

**COUNCIL ON HUMAN SERVICES**

**MINUTES**

**April 12, 2017**

**COUNCIL**

Mark Anderson  
Phyllis Hansell (via phone)  
Alexa Heffernan  
Kimberly Kudej  
Guy Richardson (absent)  
Kim Spading  
Sam Wallace

**EX-OFFICIO LEGISLATIVE MEMBERS**

Representative Joel Fry (absent)  
Representative Lisa Heddens (absent)  
Senator Mark Segebart (absent)  
Senator Amanda Ragan (absent)

**STAFF**

|                   |             |
|-------------------|-------------|
| Chuck Palmer      | Amy McCoy   |
| Sandy Knudsen     | Mikki Stier |
| Nancy Freudenberg | Liz Matney  |
| Sally Titus       | Ryan Page   |
| Jean Slaybaugh    |             |

**GUESTS**

Tony Leys, Des Moines Register  
Natalie Koerber, Amerigroup Iowa

**CALL TO ORDER**

Mark Anderson, Chair, called the Council meeting to order at 10:00 a.m.

Anderson noted that Guy Richardson will not be able to attend today's meeting due to a conflict. Richardson stated in an email to staff how much he enjoyed serving on the Council and will miss the friendships he established with Council members and staff.

## **ROLL CALL**

All Council members were present with the exception of Richardson. All Ex-officio legislative members were absent.

## **RULES**

Nancy Freudenberg, Bureau of Policy Coordination, presented the following rules to Council:

R-1 Amendments to Chapter 58, Emergency Assistance. Amendments restructure the emergency assistance programs managed by the Department. Specifically, these amendments update definitions to the Iowa Individual Disaster Aide Grant Program and update damage assessment criteria and amounts. In addition, these amendments implement the Iowa Disaster Case Management Program.

A motion was made by Wallace and seconded by Heffernan. MOTION CARRIED UNANIMOUSLY.

R-2 Amendments to Chapters 77, 78, and 79, Medicaid, regarding changes to multiple references to comprehensive function assessment tools under the waiver programs is not ready for review.

Noticed Rules:

N-1 Amendments to Chapter 7, Appeals. Amendments clarify that appeals related to health care decisions made by a managed care organization must follow a different process than other DHS appeals. These amendments establish a new appeals process for MCO-related appeals.

N-2 Amendments to Chapter 75, Medicaid. Amendment increases premiums for applicants and recipients under the Medicaid for Employed People with Disabilities (MEPD) program with income over 150% of the federal poverty level (FPL).

N-3 Amendments to Chapters 109, 110, and 120, Child Care. Amendments revise administrative rule requirements on reporting serious injuries in child care settings.

N-4 Amendments to Chapters 109, 110, and 120, Child Care. Amendments require child care centers, Homes, and Development Homes to have written emergency plans for response to food or allergic reactions. Amendments also revise administrative rules to include the preservice/orientation training component of child development. These amendments clarify the intent of

substitute requirements for essential child care training that is federally mandated. All of the aforementioned amendments are federally mandated as a result of the federal Child Care and Development Block Grant (CCDBG) reauthorization. Finally, these amendments provide technical updates to administrative rules for child care regarding first aid/CPR requirements.

N-5 Replacement of Chapter 170, Child Care Assistance. Amendment update the child care assistance fee chart to be in compliance with federal poverty levels (FPL). These amendments also update rules regarding job search for new applications to allow three months of job searching instead of one month.

A motion was made by Wallace and seconded by Kudej to approve the noticed rules. MOTION CARRIED UNANIMOUSLY.

### **APPROVAL OF MINUTES**

A motion was made by Wallace and seconded by Heffernan to approve the minutes of March 8, 2017. MOTION CARRIED UNANIMOUSLY.

