COUNTY SOCIAL SERVICES 28E GOVERNING BOARD AGENDA

To: County Social Services Board Members

Cc County Social Services Stakeholders/Public is encouraged to attend

From: Bob Lincoln Date: May 21, 2020

Re: County Social Services Board Meeting

Date: Wednesday, May 27, 2020

Time: 10:00 A.M.

Place: Please participate by joining any time after 9:30 AM from your computer, tablet or smartphone:

https://global.gotomeeting.com/join/758354045

You can also dial in using your phone:

United States: +1 (312) 757-3121

Access Code: 758-354-045

- There will be no physical location for in-person participation
- You may use the "chat" function to comment or request the floor.
- If you use the phone in option, please note the number to text your comments. Phones are prone to feedback so please keep muted unless speaking.

Agenda:

- 1. Call County Social Services Board Meeting to order.
- 2. Approve today's agenda and the minutes of March 25, 2020.
- 3. Provider feedback.
- 4. Consumer feedback.
- 5. Presentation of Brain Health Now campaign by Debi Butler and Claira Sieverding, Director.
- 6. Discussion of Kossuth's January allocation request of \$153,136. Discussion/Action
- Presentation of first draft of CSS 28E Agreement. This will be the first step in the redrafting of our 28E
 Agreement. Following Board feedback an initial first draft will be presented to the Board on June 24th for
 approval and distribution to member counties. (attached) Discussion

Human Resources

- 8. Extend to June 30, 2020: CSS employees can take 100% paid leave for up to 2 weeks (80 hours) if the employee is:
 - a. Subject to a quarantine or isolation order next advised by their health care provider to self-isolate due to COVI D 19 issues;
 - b. Experiencing COVID-19 symptoms and seeking a diagnosis;
 - c. Caring for an individual (does not have to be a family member) subject to a quarantine or isolation order or advised by a provider to self-quarantine;
 - d. Caring for the employee's child if the child's school or place of care is closed or the child's care provider is unavailable due to the public health emergency;
 - e. Experiencing any other substantially similar condition as specified by the Secretary of Health and Human Services. Discussion/Action
- Extend to June 30, 20202: CSS employees can access their Medical Leave Bank- waiving approved FMLA
 absences for reasons relating to COVID-19 not stated above or as an extension to the 80 hours.
 Discussion/Action
- 10. Presentation of Distracting Driving Policy. (attached) Discussion/Action

Programs

- 11. Francis Lauer (YSS Organization) is requesting \$175,000 in capital reimbursement for the establishment of Iowa's first Youth Access Center. (attached) Discussion/Action
- 12. The ACSC Access Center is requesting assistance with the installation of fiber optics to better leverage telehealth care in the Center. The cost to install is approximately \$17,000, they are requesting CSS to provide \$5,000 towards this enhancement. Discussion/Action
- 13. The Cedar Valley Coalition for Suicide Prevention & Support is requesting matching from Community Foundation of Northeast Iowa and is asking CSS to provide the \$11,625.00 if approved to develop training for Mental Health First Aid and Question, Persuade, Refer (QPR) trainings. (attached) Discussion/Action **Organization**
- 14. Financial report and claims approval. (attached) Discussion/Action
- 15. ETP review February, March, April. (attached) Discussion/Action

- 16. Annual Service and Budget Plan for Fiscal Year 20201. (attached) Discussion/Action
- 17. Policy and procedure changes to include mandates to cover children effective July 1, 2020. (website) Discussion/Action
- 18. Review and action to authorize the Chair to sign provider agreements requests with:
 - a. Iowa Northland Regional Transit Commission
- b. UnityPoint Health Business Associate Agreement

 19. Adjourn; next meeting will be Wednesday, June 24th. Board decide meeting in person or electronically.

March 2020 County Social Services Board Minutes

The March 2020 County Social Services Board Meeting was held over GoToMeeting on Wednesday, March 25, 2020 at 10:00 A.M.

Present by Roll Call: Dennis Koenig, Allamakee; Craig White, Black Hawk; Chris Watts, Cerro Gordo; Jacob Hackman, Chickasaw; Sharon Keehner, Clayton; John Pluth, Emmett; Roy Schwickerath, Floyd; Gary Rayhons, Hancock; Pat Murray, Howard; Sandy Looney, Humboldt; Donnie Loss, Kossuth; Barb Francis, Mitchell; Clarence Siepker, Pocahontas; Larry Vest, Tama; Mark Campbell, Webster; Bill Jensvold, Winnebago; Ken Abrams, Worth; Marcia Oltrogge; Provider Rep

Absent: Greg Barnett, Butler; Jeanine Tellin, Fayette; Jim Ross, Grundy; Floyd Ashbacher, Winneshiek; Karl Helgevold, Wright; Eric Donat, Consumer Rep.

Guests: Libby Reekers, Tiffany Liska, Karen Dowell, Sheri Vierkant, Bob Lincoln, Lisa Trainer

- 1. Chair Schwickerath called County Social Services Board Meeting to order.
- Motion by Vest, Tama and Second by Siepker, Pocahontas to rescind item #14 from February 26, 2020 CSS Board
 Minutes due to item was not correctly and clearly stated in CSS Board Minutes. Item #14 will be reviewed further
 and brought back to CSS Board. Motion carried. Motion by Rayhons, Hancock and Second by Koenig, Allamakee
 to approve today's agenda. Motion carried.
- 3. Motion by Rayhons, Hancock and Second by Watts, Cerro Gordo to approve CSS provide employees up to additional 2 weeks (80 hours) paid leave for suggested absences due to COVID-19 with amendment that includes the following: Amendment effective with CSS Board passing with the current Proclamation of Disaster Emergency ordered by Iowa Governor in effect from 12:01 am, March 9, 2020 through 11:59 pm, April 7, 2020 (The Governor does have the option to terminate it sooner or extend it in writing.); everyone abides by good faith; not leaving homes except for necessities (doctor, medication, food); and those in quarantine limit movement to quarantine location. Motion carried.
- 4. Motion by Francis, Mitchell and Second by Siepker, Pocahontas to approve CSS employees access Medical leave Bank waiving FMLA due to absences relating to COVID-19 with amendment of no set end date but by Proclamation of Disaster of Emergency by Iowa Governor. Motion carried.
- 5. Motion by Francis, Mitchell and Second by Keehner, Clayton to approved CSS employees be paid for time available to work from home. Motion carried.
- 6. Bob Lincoln presented update on COVID-19 daily meetings. No Action.
- 7. Bob Lincoln presented information on how CSS is communicating and handling COVID-19 with Providers. Chair Schwickerath requested Bob email Directors information due to many items covered. Bob will email formal plans to CSS Board. No Action.
- 8. Motion by Francis, Mitchell and Second by Koenig, Allamakee to approve Bob Lincoln emailing FY2021 Annual Budget and Service Plan to CSS Board Members and CSS Executive Board to approve as it must be submitted to state by May 1, 2020. Motion carried. Noted Abrams, Worth voted against.
- 9. Motion by Siepker, Pocahontas and Second by White, Black Hawk to approve Property Tax Allocation with Delinquent Date of 05/31/2020. Motion carried.
- 10. Motion by Rayhons, Hancock and Second by White, Black Hawk to approve presented claims. Motion carried.
- 11. Motion by Loney, Humboldt and Second by Koenig, Allamakee to authorize Chair to sign provider agreements listed. Motion carried.
- 12. Motion by White, Black Hawk and Second by Watts, Cerro Gordo to adjourn meeting. Next CSS Board Meeting will be Wednesday, May 27, 2020 and Quadrant Advisory Boards will meet April 22, 2020 at 10 am.



