can share the responses if individuals are interested.

Questions and Comments: Dawn suggested responding specifically to the letters to address the fact that most did not actually speak to the issues that are of concern to people with disabilities. June agreed and said when the letters were first sent it was before specific legislation had been proposed, but now that there is legislation there are tangible things that are concerning. Randy Davis said the Iowa Legislature has been very thoughtful in the way that they have utilized Obamacare, and every state is different. He said Iowa decided to expand Medicaid and he knows a lot of people who have been really helped by it, like people who just missed the income limits for Medicaid.

Teresa Bomhoff added that the current legislation will be catastrophic for people with disabilities. She said the proposal uses 2016 funding levels when this goes into effect in 2020, and states will receive a certain amount of money and have to figure out how to spend it. She said she sent out an email outlining additional concerns and hopes people will speak out.

Kay said one of the talking points she continues to hear is that the new legislation will give states more flexibility, but it is worth pointing out that states already have flexibility and that will be jeopardized by limiting funding. She said solutions need to be proposed as well.

Randy suggested it is important to align the Taskforce's message and language with other groups, specifically pointing out that AARP has been publicly critical of the ACHA.

Harry Olmstead motioned for the executive committee to write a follow-up letter to legislators and arrange for meetings with legislators and/or staff if possible. Kathleen O'Leary seconded. Motion passed. Randy urged the Taskforce to reach out to AARP to see if they would sign-on. Kevin Dalin suggested that because time is of the essence that it may not be feasible for the Taskforce to wait for an organization as large as the AARP to sign-on. Randy said it would be worth trying, and at the very least the letter should contain shared language.

Medicaid Committee Report – Roxanne Cogil

Medicaid Committee: Roxanne Cogil shared that the Medicaid Committee met and talked about action items and areas to monitor, and are currently trying to develop talking points for several of the areas to monitor to make sure people have an easily referenced overview of Olmstead talking points to take to meetings around the state.

Roxanne shared that the committee has been meeting through Go-To-Meeting which has been great for accessibility and ease of sharing documents. She said she is also trying to confirm who is on the committee, and if there is anyone interested in being involved who is not already to let her or Caitlin know.

Questions and Comments: Kevin Dalin shared that while he realizes managed care has demanded the majority of the focus of the Medicaid Committee, he wanted to mention another issue the committee may be interested in addressing. He shared that he recently hit his first financial cliff as a person with a disability who receives Medicaid through Medicaid for Employed Persons with Disabilities (MEPD). He said he will soon have double premiums and no dental care. He said financial cliff's are a real thing for people who are moving off disability insurance and though he knew about it he wasn't prepared for it to hit as soon as it did. He said he is thankful for MEPD and he isn't a heavy Medicaid user, but it is a roadblock people hit on their way to self-sufficiency.

Ombudsman Report: June Klein-Bacon shared that the February Ombudsman's report was recently released, and it shows that their calls increased quite a bit from previous months. She noted that in January a staff member from the Ombudsman Office had noted that their calls were up in January, so it seems significant that they continue to increase.

She shared several issues called out in the report's cover letter as the top concerns for the month. Those issues included: reductions, denials, and termination of CDAC services and CCO budgets; concerns about AmeriHealth moving case management services in-house; and individuals experiencing issues maintaining their current residence or securing new placement due to providers not accepting reduced reimbursement rates for members that require higher levels of care.

Questions and Comments: Kay Marcel said it is encouraging that issues are getting resolved, but concerning that the same issues are continuing to come up. She said it's important that these issues are being resolved, but many of them should not be occurring in the first place and it's important for legislators and the state to know these issues and for there to be a systemic approach to resolving them. Harry suggested people from the Managed Care Ombudsman's Office and/or Disability Rights Iowa may be useful to have participate in Medicaid Committee calls.

Dawn Francis said step therapy was discussed on the IDAAN call and a decision was made to send a letter to legislators to encourage them to pass the step therapy bill. Roxanne gave an overview of the issue sharing that sometimes patients are required to take potentially ineffective medications and "fail first" on those before their insurance company will approve and pay for another form of medication, even if their medical provider(s) initially recommended a different drug. Dawn made a motion for the Taskforce sign on to the IDAAN letter, Harry seconded. Motion passed.

County Social Services' I-START Program Overview – Jim Aberg

Jim Aberg is the program director of I-START, which is a program offered by the County Social Services MHDS region. I-START is a program and system to support individuals and teams who work with individuals with intellectual/developmental disabilities who have challenging behaviors often due to co-occurring mental health challenges. The program receives referrals and Jim determines eligibility, and then a coordinator is assigned who arranges the initial consultation, convenes a team, and helps determine an action plan. The coordinator doesn't act as a case manager or care coordinator, but rather a facilitator to ensure the whole process is very team based. He shared that the I-START program has four coordinators located in Cresco, Fort Dodge, Waterloo, and Mason City; a clinical director also located in Waterloo; a medical director available for consultation; and a behavioral psychologist available for consultation based in Clear Lake. Both the medical director and the behavioral psychologist provide consultation to both I-START staff and providers. The program currently has 49 active cases, and they also do consulting outside of their region. Starting in April staff will be on-call 24/7.

Jim shared that currently County Social Services is the only MHDS region in Iowa implementing a program like this, though he has been working with Crossroads and others who are exploring the possibility of starting their own programs. He said CSS started this program because one of their charges as an MHDS region is to support people in crisis, and they believed it was important to have a system in place to support providers so crisis situations can be prevented in the first place. The goal of the program is to support, not blame, providers so together they can break the cycle of individuals moving between hospitals, crisis centers, jail, etc. Currently the model is evidence informed, but they are working with the program administrators in New Hampshire and SAMHSA to make it an evidence based program.