### **BUDGET UPDATE**

Jean Slaybaugh, Administrator, Division of Fiscal Management, provided a budget update for the Council. Highlights:

- The State Fiscal Year (SFY) 2017 budget was adjusted by \$28M. More than half of that adjustment was met by Medical Assistance funding. TANF (Temporary Assistance for Needy Families) surplus funds were also used to manage the shortfall.
- In the beginning of this legislative session, the Governor's initial budget recommendations included additional budget reductions for SFY 2018. Then in March, the Revenue Estimating Conference estimates for revenues was below what was anticipated. Some funds were borrowed from the State emergency fund for SFY2017 that will need to be made up in SFY2018 or SFY2019. The Department's total budget is about \$30M below SFY2017 - the majority being Medicaid funding.
- About \$35M cost containment initiatives are built into the Medicaid budget for SFY2018. There are basically three primary areas in cost containment: 1) eligibility, 2) services or benefits and 3) provider reimbursement. The initiatives moves Iowa toward industry standards.
- In response to a question by Spading, Slaybaugh noted that the State is responsible for eligibility and for benefit plans, therefore the State has the authority to establish those rates and the managed care organizations have to comply. The state is not requiring MCOs provide less services,

but maintain the same level of services and the same benefits. The only change proposed is a change to retroactive eligibility.

## **MANAGED CARE UPDATE**

Mikki Stier and Liz Matney, IME, reviewed the latest quarterly "Managed Care Organization (MCO)" report, published March 10, 2017 - focusing on specific areas:

- 'Percentage and number of members receiving initial health risk assessments completed timely' (page 11). The Department is working with the MCOs to ascertain what their barriers are and how to reach members more effectively.
- 'Member grievances and appeals' (page 42). Members may file a grievance with the MCOs for any dissatisfaction that is not related to a clinical decision. Progress is being made to get to the benchmarks.
- 'Medicaid Claims Payment' (page 50). The Department continues to monitor reimbursement accuracy through analysis, validation projects, and follow-up when the Department is made aware of provider concerns. Matney noted that the Department is trying to educate providers to work with the MCOs first - which will ultimately get the fastest results.

## **COUNCIL UPDATE**

- Wallace noted that staff and Council should be proud of their work amidst a great deal of upheaval, and urged everyone not to be discouraged.
- Heffernan reported that she recently attended a meeting of the League of Women's Voters where the topic was 'Medicaid.' She noted that there was a lot of misinformation given with no representation from DHS.
- Spading reported that people are sharing real concerns especially around the available beds issue. The University of Iowa Medical Center's emergency room beds are full and family members are worn out. She noted the need to work together to make things better.

## **LEGISLATIVE UPDATE**

Sally Titus provided a legislative update:

- Two of the Department's bills have passed both legislative chambers and are awaiting the Governor's signature: 1) Sharing information on child's death and 2) IRS record checks

- Other bills to be addressed include: definition of foster care/clean up language, drug endangered children, terminating parental rights, federal block grant bills.
- The Department's appropriation bill is currently being worked on.
- Once bills are enacted, one of the department's roles is to read each bill carefully to be sure that language is technically correct. The Legislature relies on the department and the Legislative Services Agency to assure the intent is written correctly.

## **DIRECTOR REPORT**

Palmer noted that many of the problems the Department, Council and Legislature deal with cannot be solved with single solutions. Mental health services, Affordable Care Act, and Managed Care are all complex issues. Many times too much energy is drawn to single solutions and don't address the complexities. One of the most pressing issues is the complexity of serving the dually diagnosed individual (an individual with both mental illness and substance abuse or other intellectual disabilities, or aggressive issues) and where the responsibility for care should reside. There may be open beds available in the system, but they may not be the most appropriate bed. After meeting with a number of stakeholders (including law enforcement, Iowa Hospital Association, National Association for Mental Illness, Judicial, Peer Supports, etc.) the Department put together working groups to draft a regional plan for continuum and continuity of care focusing on complex issues.

## **ADJOURNMENT**

Council adjourned the meeting at 1:40 p.m.

The May 10, 2017 meeting is planned to be held at the Glenwood Resource Center.

*Submitted by Sandy Knudsen,  
Recording Secretary*

**COUNCIL ON HUMAN SERVICES**

**MINUTES**

**May 10, 2017**

**COUNCIL**

Mark Anderson (absent)  
Phyllis Hansell  
Alexa Heffernan  
Kimberly Kudej  
Kim Spading (via phone)  
Sam Wallace

**EX-OFFICIO LEGISLATIVE MEMBERS**

Representative Joel Fry (absent)  
Representative Lisa Heddens (absent)  
Senator Mark Segebart (present)  
Senator Amanda Ragan (absent)

**STAFF**

|                               |                 |
|-------------------------------|-----------------|
| Chuck Palmer                  | Amy McCoy       |
| Sandy Knudsen                 | Sally Titus     |
| Nancy Freudenberg (via phone) | Merea Bentrrott |
| Ryan Page (via phone)         | Rick Shults     |
| Harry Rossander (via phone)   | Ken Tigges      |
| Marsha Edington               | Natalie McEwen  |
| Kelly Robinson                |                 |

**GUESTS**

Senator Mark Costello  
Larry Kudej, Older Iowans Legislature  
Richard Crouch, Glenwood Parent/Family Board

**CALL TO ORDER**

Phyllis Hansell, Vice Chair, called the Council meeting to order at 10:00 a.m.