Distracted Driving Policy

Policy Statement

County Social Services (CSS) values the safety and well-being of all employees. Due to the risk of motor vehicle accidents, CSS has adopted a Distracted Driving Policy, effective 6-1-2020 to provide guidelines to all CSS employees who drive CSS vehicles or for those who drive their personal vehicle for CSS business.

This policy is implemented to reduce driver distractions and to ensure the safety of our employees and others (passengers, other motorists, and pedestrians). Employees may be subject to periodic driving record reviews to ensure value licensure and insurability guidelines are met.

Definition

Distracted driving is the diversion of attention from driving, as a result of the driver focusing on a non-driving object, activity, event, or person. The diversion reduces cognitive awareness, decision-making, or performance leading to increased risk of driver-error, near-crashes, or crashes.

Prohibited Activities- CSS Employees will NOT engage in the following while driving:

- Operating a cell phone with your hands (hands-free mode is allowed)
- Operating a computer / laptop, text messaging device, or Global Positioning System (GPS) devices
- Reading (a book or newspaper, etc.)
- Personal grooming

If CSS employees need to use their cell phones, they must pull over safely to the side of the road or to another safe location.

Enforcement

Failure to comply with this policy may result in discipline under the CSS Discipline Policy up to and including termination of employment. In addition, a violation of a state or local driving law may be punishable by citation and fine.

I acknowledge that I have received a written copy of understand the terms of this policy, that I agree to the consequences of failing to follow the policy.	of the CSS Distracted Driving Policy, that I fully abide by these terms, and that I am willing to accept
Employee Signature	 Date
Employee Name (Printed)	





YSS Francis Lauer Building Hope Community Campaign

Trauma-Informed Care:

The Foundation of Recovery

Throughout the campus transformation, YSS Francis Lauer will provide a flexible, deinstitutionalized, trauma-informed and homelike environment. A welcoming reception area will be created to provide immediate comfort to families in crisis, while new common areas and days rooms will encourage social interaction and promote a sense of community. Maximizing the use of daylight and highlighting humanistic values will help improve one's sense of identity, worth, dignity, and empowerment – all key aspects of maintaining mental health and healing.



Providing Crisis Stabilizaiton Services

YSS Francis Lauer partners with County Social Services as a Crisis Stabilization Access Center for youth ages 12 to 18. As an Access Center, we are a point of entry for youth and families to be connected to the proper services. Our organization is a place where they will be welcomed, where they will be safe, and where they will get what they need, when they need it.

YSS Francis Lauer sees its Crisis Stabilization program as a crucial first step for youth and families in crisis. This program provides short-term interventions and support for youth and families who are non-system involved (DHS/JCS), are not currently suicidal or homicidal, and are experiencing an urgent crisis regarding mental health, behavioral health, substance use, or medication management. The goal is to stabilize the crisis so the youth can return home. If the youth needs a higher level of care, referrals and recommendations to the appropriate service(s) will be provided.



What is Trauma-Informed Care?

A model of care that realizes the widespread impact of trauma and understands potential paths for recovery; fully integrating knowledge about trauma into policies, procedures, practices, and seeks to actively resist re-traumatization.

What is Trauma-Informed design?

A goal to create spaces that are welcoming, demonstrate a safe environment, and provide some degree of privacy, while at the same time not interfering with staff's need to monitor residents' behavior.

*Definitions obtained from the Committee on Temporary Shelter



"I am so proud to be able to say great things about YSS Francis Lauer. When I say we found hope that we didn't know existed, I absolutely mean it! My son is now thriving in a military career and prior to YSS, we couldn't picture a future for him that didn't involve drugs and alcohol, or jail/prison... or even death."

-Shannon, North Iowa Parent



COST BREAKDOWN

WELCOME CENTER LIGHTING

\$36,700

Providing a higher quality of light directly impacts mood and behavior.

WELCOME CENTER SOUND BAFFLES

\$53,100

To reduce the risk of high-trigger sounds caused by hypersensitivity.

PRIVATE WAITING SPACE WITH SLIDING DOOR

\$4,550

Ensuring immediate privacy and comfort to families experiencing a crisis.

EXTERIOR SIDEWALK

\$9,575

To ensure safe travel between shelter and other activities, such as school, dining, and recreation.

CRISIS STABILIZATION COUNSELING AREA

\$71,075

Creating six additional counseling and medication management offices for our growing program.

TOTAL FUNDING REQUESTED FROM CSS: \$175,000

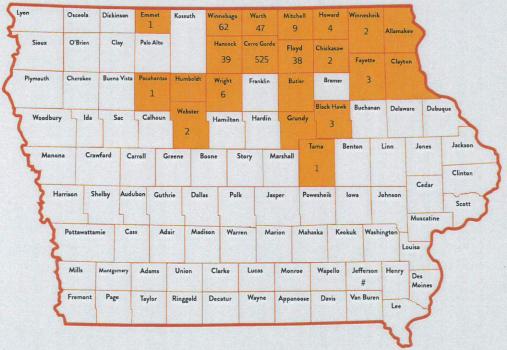
Geographic Reach by County

1 Marion

3 Mitchell

Beltrami

Black Hawk



DIACK I IAWK	9	Mirchell	7
Buchanan	2	Montgomery	1
Cass	1	Palo Alto	1
Cedar	1	Pocahontas	1
Cerro Gordo	525	Polk	4
Chickasaw	2	Pottawattamie	1
Clinton	1	Story	19
Delaware	1	Tama	1
Emmet	1	Warren	1
Fayette	3	Webster	2
Floyd	38	Winnebago	62
Franklin	11		2
Hancock	39	Woodbury	2
Hardin	6	Worth	47
Harrison	1	Wright	6
Howard	4		
Kossuth	5		
Lee	1	Mower, MN	1
Linn	3	Olmsted, MN	1

