

Children's Behavioral Health System

Meeting Minutes

August 27, 2019

10:00 am

Boulders Inn and Conference Center, Holstein

1. Welcome and Introductions – Dawn Mentzer, Rolling Hills Regional CEO

Attendees: Cindy Duhrkopf, Partnerships for Families; Kelli Wood, Mid-Sioux; Annette Koster, BVCS Early Childhood Iowa; Krista Bakke, Rae Miller, Child Health Specialty Clinics; Lori Bush, Melissa Drey, Kim Keleher, Plains Area Mental Health Center; Heidi Hansen, Deidre Brown, Wesco; Leisa Mayer, Lisa Bringle, Louise Galbraith, Theresa Jochum, Julie Albright, Rolling Hills; Annie Fridh, Jackson Recovery; Elizabeth Stanek, Linking Families and Communities; Sharon Nieman, Sioux Rivers; Sandra Pingel, Genesis Development; Kerri Hall, Siouland Human Investment Partnership; Bailey Hill, Child Care Resource and Referral; Patti Andrews, Horn Memorial Public Health; Matt Ohman, SHIP; Karla Manternach, Counseling Services, LLC; Rebecca McCrackin, Seasons Center; Steve Kremer, Juvenile Court Services; Dennis Bush, Cherokee County Supervisor/Rolling Hills Governance Board member; Deb Bush, Interested public representative; Sheila Martin, Siouland Mental Health; Kristal Phillips, Assistant County Attorney; Brenna Franken, Northwest AEA; Teresa Magnussen, Crossroads, Jan Heikes, DHS

2. Brief Overview of Regional System structure – Dawn Mentzer

Dawn Mentzer gave a brief overview of the Regional adult mental health system, and provided a map of the regions in Iowa. Rolling Hills Region is comprised of 8 counties, Buena Vista, Carroll, Calhoun, Crawford, Ida, Sac, Cherokee and Woodbury. A governance board governs the region, and is made of a supervisor from each of the 8 counties, Dawn as CEO reports to this board. There are 5 Disability Coordinators located within the counties.

An explanation of recent legislation requiring core service development for adults was provided.

3. Children's Mental Health Legislation – Jan Heikes, Iowa Department of Human Services

Jan Heikes, from the Department of Human Service gave the history of HF690 which merges the Children's system with the adult system (regions). The adult system was developed in part to provide State Standards, merging counties into regions which are administered by a region but services are delivered locally. The children's system will be similar, regional administration with local services. A state board was appointed by the governor and HF690 was based on the recommendation of the children's strategic plan – this has been under development for about 10 years.

The Children's Behavioral Health State Board is appointed by the governor and meets 4 times per year with the first meeting being held today. Duties of this board are to advise the MHDS administration, provide consultation to agencies regarding development of administrative rules,

identify behavioral health outcomes and indicators. The board is required to submit a report before December 1 of each year to the Governor and General Assembly.

Regional Responsibilities: primary role is setting up (creation of) and coordinating the system, and funding a very small portion of services.

Who is eligible: under the age of 18 and reside in Iowa, Diagnosed with a serious emotional disturbance, family income equal or less than 500% of the poverty income guidelines, if family income is between 150% but not more than 500% of the poverty level, a copayment for services or a single state wide sliding fee or other cost sharing requirements approved by DHS.

*The law does not mandate that the regions have to pay for those between 150 – 500% with high deductibles.

The Regional Governance Board structure will change to add new voting members of: one adult person who uses mental health services or an actively involved relative of an adult who does; representation of the education system in the region; a parent of a child accessing behavioral health services in the region. Non-voting members shall include: adult provider in the region; children's behavioral health service provider in the region.

New core services for Children: dates of when these services have to be available will be determined by legislation.

Dawn asked what is available now and current issues:

- There are prevention and early prevention for early childhood in each county, however it does not help higher income families. Early Childhood Iowa funds this prevention service. Screening and diagnosis are an issue as doctors are not always available.
- Schools do not need a diagnosis so schools are not always encouraging families to seek the diagnosis. Screens are lacking.
- Sioux City – Handle with Care program with the Sioux City police department in \which schools are notified of a trauma or event with a child involved (DHS removal – etc.)
- Remember there are different diagnosis for children than adults which can be a problem when transitioning into adult services.
- Insurance does not cover academic testing and there is a shortage of those to do assessments and diagnosis which causes a delay.

Jan – there is a group that is meeting to look at needs assessments, implementation issues and they will make a recommendation to the Children's State Board. The panel has been looking at the level of the tools being used, the costs, ages, who should get the screenings and where should it be done, schools, doctors office?

Process of the Rules: HF690 passed – rules will be coming out. This has to be approved by MHDS commission, DHS will prepare a draft, which will be looked at by several groups, the commission has to give approval in conjunction with the State Children's Behavioral Health Board – then it goes on from there. It is hoped to be finalized by January 2020.

Dawn – regions have to have a plan to the State by April 1, 2020. There is a capped level of funding in the regions, with the development of new adult services, we also have to have them available for children. The regional levy had to be reduced down to spend reserve balances, and we will have around a 30% fund balance. There is no money for the Children’s system so it will be somewhat fiscally limited as to the development of the system.

Dawn provided an overview of the regional budgeting system and discussion of the access center development which is for the adult population.

Jan – working with regions to make sure accreditations are in place, contacts with IME and MCO’s in place, if the contracts and payments are not working Dawn has a channel to help with MCOs.

Dennis Bush explained the rules process as per the Commission, he stressed that public input on the proposed rules is very much needed and appreciated.

A discussion of crisis services for adults that are already in place within the region. These services will also be core for children. PAMHC, SLMHC and Jackson Recovery provided an overview of services they provide. Jan has heard that Crisis community based will be a program looked at by regions to start to provide crisis services in home rather than sending children to inpatient/residential units. This is a similar program to BHIS services.

4. Discussion of Next Steps for Plan Development

Dawn – would like to set workgroups to ensure that all aspects of the development will be met. Are there others that need to be invited to participate?

First steps:

- Creation of advisory board

- Workgroups to address core services for children:

- Dawn will send an email asking for participation for the different groups and designating a team lead for each group. Look at service gaps to access and implementing services.

- a. Identify additional representatives to be invited**

- i. BHIS providers

5. Schedule Future Meeting Dates

How often should this group meet? October – rules may be available to look at. The first Thursday of each month are adult task forces and this group could meet in the afternoon for those who attend all meetings.

Next Meeting: October 3, 2019 at 1:00 pm for next meeting for work group designation. Dawn asked for the group to send email addresses and names for those who should or could be involved.