## **ROLL CALL**

All Council members were present with the exception of Anderson. Spading would join the meeting during the business portion of the agenda via phone. All Ex-officio legislative members were absent with the exception of Senator Segebart.

## **REVIEW OF GLENWOOD RESOURCE CENTER**

Rick Shults, Administrator, Division of Mental Health and Disability Services, welcomed the Council to the Glenwood Resource Center (GRC). Shults has assumed the position of 'interim superintendent' since the retirement of Gary Anders. Shults introduced Marsha Edgington, the Superintendent of the Woodward Resource Center, who has also assumed extra duties at GRC.

Shults provided the following information:

- The definition of an Intellectual Disorder is a disorder with onset during the developmental period that includes both intellectual and adaptive functioning deficits in conceptual, social, and practical domains.
- Estimates vary widely, but metadata analysis concludes that about 1 percent of the general population, or about 30,000 lowans, has an intellectual disability.
- 221 individuals currently live at the GRC facility (19 individuals are served in four community-based homes funded by the Home and Community Based Services Waiver).
- GRC provides individualized active treatment and intensive supports targeting the person's barriers to living successfully in his or her chosen community. A variety of prevention and intervention strategies are used to meet the needs of individuals GRC serves.

## **TOUR**

The Council was provided a tour of the GRC campus.

- The campus covers 1,138 acres of land. There are one million square feet of building space including 35 homes of which 17 homes are used by individuals served by GRC.
- There are 27 other buildings, most of which are used for offices and support sites. Some tenants on the campus include: DHS Targeted Case Management, Mills County DHS, On with Life Extended Services,

Southern Hills Regional Mental Health Region, and Mills County Public Health.

## **APPROVAL OF MINUTES**

A motion was made by Wallace and seconded by Kudej to approve the minutes of April 12, 2017. MOTION CARRIED UNANIMOUSLY.

## **RULES**

Nancy Freudenberg, Bureau of Policy Coordination, presented the following rules to Council:

R-1 Amendments to Chapter 7, Appeals. Amendments clarify that appeals related to health care decisions made by a managed care organization must follow a different process than other appeals. Amendments establish a new appeals process for MCO-related appeals. Freudenberg reviewed the 11 comments received.

A motion was made by Heffernan and seconded by Kudej to approve. MOTION CARRIED UNANIMOUSLY.

R-2 Amendments to Chapters 75, Medicaid. Amendment increases premiums for applicants for and recipients under the Medicaid for Employed People with Disabilities (MEPD) program with income over 150% of the federal poverty level (FPL).

A motion was made by Kudej and seconded by Heffernan to approve. MOTION CARRIED UNANIMOUSLY.

R-3 Amendments to Chapters 109, 110, and 120, Child Care. Amendments revise administrative rule requirements on reporting serious injuries in child care settings.

A motion was made by Spading and seconded by Heffernan to approve. MOTION CARRIED UNANIMOUSLY.

R-4 Amendments to Chapters 109, 110, and 120, Child Care. Amendments require child care centers, Homes, and Development Homes to have written emergency plans for response to food or allergic reactions. Amendments also revise administrative rules to include the preservice/orientation training component of child development. These amendments clarify the intent of substitute requirements for essential child care training that is federally mandated. All of the aforementioned amendments are federally mandated as a result of the federal Child Care and Development Block Grant (CCDBG)



reauthorization. Finally, these amendments provide technical updates to administrative rules for child care regarding first aid/CPR requirements.

A motion was made by Wallace and seconded by Heffernan to approve. MOTION CARRIED UNANIMOUSLY.

R-5 Replacement of Chapter 170, Child Care Assistance. Amendments update the child care assistance fee chart to be in compliance with federal poverty levels (FPL). These amendments also update rules regarding job search for new applications to allow three months of job searching instead of one month.

A motion was made by Wallace and seconded by Kudej to approve. MOTION CARRIED UNANIMOUSLY.