Clients Served in CSS Region: 745

Total Clients Served: 812

Community Foundation of Northeast Iowa Spring 2020 Budget Proposal

Activity	Total Estimated Cost
Question, Persuade, Refer (QPR) Training	
\$175 per training x 50 trainings x 10 participants Cost per participant \$3 x 500 participants	\$8,750.00 \$1,500.00
Question, Persuade, Refer (QPR) Train the Trainer Training	
3 additional trainers at \$500	\$1,500.00
Additional Educational Materials	
Books, tapes, resources, etc. for community usage	\$1.500.00
Youth Mental Health First Aid Training	
\$ 500 per training x 6 trainings	\$3,000.00
\$30 per participant x 8 hours x 100 participants	\$3,000.00
Adult Mental Health First Aid Train the Trainer Training	\$4,000.00
TOTAL REQUEST FROM THE COMMUNITY FOUNDATION	11,625.00
TOTAL MATCHING GRANT FROM COUNTY SOCIAL SERVICES	11,625.00
TOTAL PROJECT REQUEST	\$23,250.00



Cash Summary Report For Period Ending 4/30/2020 YTD 83%

Revenue		Budget	Р	rior Month	Cι	rrent Month		YTD	% YTD	
Property Tax/Fund Bal Transfer	\$	16,522,220	\$		\$	2,568,955	\$	10,282,458	62%	
Medicaid Reimbursement (TCM)	\$	212,600	\$	-	\$	-	\$	81,359	38%	
I-START	\$	100,000	\$	20,000	\$	15,000	\$	141,536	142%	
Misc.	\$	310,000	\$	1,759	\$	2,337	\$	314,225	101%	
Total Revenue	\$	17,144,820	\$	21,759	\$	2,586,292	\$	10,819,578	63%	_
		·								=
Domain										
Core										
Treatment	\$	1,170,000	\$	101,518	\$	92,192	\$	640,527	55%	
Crisis Services	\$	2,661,000	\$	95,329	\$	147,789	\$	612,833	23%	
Support for Community Living	\$	2,624,800	\$	171,605	\$	130,777	\$	1,464,670	56%	
Support for Employment	\$	650,000	\$	36,862	\$	42,424	\$	383,383	59%	
Recovery Services	\$	180,000	\$	3,140	\$	2,760	\$	60,958	34%	
Service Coordination	\$	60,000	\$	561	\$	-	\$	1,963	3%	
Sub-acute Services	\$	50,000	\$	45,600	\$	51,840	\$	208,240	416%	1
Evidence Based Treatment	\$	1,355,000	\$	36,915	\$	41,198	\$	356,385	26%	
Mandated	\$	1,000,000	\$	57,047	\$	80,894	\$	703,871	70%	
Additional Core										
Justice System Involved Services	\$	447,000	\$	33,545	\$	46.082	\$	270.838	61%	
Evidence Based Treatment	\$	105,000	\$	22,023	\$	25,645	\$	169,796	162%	2
Other Informational Services	\$	96,722	\$	420	\$	385	\$	31,234	32%	
Essential Community Living Support	\$	4,013,200	\$	386,366	\$	407,064	\$	3,666,264	91%	
Services	т.	.,.,.,	•	555,555	Ψ.	10.,001	Ψ	0,000,20	01,0	
Other Congregate Services	\$	2,500,000	\$	239,588	\$	190,661	\$	2,089,971	84%	
Administration	\$	1,500,000	\$	130,771	\$	169,403.49	\$	1,304,208	87%	
County Provided Case Mangement	\$	212,600	\$	14,162	\$	28,703.18	\$	194,483	91%	
Total Expenditures	\$	18,625,322	\$	1,375,450	\$	1,457,819	\$	12,159,622	65%	

Ending Cash Balance 4/30/2020 \$ 8,616,977

May 202		
5/5/2020	\$222,194.11	
5/12/2020	\$274,736.73	
5/14/2020	\$19,453.27	Insurance
5/19/2020	\$1,334,464.37	
TOTAL	\$1,850,848.48	

Fund 8500 Health Reimbursement Account YTD (5/15/2020)	I	Revenue
Employer Contributions	\$	262,478
Employee Contributions	\$	30,622
Flex - Employee Contributions	\$	6,426
	\$	299,525
	Ex	penditure
Health Insurance Pmts (ISAC)	\$	218,738
Medical Claims Pmts (Auxiant)	\$	27,699
Flex Claims (Auxlant)	\$	1,665
	\$	248,102
BALANCE	\$	51,423

Year-to-Date Per Capita Annualized Expenditure Rate:

31.87

¹ Non-Medicaid funded individuals needing sub-acute

² More social support access than we had anticipated

County Social Services Exception to Policy and Reconsiderations - February 2020

Clients	Service	Decision	Impact
1	Community Based Settings- Other	Waiting for waiver funding, member was private pay and exhausted personal funds.	\$ 4,324.40
2	Day Hab & Transportation	Member's waiver doesn't fund for these services, just respite, needs day hab, otherwise isolates.	\$ 827.31
3	Basic Needs - Rent Payments	Member needs assistance to prevent eviction.	\$ 50.00
4	Homemaker/Home Health Aid	Gap funding until waiver starts funding, applied 6-2018, no slot yet.	\$ 200.00
5	Voc/Day - Supported Employment Services	Funding to allow time for case worker to secure documents needed for eligibility.	\$ 361.58
6	Residential Care Facility	Current waiver does not fully fund, is on another waiver waiting list that will fund, case manager was asked to pursue HAB funding as an option.	\$ 3,884.30
7	Day Habilitation	The plan is to build physical stamina & reliability for pre-voc services then decrease or replace day hab funding (current waiver does not fund day hab).	\$ 1,100.00
8	Medication Pass	Integrated Health Home case manager directed to work with the MCO to get this service funded.	\$ 649.14
9	Day Hab & Supported Community Living	Current waiver does not fully fund, is on another waiver waiting list that will fund, CSS funds remainder after current waiver pays.	\$ 8,188.41
10	Basic Needs - Rent Payments	The member was living in a camper, warm and safe housing was needed.	\$ 500.00
1 1	Medication Pass	Integrated Health Home case manager directed to work with the MCO to get this service funded.	\$ 649.14
12	Basic Needs - Maintenance Rate	Member needs assistance to transition from incarceration to community, once SSI benefit is reinstated CSS funding will end.	\$ 360.50
13	Guardian/Conservator	Member refuses to see a doctor or psychiatrist on a regular basis but the service is needed.	\$ 150.00
14	Medication Pass	Integrated Health Home case manager directed to work with the MCO to get this service funded.	\$ 649.14
15	Supported Community Living - Home based	Gap funding until waiver starts funding, MCO funding possibly starting soon.	\$ 1,020.00
16	Medication Pass	Integrated Health Home case manager directed to work with the MCO to get this service funded.	\$ 376.92
17	Medication Pass	Integrated Health Home case manager directed to work with the MCO to get this service funded.	\$ 1,298.28
18	Supported Community Living	Gap funding until waiver starts funding.	\$ 1,330.80
19	Supported Community Living	Member is now living in a nursing home, CSS policy does not allow SCL for nursing home residents. Funding was denied, family appealed, CSS is allowing funding through June 2020 to allow time for member to transition from these services.	\$ 222.72