Jim shared that they have been meeting with providers in the CSS region and are looking to create a consortium of providers who are willing to support the most difficult individuals, and looking into the possibility of opening a START resource center. He said when he speaks with people on behavioral health units they often report being unequipped to deal with individuals with IDD.

More information can be found in the handout links below.

Handouts:

- CSS I-START Brochure ([link](#))
- National START Brochure ([link](#))
- PowerPoint Overview of START Model and Outcomes ([link](#))
- START Coverage Map ([link](#))

Questions and Comments: Mary Roberts asked if there is a plan in place for the potential resource center to avoid individuals being "dumped" in the facility. Jim said they are going to ask providers to agree to take individuals back once

they have stabilized, and that the consortium they want to develop could play a key role as well. Harry Olmstead asked what the funding source is and whether they are able to serve individuals without a permanent residence who may move to another county outside the CSS region. Jim said the program is funded by CSS and the board is very supportive of the initiative. He said the funding for the resource center will initially be CSS but they are hoping the MCOs will see its value as well. Regarding the second question Jim said this particular program has not worked with any individuals experiencing homelessness, but it is an issue that is being addressed through other programs and supports within the region.

Olmstead Plan Committee Report – Dawn Francis

Dawn shared that the Taskforce has expressed frustration at the last several meetings with the progress of the Olmstead Plan, and the fact that there is not yet a final version. In addition to the discussion at the meetings, she said several people have contacted her directly to express frustration. She said it is important to acknowledge that a lot has happened since the Taskforce first approached DHS about the plan in mid-2015, and they have incredibly full workloads with managed care and other duties. She said she's explained before that there is no mandate that says DHS has to do an Olmstead Plan, though it is in their best interest to be working towards more individuals with disabilities being supported in the community. She said it has been an ongoing struggle to figure out how to make the plan workable, especially since the last plan didn't have measurable outcomes.

Dawn shared the Executive Committee sent a letter on February 20th to Director Palmer expressing concerns with the progress of the plan, and have not yet received a response from him, though Connie Fanelow reached out to schedule a Olmstead Plan Committee meeting. She said at the request of her and June, Caitlin sent out an email asking if any members of the Taskforce would be interested in joining the committee as it is just down to two people. Annie Gallagher expressed interest. Dawn said she invited Geoff Lauer and Paula Connolly to join the committee because they were involved in the past and they have both agreed to participate. Dawn said anyone else interested in participating should get in touch with her, and the next meeting is scheduled for April 11th.

Questions and Comments: Connie Fanelow shared that a response from Director Palmer should be coming soon. She said there are a lot of reasons this hasn't gone faster, and a big component is the data collection is much more complicated than anticipated. She said it is her hope that they will have something to share after the committee meets in April.

Di Findley asked how the goals in the plan were established. Connie said they were established years ago through workgroups and then written into code through mental health redesign legislation. Connie said the activities are based on asking what we want to do and what will get us there, but it's complicated because so much depends on funding from the legislature and other resources, and the plan itself does not determine those things.

June added that the challenge of developing a plan when there is no money tied to it has been a sticking point for her throughout this whole process. She said another important point is that the Olmstead Plan is not necessarily tied to the function of the Taskforce, rather it is the responsibility of DHS and the Taskforce is consulting on the process. She agreed with Connie on the difficulty of the data collection, and noted it is very important for seeing where the system is currently, where it needs to go, and whether progress is being made.

State Agency Reports

Iowa Finance Authority (Terri Rosonke): Terri shared that IFA currently has 82 applicants on the HCBS Rent Subsidy waiting list, which is about what it has been at for some time now. She said the proposed HCBS Rent Subsidy Program budget for FY 2018 maintains the FY 2017 funding level of \$658,000.

Regarding Walden Pointe, she said IFA has been hearing that an alternative service provider interested in providing assisted living services has been identified but there might be some barriers to them being allowed to expand their services to Des Moines because they are a relatively new provider. She said she is trying to learn more about why that would be the case, and in the meantime IFA's general counsel sent a letter to the owner requiring a formal status update to be submitted in writing.

IFA is monitoring several bills that may be of interest to the Taskforce, including:

- HF 586: a larger IFA bill that would in part codify the HCBS Rent Subsidy Program, which currently exists only through annual appropriation language.
- SF 383: would establish a task force within IFA to examine issues relating to the provision of supportive housing to homeless persons and provide recommendations.
- SF 223: would create a new Home Modifications Grant Program to be administered by IFA and seeking appropriations. The bill as currently drafted seeks \$6 million, but that is apparently a misprint and the actual amount should be \$600,000.

Department of Transportation (Roxanne Cogil on behalf of Kristin Haar): Roxanne shared that Kristin Haar was unable to attend but she wanted to share information about the 2017 Passenger Transportation Summit will be held on May 18th. Becky Harker of the DD Council will deliver the keynote presentation. She said it is funded with rural dollars so they have to have it in a rural area, but hopefully having it in Ankeny will allow those who wish to attend to do so.

Taskforce Member Comment

Randy Davis said he would like to work on an update to the CCO manual to make sure that it functions as a guide that shows individuals with disabilities that there are many paths to living in the community and maximizing their independence. He said he has made the program work for him and now he wants to make sure it works for others, and a key to that is making sure people understand its many benefits. He said he would like the Taskforce to find the money to pay his expenses to have a meeting with Director Palmer. June asked Randy if he could put together an outline for the Taskforce to better convey what it is he is trying to do so others can give input and help move this forward. She said Caitlin Owens and Bob Bacon would be the ones to contact to discuss travel.

Public Comment

None

Adjourn

The meeting adjourned at 3pm.