Noticed Rules:

N-1 Amendments to Chapter 75, Medicaid. Updates the maximum Medicaid rate for ICF/IDs which are used to determine the disposition of income of a Medical Assistance Income Trust (MAIT).

N-2 Amendments to Chapter 75, Medicaid. Decreases the statewide average cost for nursing facilities, Psychiatric Medical Institutions for Children, and Mental Health Institutions which are used to determine the disposition of the income of a Medical Assistance Income Trust (MAIT).

N-3 Amendments to Chapters 108, 112, 113, 114, 116, 117, 156, and 202. Revises outdated terminology and regulations. Aligns rules with child care regulations and provides needed revisions for contractor requirements for pre-service training for the recruitment, retention, training and support contracts effective July 1, 2017.

Council questioned what the criteria was for "mistreatment" and "promptly" in Chapter 113.18 (3) Foster Care rules. Freudenberg will ask staff to respond back to the Council.

N-4 Amendments to Chapter 142, Interstate Compact for the Placement of Children. Implements the National Electronic Interstate Compact Enterprise (NEICE) system.

A motion was made by Spading and seconded by Heffernan to approve the noticed rules. MOTION CARRIED UNANIMOUSLY.

#### **MANAGED CARE UPDATE**

Palmer reported that the annual managed care rate updates are currently in development and a final rate book is anticipated to be completed in the next few

weeks. The goal is to have the agreements in place with the managed care organizations (MCOs), and approval from the Centers for Medicare and Medicaid Services (CMS), for July 1 rate changes.

Palmer suggested that the process used to arrive at a managed care rate be an agenda item for a future Council meeting.

#### **DIRECTOR'S REPORT**

Palmer reported that it is premature to speculate on the outcome of health care at the Federal Level.

Palmer reported that the Department continues to recruit for a new Superintendent for the Glenwood Resource Center. He noted that the skill base required for superintendent is quite varied and the position requires that the person be a good manager of not just the clinical side of the facility but also the business side.

#### **COUNCIL UPDATE**

Council thanked the Glenwood staff for their hospitality.

#### **ADJOURNMENT**

Council adjourned the meeting at 2:45 p.m.

*Submitted by Sandy Knudsen,  
Recording Secretary*

## **COUNCIL ON HUMAN SERVICES**

### **MINUTES**

**June 14, 2017**

#### **COUNCIL**

Mark Anderson  
Phyllis Hansell (absent)  
Alexa Heffernan  
Kimberly Kudej  
Kim Spading  
Sam Wallace

#### **EX-OFFICIO LEGISLATIVE MEMBERS**

Representative Joel Fry (present)  
Representative Lisa Heddens (absent)  
Senator Mark Segebart (absent)  
Senator Amanda Ragan (present)

#### **STAFF**

Chuck Palmer  
Sandy Knudsen  
Nancy Freudenberg  
Sally Titus  
Liz Matney

Amy McCoy  
Vern Armstrong  
Wendy Rickman  
Mikki Stier  
Merea Bentrrott

#### **GUESTS**

Tony Leys, Des Moines Register  
Rob Borchart, Cedar Rapids Gazette  
Jodi Tomlonovic, Family Planning Council of Iowa  
Angel Bush-Adams, Legislative Services Agency  
Molly Driscoll, Brown Winick  
Natalie Koerber, Amerigroup  
Sandi Hurtado-Peters, Department of Management  
Kris Bell, Senate Democratic Caucus  
Sharon Hansen, CFPC

#### **CALL TO ORDER**

Mark Anderson, Chair, called the Council meeting to order at 10:00 a.m.

## **ROLL CALL**

All Council members were present with the exception of Hansell. Ex-officio legislative members Fry and Ragan were present, Heddens and Segebart were absent.

Director Palmer reported that the Governor has appointed Jerry R. Foxhoven as the new Director of the Department of Human Services. Palmer retires June 16, 2017. The Governor's Press Release regarding Foxhoven's appointment was distributed. Palmer noted that he is pleased with the selection and will strive to make the transition as smooth as possible. Council thanked Palmer for his years of service and presented him with a certificate of appreciation.

## **RULES**

Nancy Freudenberg, Bureau of Policy Coordination, presented the following rules to the Council.