Approximate monthly impact: \$ 26,142.64

County Social Services Exception to Policy and Reconsiderations - March 2020

Clinata	Camida	D. A.L.		
Clients 1	Service Guardian/Conservator	Decision Member refuses to see a doctor or psychiatrist on a regular basis but the service is needed.	\$	150.00
2	Homemaker/Home Health Aid	Gap funding until waiver starts funding, applied 6-2018, no slot yet.	\$	200.00
3	Day Habilitation	The plan is to build physical stamina & reliability for pre-voc services then decrease or replace day hab funding (current waiver does not fund day hab).	\$	1,100.00
4	Day Hab & Transportation	Member's waiver doesn't fund for these services, just respite, needs day hab, otherwise isolates.	\$	827.31
5	Residential Care Facility	Current waiver does not fully fund, is on another waiver waiting list that will fund, case manager was asked to pursue HAB funding as an option.	\$	3,884.30
6	Medication Pass	Integrated Health Home case manager directed to work with the MCO to get this service funded.	\$	649.14
7	Medication Pass	Integrated Health Home case manager directed to work with the MCO to get this service funded.	\$	649.14
8	Medication Pass	Integrated Health Home case manager directed to work with the MCO to get this service funded.	\$	649.14
9	Medication Pass	Integrated Health Home case manager directed to work with the MCO to get this service funded.	\$	376.92
10	Medication Pass	Integrated Health Home case manager directed to work with the MCO to get this service funded.	\$	1,298.28
11	Basic Needs - Rent Payments	The member was living in a camper, warm and safe housing was needed.	\$	500.00
12	Community Based Settings- Other	Waiting for waiver funding, member was private pay and exhausted personal funds.	\$	4,324.40
13	Day Hab & Supported Community Living	Current waiver does not fully fund, is on another waiver waiting list, CSS funds remainder after current waiver pays.	\$	8,188.41
14	Supported Employment Services	CSS waived member's client participation fee for March. Member obtained employment, those wages combined with SS benefit places member over income guidelines for March. Service Coordinator will acquire a copy of member's SS benefit statement supporting this decision.	\$	155.00
15	Supported Community Living Services	Provider wouldn't release diagnosis but medication was prescribed. Member is transferring to a new provider, diagnosis will be secured once available.	\$	765.00
16	Supported Employment Services	Member's family finances and circumstances changed, waived copay to allow service coordinator time to update member's application.	\$	177.00
17	Basic Needs - Rent Payments	Member received notice of non-renewal for current lease and must move to another rental. CSS assisting with one month of rental assistance, member is paying the deposit and moving expenses.	\$	355.00
18	Basic Needs - Rent Payments and Supported Community Living	The member needed one-time assistance with the first month of rent payment, \$554. The supported community living service is needed to aide member in transition from the RCF to independent living, \$445.44	\$	999.44
19	Emergency Housing	Shelter until job starts and income is verified by landlord for apartment.	\$	847.88
20 21	Supported Community Living Supported Community Living	Gap funding until waiver starts funding. Member is now living in a nursing home, CSS policy does not allow SCL for nursing home residents. Funding was denied, family appealed, CSS is allowing funding through June 2020 to allow time for member to transition from these services.	\$ \$	1,330.80 222.72

County Social Services Exception to Policy and Reconsiderations - April 2020

Clients	Service	Decision	Impact
1	Guardian/Conservator	Member refuses to see a doctor or psychiatrist on a regular basis but the service is needed.	\$ 150.00
2	Basic Needs - Rent Payments	Member at risk losing her safe housing due to her diagnosis.	\$ 450.00
3	Community Based Settings- Other	ETP awaiting waiver funding, member was private pay and exhausted personal funds.	\$ 4,324.40
4	Day Habilitation	The plan is to build physical stamina & reliability for pre-voc services then decrease or replace day hab funding (current waiver does not fund day hab).	\$ 1,100.00
5	Supported Community Living	This service is needed to aide member in transition from the RCF to independent living.	\$ 445.44
6	Medication	Member did not have the money to pay medication copay.	\$ 23.40
7	Supported Employment Services	CSS waived member's copay. Member obtained employment, those	\$ 155.00
		wages combined with SS benefit places member over income guidelines. Service Coordinator will acquire a copy of member's SS benefit statement supporting this decision.	
8	Day Hab & Supported Community Living	Current waiver does not fully fund, is on another waiver waiting list that will fund, CSS funds remainder after current waiver pays.	\$ 8,188.41
9	Basic Needs - Rent Payments	Received notice of non-renewal of lease and had to move. CSS assisted with one month rent.	\$ 355.00
10	Emergency Housing	Apartment on hold due to needing to provide income verification and employment for a new job not finalized.	\$ 1,143.30
11	Supported Employment Services	Member's family finances and circumstances changed, waived copay to allow service coordinator time to update member's application.	\$ 177.00
12	Transportation - Bus Ticket, Transportation to the Bus Station, Crisis Stabilization	Out-of-state individual that was homeless in the CSS region and needed temporary services and then CSS funded a bus ticket to where the member's family lives and where the member will be safe.	\$ 5,305.16
13	Supported Community Living	Gap funding until waiver starts funding.	\$ 1,330.80
14	Supported Community Living	Member is now living in a nursing home, CSS policy does not allow SCL for nursing home residents. Funding was denied, family appealed, CSS is allowing funding through June 2020 to allow time for member to transition from these services.	222.72
15	Medication Pass	Integrated Health Home case manager directed to work with the MCO to get this service funded.	\$ 649.14
16	Medication Pass	Integrated Health Home case manager directed to work with the MCO to get this service funded.	\$ 649.14
17	Medication Pass	Integrated Health Home case manager directed to work with the MCO to get this service funded.	\$ 649.14
18	Medication Pass	Integrated Health Home case manager directed to work with the MCO to get this service funded.	\$ 1,298.28
19	Medication Pass	-	\$ 376.92

Approximate monthly impact: \$ 26,993.25



FY21 ANNUAL SERVICE & BUDGET PLAN

SUBMITTED 4/23/2020

GEOGRAPHIC AREA: Allamakee, Butler, Black Hawk, Cerro Gordo, Chickasaw, Clayton, Emmet, Fayette, Floyd, Grundy, Hancock, Howard, Humboldt, Mitchell, Pocahontas, Tama, Webster, Winneshiek, and Wright.

APPROVED BY ADVISORY BOARD: 4/22/2020
APPROVED BY GOVERNING BOARD: 4/23/2020

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Introduction

County Social Services was formed under Iowa Code Chapter 28E to create a Mental Health and Disability Service (MHDS) Region in compliance with Iowa Code 331.390. The annual service and budget plan is a component of the Management Plan which includes three parts: Annual Service and Budget Plan, Annual Report and Policies and Procedures Manual in compliance with Iowa Administrative Code 441.25.