**R-1.** Amendments to Chapter 75, Medicaid. Updates the maximum Medicaid rate for ICF/IDs which are used to determine the disposition of income of a Medical Assistance Income Trust (MAIT).

A motion was made by Wallace and seconded by Kudej to approve. MOTION CARRIED UNANIMOUSLY.

**R-2.** Amendments to Chapter 75, Medicaid. Decreases the statewide average cost of nursing facility services to a private-pay person. Updates the average charges for nursing facilities, Psychiatric Medical Institutions for Children, and Mental Health Institutions which are used to determine the disposition of the income of a Medical Assistance Income Trust (MAIT).

A motion was made by Wallace and seconded by Spading to approve. MOTION CARRIED UNANIMOUSLY.

**R-3.** Amendments to Chapters 77, 78, and 83, Medicaid. Implements changes related to MCO implementation and provides technical clarification. Updates multiple references to comprehensive functional assessment tool under waiver programs. Updates references to service worker assessment under waivers. Adds definitions for integrated health home care coordinator to the CMH waiver.

A motion was made by Heffernan and seconded by Wallace to approve. MOTION CARRIED UNANIMOUSLY.

**R-4.** Amendments to Chapters 108, 112, 113, 114, 116, 117, 156, and 202. Revises outdated terminology and regulations. Aligns rules with child care regulations and provides needed revisions for contractor requirements for pre-

service training for the recruitment, retention, training and support contracts effective July 1, 2017.

A motion was made by Kudej and seconded by Wallace to approve. MOTION CARRIED UNANIMOUSLY.

Following discussion, Council requested that Wendy Rickman address the Council at their August meeting and provide an overview specifically on child care regulations and draft proposals for Council consideration to share with Legislators.

**R-5.** Amendments to Chapter 142, Interstate Compact for the Placement of Children. Implements the National Electronic Interstate Compact Enterprise (NEICE) system.

A motion was made by Spading and seconded by Kudej to approve. MOTION CARRIED UNANIMOUSLY.

**R-6.** Amendments to Chapter 79, Medicaid. Implements cost containment strategy to eliminate Primary Care Physician rate increases. This amendment is being filed double emergency and is associated with the Notice of Intended Action **N-2** found below.

A motion was made by Wallace and seconded by Kudej to approve. MOTION CARRIED with Spading and Kudej opposed.

Council had discussions regarding the cost containment rules and concerns regarding their ramifications and the appearance of cost shifting and not savings.

**R-7.** Amendments to Chapter 79, Medicaid. Implements the cost containment strategy to adjust the inpatient diagnostic related group (DRG) cost outlier threshold formula to be the greater of two times the statewide average DRG payment for that case, or the hospital's individual DRG payment for that case plus \$75,000. The current formula is the greater of two times the statewide average DRG payment for the case, or the hospital's individual DRG payment for the case plus \$16,000. This amendment is being filed double emergency and is associated with the Notice of Intended Action **N-3** found below.

A motion was made by Heffernan and seconded by Wallace to approve. MOTION CARRIED with Spading and Kudej opposed.

**R-8.** Amendments to Chapter 79, Medicaid. Re-implements the cost containment strategy to adjust Medicaid reimbursement rates for physician services rendered in facility settings (e.g., hospitals), by applying a "site of service" differential to reflect the difference between the cost of physician services when provided in a health facility setting and the cost of physician

services when provided in a physician's office. Note that the strategy in this amendment was originally legislatively mandated in 2011 as a directed/mandated cost-containment strategy at that time. However, the Legislature "nullified" the original mandate in 2012, based on provider complaints about reduced payments in facility settings. This amendment is being filed double emergency and is associated with the Notice of Intended Action **N-4** found below.

A motion was made by Heffernan and seconded by Wallace to approve. MOTION CARRIED with Spading and Kudej opposed.

**R-9.** Amendments to Chapter 79, Medicaid. Implements the cost containment strategy to adjust the Iowa Medicaid anesthesia conversion factor to be equal to the calendar year 2017 Medicare anesthesia conversion factor, as adjusted for the state, and converted to a per minute amount. Each January 1, thereafter, the Department shall apply the applicable Medicare anesthesia conversion factor adjusted for the state, and converted to a per-minute amount. This amendment is being filed double emergency and is associated with the Notice of Intended Action **N-5** found below.

A motion was made by Wallace and seconded by Kudej to approve. MOTION CARRIED with Spading and Kudej opposed.