The FY2021 Annual Service and Budget Plan covers the period of July 1, 2020 to June 30, 2021. The Annual Service and Budget Plan includes local access points, targeted case management providers, crisis services, intensive mental health services, a description of the scope of services to be provided including core services, budget and financial provisions, and provider reimbursement provisions.

County Social Services will begin FY2021 with 19 member counties. Kossuth, Winnebago and Worth Counties will transition into an adjoining MHDS region as of 7/1/2020.

The Annual Service and Budget Plan has been approved by the County Social Services Executive Committee on April 23, 2020 (CSS Governing Board approved this on 3/25/20), will be reviewed at the May 27 board meeting, and is subject to approval by the Director of Human Services. The CSS Plan is available in each local CSS office, and on the CSS (www.countysocialservices.org) and DHS websites.

The current membership of the FY2021 County Social Services Governing Board, formed in accordance with lowa Code 331.390, may be found in the appendix. The Children's Behavioral Health Advisory Committee membership is also included in the appendix. County Social Services, due to the geographical size, has formed Advisory Committees in our local service areas for adult and children's services. These groups are also listed in the appendix.

A. Local Access Points

An access point is a part of the County Social Services Regional service system trained to complete MHDS regional applications for persons with a disability.

County Social Services has designated the following access points for mental health and disability services, as well as for children's behavioral health services.

Access Point	Location	Contact Information
CSS 24/7 Support Line	N/A	855-266-1257
County Social Services Local County Of	fices	
Allamakee County	110 Allamakee Street Waukon, IA 52172	563-568-6227
Black Hawk County	1407 Independence Ave. Waterloo, IA 50703	319-292-2272
Butler County	315 N. Main Street Allison, IA 50602	319-267-2663
Cerro Gordo County	525 9 th Street SE Mason City, IA 50401	641-210-7015
Chickasaw County	114 N. Vine Street West Union, IA 52175	563-422-5047

Clayton County	514 South River Park Dr.	563-252-3215
	Guttenberg, IA 52052	
Emmet County	609 1st Ave N, Ste. 5	712-362-2452
	Estherville, IA 51334	
Fayette County	114 N. Vine Street	563-422-5047
	West Union, IA 52175	
Floyd County	1206 S. Main St., Ste D	641-257-6363
<u>.</u>	Charles City, IA 50616	
Grundy County	706 H Avenue, Suite 1	319-824-6779
	Grundy Center, IA 50638	
Hancock County	545 State St., Suite 1	641-590-2340
	Garner, IA 50438	
Howard County	205 2nd Street E	563-547-9207
	Cresco, IA 52136	
Humboldt County	203 Main Street	515-332-5205
	Dakota City, IA 50529	
Mitchell County	415 Pleasant Street	641-832-2615
,	Osage, IA 50461	
Pocahontas County	23 3rd Ave NE	712-335-3269
,	Pocahontas, IA 50574	
Tama County	211 W. State Street	641-484-4191
	Toledo, IA 52342	0121011222
Webster County	308 Central Ave.	515-573-1485
Webster county	Fort Dodge, IA 50501	313-373-1463
Winneshiek County	607 Washington St.	855-266-1257
withesinek county	Decorah, IA 52101	855-200-1257
Wright County	120 1st Ave NW	E1E E22 2200
wright County	•	515-532-3309
Manufacian de Manufacia de Companya de Com	Clarion, IA 50525	
Designated Mental Health Center Access Points		000 000 400
Black Hawk-Grundy Mental Health Center	3251 West 9th St.	800-583-1526
	Waterloo, IA 50702	
Center Associates	1309 S. Broadway	800-896-2055
	Toledo, IA 52342	
Northeast Iowa Behavioral Health	905 Montgomery St.	800-400-8923
	Decorah, IA 52101	
Pathways Behavioral Services	111 10th St. SW	800-879-1372
	Waverly, IA 50677-0114	
Prairie Ridge Integrated Behavioral	32 N. Eisenhower Ave	866-429-2391
	Mason City, IA 50401	
Seasons Center for Behavioral Health	201 E. 11th Street	800-242-5101
	Spencer, IA 51301	
UnityPoint Health – Berryhill Center	720 S. Kenyon Rd.	800-482-8305
	Fort Dodge, IA 50501	

B. Service Coordination and Targeted Case Management

The following agencies provide service coordination and/or targeted case management for County Social Services.

Service Coordination Provider	Adult/Child/Both	Location	Contact Information
County Social Services Integrated Care Management	Both	Entire CSS region – see access points above	855-266-1257
County Social Services Strength Based Case Management	Both	Entire CSS region – see access points above	855-266-1257
DHS Targeted Case Management	Both	Statewide	515-281-7163

C. Crisis Planning

Sound crisis planning begins with prevention and community education. County Social Services continues to support and/or host prevention and education initiatives within the region. Support is offered to our local NAMI organizations, as well as NAMI lowa, making NAMI Basics, Family-to-Family, Peer-to-Peer and teacher training classes available in the region. Both Youth and Adult Mental Health First Aid (MHFA) classes continue to be hosted and taught by County Social Services' certified trainer. Local counties and organizations within our communities find value in the region providing this training. The CSS I-START team continues to host monthly Clinical Education Team trainings, which remain free and open to the public. Attendees explore ways to enhance the service system's ability to support individuals with complex needs with understanding treatment options and intervention techniques. I-START also hosts national START trainings via web-based technology, which are also free and open to the public. Each year County Social Services provides stipends for individuals to attend the annual lowa Empowerment Conference. The region will collaborate with provider and advocacy agencies, Area Education Agencies and school districts to make children's behavioral health prevention and education activities available at least quarterly.

The following accredited crisis services are available to residents of the region for crisis prevention, response and resolution.

24 Hour Crisis Response

Provider	Location	Contact Information
Black Hawk-Grundy Mental Health Center	Waterloo, IA	800-583-1526
Center Associates	Tama, IA	800-896-2055
Northeast Iowa Behavioral Health	Decorah, IA	800-400-8923
Pathways Behavioral Services	Waverly, IA	800-879-1372
Prairie Ridge Integrated Behavioral Healthcare	Mason City, IA	866-429-2391
Seasons Center for Community Mental Health	Spencer, IA	800-242-5101
Unity Point - Berryhill Center	Fort Dodge, IA	800-482-8305

County Social Services I-START also has its own 24-hour crisis response line for I-START clients and team members. Although not currently accredited by Chapter 24, 24-hour crisis response is a necessary part of our program in order to gain national START program certification, which is slated to happen in 2020.

24 Hour Crisis Hotline

Provider	Location	Contact Information
Seasons Center for Community Mental Health	Spencer, IA	800-242-5101
YourLifelowa	https://yourlifeiowa.org/	855-581-8111

Crisis Evaluation

Provider	Adult/Child/Both	Location	Contact Information
Integrated Telehealth Partners	Both	Local E.D.s through telehealth	855-270-3625
Seasons Center for Community Mental Health	Both	Spencer, IA	800-242-5101

Mobile Response

Provider	Location	Contact Information
Seasons Center for Community Mental Health	Spencer, IA	800-242-5101

UnityPoint-Berryhill Center in Fort Dodge has also launched the ramp-up of Mobile Response for Humboldt, Kossuth, Pocahontas, Webster and Wright Counties and current plans are to begin services in Webster County on July 1, 2020 and August 1, 2020 in the remaining counties.