**R-10.** Amendments to Chapters 79 and 80, Medicaid. Implements the cost containment strategy to ensure that total reimbursement for Medicare Part A and B crossover claims is limited to the Medicaid reimbursement rate. This amendment is being filed double emergency and is associated with the Notice of Intended Action **N-6** found below.

A motion was made by Heffernan and seconded by Wallace to approve. MOTION CARRIED with Spading and Kudej opposed.

A motion was made by Kudej and seconded by Wallace that staff draft a letter for the Council's review to legislative budget chairs indicating their concerns regarding the above 'cost containment rules.'

**R-11.** Amendments to Chapters 7 and 87, Family Planning. Implements a new state family planning program. Amends appeals rules to remove references to the old state-funded family planning program. This amendment is being filed double emergency and is associated with the Notice of Intended Action **N-7** found below.

A motion was made by Wallace and seconded by Heffernan to approve.

Discussion: Wendy Rickman addressed the Council explaining that providers of family planning services that provide abortions can no longer participate as a FPP (Family Planning Program) provider and that the State will no longer receive

Federal Financial Participation funding. Legislation directed the Department to replicate the federal program using state funding. The Department in consultation with CMS are conducting a transition from the federal waiver, which will end June 30, 2017, with new services beginning July 1, 2017. The fundamental change is that three of the primary entities (Unity Point Health, University of Iowa, and Planned Parenthood) that were providing the services will no longer be engaged.

Council expressed concerns about access to health care and the level of adequate health care provided as well as coverage for non-citizens.

MOTION FAILED with Spading, Kudej, Heffernan, and Anderson opposed.

The following amendments to rules are presented as Notices of Intended Action for review by the Council:

**N-1.** Amendments to Chapter 83, Medicaid. Allows HCBS waiver members who are inpatient in a hospital or medical institution for 31 to 120 days to resume waiver services upon discharge without having to reapply and going back on the waiver list.

**N-2.** Amendments to Chapter 79, Medicaid. Implements cost containment strategy to eliminate Primary Care Physician rate increases. This amendment is being filed specifically for public comment on the double emergency rule **R-6** as shown above.

**N-3.** Amendments to Chapter 79, Medicaid. Implements the cost containment strategy to adjust the inpatient diagnostic related group (DRG) cost outlier threshold formula to be the greater of two times the statewide average DRG payment for that case, or the hospital's individual DRG payment for that case plus \$75,000. The current formula is the greater of two times the statewide average DRG payment for the case, or the hospital's individual DRG payment for the case plus \$16,000. This amendment is being filed specifically for public comment on the double emergency rule **R-7** as shown above.

**N-4.** Amendments to Chapter 79, Medicaid. Re-implements the cost containment strategy to adjust Medicaid reimbursement rates for physician services rendered in facility settings (e.g., hospitals), by applying a "site of service" differential to reflect the difference between the cost of physician services when provided in a health facility setting and the cost of physician services when provided in a physician's office. Note that the strategy in this amendment was originally legislatively mandated in 2011 as a directed/mandated cost-containment strategy at that time. However, the Legislature "nullified" the original mandate in 2012, based on provider complaints about reduced payments in facility settings. This amendment is being filed specifically for public comment on the double emergency rule **R-8** as shown above.

**N-5.** Amendments to Chapter 79, Medicaid. Implements the cost containment strategy to adjust the Iowa Medicaid anesthesia conversion factor to be equal to the calendar year 2017 Medicare anesthesia conversion factor, as adjusted for the state, and converted to a per minute amount. Each January 1, thereafter, the Department shall apply the applicable Medicare anesthesia conversion factor adjusted for the state, and converted to a per-minute amount. This amendment is being filed specifically for public comment on the double emergency rule **R-9** as shown above.

**N-6.** Amendments to Chapters 79 and 80, Medicaid. Implements the cost containment strategy to ensure that total reimbursement for Medicare Part A and B crossover claims is limited to the Medicaid reimbursement rate. This amendment is being filed specifically for public comment on the double emergency rule **R-10** as shown above.

**N-7.** Amendments to Chapters 7 and 87, Family Planning. Implements a new state family planning program. Amends appeals rules to remove references to the old state-funded family planning program. This amendment is being filed specifically for public comment on the double emergency rule **R-11** as shown above.

A motion was made by Heffernan and seconded by Kudej to approve the noticed rules. MOTION CARRIED UNANIMOUSLY.