The Black Hawk County Sheriff started a discussion with the region regarding the Sheriff providing Mobile Response to our south service area (Black Hawk, Butler, Grundy and Tama Counties). This discussion will continue after the need for continuous attention to the COVID-19 response subsides. This model would most likely involve partner agencies with qualified staff in order to meet accreditation standards and a path to access Medicaid funding.

Crisis Stabilization Community-based Services

Provider	Adult/Child	Location	Contact Information
None currently available			

UnityPoint-Berryhill's Mobile Response, when fully implemented, will be able to remain with a person in their home, or place of response, to provide this service.

Crisis Stabilization Residential Services

Provider	Adult/Child	Location	Contact Information
Adult Crisis Stabilization Center	Adult	Waterloo, IA	319-291-2455
43 North Iowa (accreditation in progress)	Adult	Mason City, IA	641-424-4124

Community & Family Resources in Fort Dodge also provides region-funded crisis de-escalation services; however, this provider is not eligible for accreditation due to the facility size. Youth Crisis Transition has been launched at three of our region's youth shelters: Lutheran Services in Iowa in Waverly, Youth & Shelter Services in Mason City and Youth Shelter Care of North Central Iowa in Fort Dodge. We will work with them on the accreditation process for Crisis Stabilization Residential Services so it is complete by July 1, 2021. Prairie View Management in Fayette, IA is also in the early stages of transitioning their model to include adult crisis stabilization residential in the first half of FY2021.

23-Hour Observation

Provider	Location	Contact Information
None currently available		

We continue conversations with providers regarding 23-hour observation and will have this service available by July 1, 2021.

County Social Services utilizes providers in neighboring regions for crisis services, as well, and reimburse the providers according to the host region contract. We will continue to develop a strong network of crisis services so they are available throughout the region.

D. Intensive Mental Health Services

The region has designated the following provider as an **Access Center**. Although currently not meeting all requirements according to IAC 441—25.6(1) in a coordinated manner in one or more locations to be designated at the state-level, the July 1, 2021 deadline for the state designation is attainable. County Social Services is also actively working with providers in Fort Dodge and Fayette for Access Center designation by July 1, 2021.

Provider	Location	Contact Information
North Iowa Elite Mental Health Services	Waterloo, IA	319-291-2455

The region has designated the following **Assertive Community Treatment (ACT)** teams which have been designated and meet the requirements in IAC 441—25.6(2). Prairie View Management, Inc. in Fayette, IA will also launch an ACT Team prior to July 1, 2021.

Provider	Location	Contact Information
Resources for Human Development	Waterloo, IA	319-229-5030
Unity Point-Berryhill Center	Fort Dodge, IA	800-482-8305
Seasons Center for Community Mental Health	Spencer, IA	800-242-5101

The region has designated the following **Subacute** service providers which meet the criteria and are licensed by the Department of Inspections and Appeals. Prairie View Management, Inc. in Fayette, IA is also actively working on a subacute designation. The target date for this service availability is currently July 1, 2020; however, the COVID-19 pandemic may delay this. The region is also actively working with providers in Fort Dodge to develop subacute services in the west service area by July 1, 2021.

Provider	Location	Contact Information	
North Iowa Elite Mental Health Services	Waterloo, IA	319-291-2455	

The region has designated the following **Intensive Residential Service** providers which have been designated and meet the requirements in IAC 441—25.6(8):

Provider	Location	Contact Information
None currently available		

The region currently has no designated **Intensive Residential Service** providers which have been designated and meet the requirements in IAC 441—25.6(8). However, Prairie View Management, Inc. in Fayette, IA is actively working to provide this service and does already meet many of the requirements. We will have this service available by July 1, 2021.

County Social Services' I-START program is an integral part of the array of services in both the Crisis and Intensive Mental Health Services areas. Our I-START team, using a person-centered, solutions-focused approach, provides a community-based crisis intervention system for individuals with intellectual/developmental disabilities and co-occurring behavioral health needs. I-START supports the work of the local provider and the family/natural support system with a systems of care approach and cross systems crisis prevention and intervention planning. Involvement in I-START optimizes independence, wellness and community living for individuals. START is a national evidence-informed model currently operational in three regions in Iowa.

E. Scope of Services & Budget and Financing Provisions

The table below identifies the scope of services offered by County Social Services. All core services are available. If there is not funding identified in a core service column, it is because it has not been needed historically. If an individual needs funding for a core service and meets eligibility requirements found in Section F of the County Social Services Policy and Procedures Manual, funding will be made available. Core services for children's behavioral health are identified by (**) after the service name. Eligibility guidelines for children's behavioral health services are also located in Section F of the County Social Services Policy and Procedure Manual. The Policy and Procedures Manual can be found online at: https://www.countysocialservices.org/index.php/programs/disability. The Policies and Procedures Manual will be updated with the most current version, including additions for children's behavioral health services, as soon as it is approved by the MHDS Commission.

The region will utilize braided funding that includes county, regional, state and other funding sources as necessary and available to meet the service needs within the region.

In FY2021, County Social Services will allow an eligible individual's resources to exceed the resource guidelines set forth in lowa Code. We will allow resources up to \$12,000 for an individual and \$13,000 for a multi-person household, which match the current resource limitations for the lowa Medicaid for Employed Persons with Disabilities program. Iowa Code 331.393 subsection 2.h. states: The financial eligibility requirements for services under the regional service system. A plan that otherwise incorporates the financial eligibility requirements of section 331.395 but allows eligibility for persons with resources above the minimum resource limitations adopted pursuant to section 331.395 subsection 1, paragraph "c", who were eligible under resource limitations in effect prior to July 1, 2014, or are authorized by the region as an exception to policy, shall be deemed by the department to be in compliance with financial eligibility requirements of section 331.395.