#### **APPROVAL OF MINUTES**

A motion was made by Wallace and seconded by Spading to approve the minutes of May 10, 2017. MOTION CARRIED UNANIMOUSLY.

#### **UPDATE ON MANAGED CARE**

Mikki Stier and Liz Matney, Iowa Medicaid Enterprise, provided the Council with highlights of the Managed Care Organization Report SFY 2017, Quarter 3 (January-March) Performance Data that is slated for release next week.

- Across the quarters, the data appears to be stabilizing allowing for better trending assumptions to be made.
- So far this year over 141,000 adults and 100,000 children have received an initial health assessment.
- Managed Care Organizations (MCOs) appear to all be meeting their benchmarks in the handling of appeals and grievances within the required timeframes, although more scrutiny is required to review whether some double counting may be occurring.
- Improvement is being made by all MCOs in the service plan and level of care reassessments (all are above the 85% threshold)



- MCOs are operating close to or above the benchmarks for claims payment timeliness (Amerigroup is behind on their benchmarks resulting in corrective actions in place for them. Amerigroup has a subcontractor working on this issue)
- All the MCOs are above 98% in either approving or denying prior authorizations within the established timeframes.
- In July DHS will be hosting mid-term review results and will make sure the Council is aware when that is posted for the public.
- An external quality review is required under the federal managed care regulations
- A team has been assembled (MCOs and State staff) to work on standardizing the provider manual.

In response to a question from Spading about her concerns regarding payment timeliness, Stier reported that DHS, the MCOs and providers, like the University of Iowa, have made great strides in addressing those issues. Stier offered to give the Council an update on this issue at a future meeting

Anderson asked Council members to review the report when it is made available and then to forward any comments or questions to Sandy Knudsen who will disseminate to staff to facilitate discussion at the August meeting.

### **CHILD WELFARE UPDATE**

Wendy Rickman and Vern Armstrong shared with the Council:

As a result of two tragic cases occurring recently in Iowa, the Department will be conducting an internal review and will also be bringing in a third party to conduct a review of the child welfare system, as a whole, to assist in identifying areas where improvement can be made.

DHS has contracted with the Child Welfare Policy and Practice Group. Rickman noted that this group has experience in Iowa. The initial contract calls for six visits to Iowa. Once Iowa's current system is reviewed, the contractor will move to a more targeted approach in terms of what should be changed.

Currently the Department is engaged in answering a considerable amount of requests for information stemming from the legislative oversight committee meeting.

Anderson suggested blocking out an hour at the September Council meeting agenda, if possible, to hear what has been learned from the reviews.

### **COUNCIL UPDATES**

Council thanked Director Palmer for his many years of service.

Anderson suggested that staff provide a link to corresponding legislation when posting rules to the DHS Website.

Anderson suggested the Council hold a two-day budget meeting instead of a one-day meeting in September (September 12 and 13, 2017).

### **APPROVAL OF CHILD ABUSE PREVENTION PROGRAM ADVISORY COMMITTEE CHARTER AGREEMENT - REVIEW OF REPORT FORMAT**

Rickman reviewed the charter agreement and report format with the Council.

In response to concerns raised by Heffernan, Rickman noted that she would amend the report format to line up with the charter agreement.

A motion was made by Wallace and seconded by Spading to approve the Charter and report (as amended). MOTION CARRIED UNANIMOUSLY.

### **LEGISLATIVE UPDATE**

Merea Bentratt, provided a legislative update:

- Department staff attended the legislative Oversight Committee meeting and answered questions posed by the legislators regarding child welfare issues.
- Staff will be coordinating several introductory meetings with various members of the legislature and new director, Jerry Foxhoven.

### **DIRECTOR'S UPDATE**

Palmer reflected on his tenure as Director of the Iowa Department of Human Services and noted that DHS has many wonderful and deeply committed employees. Often DHS is not well-understood, much of what DHS does is "under the radar" and not appreciated enough for what they do.

Palmer noted that there is never a good time to retire as there is always unfinished business, but with a change in administration, the time was right to leave. Palmer reported that there are many challenges ahead for DHS and he has appreciated working with the Council, whose leadership he noted has been outstanding.

### **ADJOURNMENT**

Council adjourned the meeting at 1:05 p.m.

*Submitted by Sandy Knudsen,  
Recording Secretary*