Table A. Expenditures

FY 2021 Budget	County Social Services MHDS Region	MI (40)	ID(42)	DD(43)	BI (47)	Admin (44)	Total
	en e						
Core Domain				1			
COA	Treatment						
42305	Mental health outpatient therapy **	\$320,000	\$2,500	\$2,500	\$0		\$325,000
42306	Medication prescribing & management **	\$220,000	\$0	\$0	\$0		\$220,000
43301	Assessment, evaluation, and early identification **	\$40,000	\$0	\$0	\$0		\$40,000
71319	Mental health inpatient therapy-MHI	\$275,000	\$25,000	\$0	\$0		\$300,000
73319	Mental health inpatient therapy **	\$10,000	\$0	\$0	\$0		\$10,000
	Crisis Services						
32322	Personal emergency response system	\$500	\$0	\$0	\$0	4 4 4	\$500
44301	Crisis evaluation	\$165,000	\$5,000	\$5,000	\$0		\$175,000
44302	23 hour crisis observation & holding	\$10,000	\$0	\$0	\$0	e Parella	\$10,000
44305	24 hour access to crisis response	\$30,000	\$0	\$0	\$0	1.6	\$30,000
44307	Mobile response **	\$700,000	\$30,000	\$10,000	\$10,000		\$750,000
44312	Crisis Stabilization community-based services **	\$15,000	\$5,000	\$0	\$0		\$20,000
443 1 3	Crisis Stabilization residential services **	\$700,000	\$60,000	\$20,000	\$0		\$780,000
44396	Access Centers: start-up / sustainability	\$2,000,000	\$0	\$0	\$0		\$2,000,000
	Support for Community Living						
32320	Home health aide	\$1,000	\$500	\$500	\$0		\$2,000
32325	Respite	\$15,000	\$2,500	\$2,500	\$0		\$20,000
32328	Home & vehicle modifications	\$0	\$0	\$0	\$0		\$0
32329	Supported community living	\$1,500,000	\$200,000	\$150,000	\$50,000		\$1,900,000
42329	Intensive residential services	\$0	\$0	\$0	\$0		\$0
	Support for Employment						
50362	Prevocational services	\$5,000	\$20,000	\$2,500	\$2,500		\$30,000
50364	Job development	\$9,500	\$0	\$500	\$0		\$10,000

50367	Day habilitation	\$50,000	\$150,000	\$15,000	\$10,000		\$225,000
50368	Supported employment	\$20,000	\$85,000	\$50,000	\$0		\$155,000
50369	Group Supported employment-enclave	\$5,000	\$20,000	\$20,000	\$5,000	111	\$50,000
	Recovery Services						
45323	Family support	\$5,000	\$0	\$0	\$0		\$5,000
45366	Peer support	\$100,000	\$0	\$0	\$0		\$100,000
	Service Coordination						
21375	Case management	\$0	\$0	\$0	\$0		\$0
24376	Health homes	\$5,000	\$0	\$0	\$0		\$5,000
	Sub-Acute Services						
63309	Subacute services-1-5 beds	\$0	\$0	\$0	\$0	100	\$0
64309	Subacute services-6 and over beds	\$240,000	\$0	\$0	\$0	12.0	\$240,000
	Core Evidenced Based Treatment						
04422	Education & Training Services - provider competency	\$5,000	\$0	\$0	\$0		\$5,000
32396	Supported housing	\$5,000	\$0	\$0	\$0		\$5,000
42398	Assertive community treatment (ACT)	\$850,000	\$0	\$0	\$0		\$850,000
45373	Family psychoeducation	\$5,000	\$0	\$0	\$0		\$5,000
	Core Domains Total	\$7,306,000	\$605,500	\$278,500	\$77,500		\$8,267,500
Mandated Se	ervices	Surveyor to come	a de sales a				
46319	Oakdale	\$20,000	\$0	\$0	\$0		\$20,000
72319	State resource centers	\$0	\$0	\$0	\$0		\$0
74XXX	Commitment related (except 301)	\$430,000	\$6,000	\$2,000	\$2,000	100	\$440,000
75XXX	Mental health advocate	\$440,000	\$6,000	\$2,000	\$2,000	1.1.175.00	\$450,000
	Mandated Services Total	\$890,000	\$12,000	\$4,000	\$4,000		\$910,000
Additional Co	ore Domains						
C. (224, 30, 488, 488, 488, 488, 488, 488, 488, 48	Justice system-involved services		THE RESERVE OF THE PARTY OF THE		TO ME AN AND PROPERTY OF THE PARTY OF		
25xxx	Coordination services	\$120,000	\$3,000	\$2,000	\$0		\$125,000
44346	24 hour crisis line*	\$0	\$0	\$0	\$0		\$0
44366	Warm line*	\$0	. \$0	\$0	\$0		\$0
46305	Mental health services in jails	\$245,000	\$5,000	\$5,000	\$0		\$255,000
46399	Justice system-involved services-other	\$0	\$0	\$0	\$0		\$0
46422	Crisis prevention training	\$20,000	\$0	\$0	\$0		\$20,000
46425	Mental health court related costs	\$0	\$0	\$0	\$0		\$0
74301	Civil commitment prescreening evaluation	\$10,000	\$0	\$0	\$0		\$10,000
	Additional Core Evidenced based treatment						_
42366	Peer self-help drop-in centers	\$250,000	\$0	\$0	\$0		\$250,000
42397	Psychiatric rehabilitation (IPR)	\$0	\$0	\$0	\$0		\$0
	Additional Core Domains Total	\$645,000	\$8,000	\$7,000	\$0		\$660,000
					49.8		re e
Other Inform	national Services		建设设施的设施的。2007	A TOTAL SERVICE AND A SERVICE		the Programme on the State of the Con-	
Other Inform 03371	Information & referral	\$7,000	\$1,000	\$1,000	\$1,000		\$10,000
		\$7,000 \$10,000	\$1,000 \$0	\$1,000 \$0	\$1,000 \$0		\$10,000 \$10,000

04399	Consultation Other	\$0	\$0	\$0	\$0		\$0
04429	Planning and Management Consultants (non-client related)	\$15,000	\$0	\$0	\$0		\$15,000
05373	Public education, prevention and education **	\$35,000	\$5,000	\$5,000	\$5,000		\$50,000
	Other Informational Services Total	\$67,000	\$6,000	\$6,000	\$6,000		\$85,000
Community L	iving Supports						
06399	Academic services	\$0	\$0	\$0	\$0		\$0
22XXX	Services management	\$1,710,000	\$80,000	\$80,000	\$50,000		\$1,920,000
23376	Crisis care coordination	\$75,000	\$5,000	\$5,000	\$5,000	4.4	\$90,000
23399	Crisis care coordination other	\$0	\$0	\$0	\$0		\$0
24399	Health home other	\$0	\$0	\$0	\$0		\$0
31XXX	Transportation	\$100,000	\$60,000	\$60,000	\$5,000		\$225,000
32321	Chore services	\$0	\$0	\$0	\$0		\$0
32326	Guardian/conservator	\$25,000	\$90,000	\$3,000	\$2,000		\$120,000
32327	Representative payee	\$70,000	\$5,000	\$5,000	\$3,000		\$83,000
32335	CDAC	\$7,000	\$0	\$0	\$0		\$7,000
32399	Other support	\$0	\$0	\$0	\$0		\$0
33330	Mobile meals	\$0	\$0	\$0	\$0		\$0
33340	Rent payments (time limited)	\$70,000	\$5,000	\$5,000	\$5,000		\$85,000
33345	Ongoing rent subsidy	\$120,000	\$0	\$0	\$0		\$120,000
33399	Other basic needs	\$135,000	\$0	\$0	\$0		\$135,000
41305	Physiological outpatient treatment	\$5,000	\$0	\$0	\$0		\$5,000
41306	Prescription meds	\$15,000	\$0	\$0	\$0		\$15,000
41307	In-home nursing	\$10,000	\$5,000	\$5,000	\$0		\$20,000
41308	Health supplies	\$0	\$0	\$0	\$0		\$0
41399	Other physiological treatment	\$0	\$0	\$0	\$0		\$0
42309	Partial hospitalization	\$0	\$0	\$0	\$0		\$0
42310	Transitional living program	\$0	\$0	\$0	\$0		\$0
42363	Day treatment	\$0	\$0	\$0	\$0		\$0
42396	Community support programs	\$50,000	\$0	\$0	\$0		\$50,000
42399	Other psychotherapeutic treatment	\$10,000	\$0	\$0	\$0		\$10,000
43399	Other non-crisis evaluation	\$0	\$0	\$0	\$0		\$0
44304	Emergency care	\$0	\$0	\$0	\$0		\$0
44399	Other crisis services	\$0	\$0	\$0	\$0	4 1 2 4	\$0
45399	Other family & peer support	\$0	\$0	\$0	\$0		\$0
46306	Psychiatric medications in jail	\$50,000	\$0	\$0	\$0		\$50,000
50361	Vocational skills training	\$0	\$0	\$0	\$0		\$0
50365	Supported education	\$0	\$0	\$0	\$0		\$0
50399	Other vocational & day services	\$0	\$0	\$0	\$0	1000	\$0
63XXX	RCF 1-5 beds (63314, 63315 & 63316)	\$0	\$0	\$0	\$0		\$0
63XXX	ICF 1-5 beds (63317 & 63318)	\$0	\$0	\$0	\$0		\$0
63329	SCL 1-5 beds	\$0	\$0	\$0	\$0		\$0
63399	Other 1-5 beds	\$10,000	\$0	\$0	\$0		\$10,000
	Community Living Supports	\$2,462,000	\$250,000				\$2,945,000

Other Cangr	igate Services			800.00	GBC - Service		
50360	Work services (work activity/sheltered work)	\$0	\$0	\$0	\$0		\$0
64XXX	RCF 6 and over beds (64314, 64315 & 64316)	\$1,425,000	\$25,000	\$25,000	\$25,000		\$1,500,000
64XXX	ICF 6 and over beds (64317 & 64318)	\$0	\$0	\$0	\$0		\$0
64329	SCL 6 and over beds	\$125,000	\$50,000	\$0	\$0	* 1	\$175,000
64399	Other 6 and over beds	\$35,000	\$0	\$0	\$0		\$35,000
	Other Congregate Services Total	\$1,585,000	\$75,000	\$25,000	\$25,000		\$1,710,000
Administrati	on.				100		
11XXX	Direct Administration					\$1,520,000	\$1,520,000
12XXX	Purchased Administration					\$205,000	\$205,000
	Administration Total	1912 September 18	Contract &			\$1,725,000	\$1,725,000
			Elitary Production				
	Regional Totals	\$12,955,000	\$956,500	\$483,500	\$182,500	\$1,725,000	\$16,302,500
		'	•	,	•		
(45XX-XXX)C	ounty Provided Case Management					\$205,500	\$205,500
(46XX-XXX)C	ounty Provided Services (I-START)					\$1,135,500	\$1,135,500
		agent and the control of the control				•	•
-	Regional Grand Total				1 SAN 2 A		\$17,643,500

^{*24} hour crisis line and warm line are transitioning from additional core to state wide core services with state funding.

Table B. Revenues

FY 2021 Budget	County Social Services MHDS Region		
Revenues *			
	Projected Fund Balance as of 6/30/20		\$ 12,368,731
	Less Fund Balance Allocation to 3 Counties Exiting Region		\$ (671,275)
	Local/Regional Funds		\$ 12,817,515
10XX	Property Tax Levied	\$11,710,659	
12XX	Other County Taxes	\$13,403	
16XX	Utility Tax Replacement Excise Taxes	\$382,453	100
25XX	Other Governmental Revenues	\$307,200	
4XXX-5XXX	Charges for Services	\$112,000	
5310	Client Fees	\$0	
60XX	Interest	\$40,000	
6XXX	Use of Money & Property	\$1,800	
8XXX	Miscellaneous	\$250,000	
9040	Other Budgetary Funds (Polk Only)	\$0	
		\$0	
	State Funds		\$900,635
21XX	State Tax Credits	\$668,235	
22XX	Other State Replacement Credits	\$231,455	
2250	MHDS Equalization	\$0	

^{**}Core services for children with a serious emotional disturbance (SED)

24XX	State/Federal pass thru Revenue	\$0	
2644	MHDS Allowed Growth / State Gen. Funds	\$0	
29XX	Payment in Lieu of taxes	\$945	
		\$0	
	Federal Funds		\$205,500
2344	Social services block grant	\$0	
2345	Medicaid	\$205,500	
	Other	\$0	
	Total Revenues	4	\$13,923,650

Total Funds Available for FY21	\$25,621,106
FY21 Projected Regional Expenditures	\$17,643,500
Projected Accrual Fund Balance as of 6/30/21	\$7,977,606

Table E. County Levies

County	2018 Est. Pop.	Regional Per Capita	FY21 Max Levy	FY21 Actual Levy	Actual Levy Per Capita
Allamakee	13,832	43.65	603,767	414,960	30.00
Black Hawk	132,408	43.65	5,779,609	3,972,240	30.00
Butler	14,539	43.65	634,627	436,170	30.00
Cerro Gordo	42,647	43.65	1,861,542	1,279,410	30,00
Chickasaw	11,964	43.65	522,229	358,920	30.00
Clayton	17,556	43.65	766,319	526,680	30.00
Emmet	9,253	43.65	403,893	277,590	30.00
Fayette	19,660	43.65	858,159	589,800	30,00
Floyd	15,761	43.65	687,968	472,830	30,00
Grundy	12,304	43.65	537,070	369,120	30.00
Hancock	10,712	43.65	467,579	321,360	30,00
Howard	9,187	43.65	401,013	275,610	30,00
Humboldt	9,547	43.65	416,727	286,410	30.00
Mitchell	10,569	43.65	461,337	317,070	30:00
Pocahontas	6,740	43.65	294,201	202,200	30.00
Tama	16,904	43.65	737,860	507,120	30,00
Webster	36,277	43.65	1,583,491	1,088,310	30.00
Winneshiek	20,029	43.65	874,266	600,870	30.00
Wright	12,690	43.65	553,919	380,700	30,00
Total CSS Region	422,579		18,445,573	12,677,370	30.00

G. Financial Forecasting Measures

The following is a description of the financial forecasting measures used by County Social Services in the identification of service need and funding necessary for services.

Historical service utilization is the starting point for all financial projections and was utilized when developing the current budget. Throughout the year, CSS staff and stakeholders identify unmet needs and areas for service development. This budget was developed using our property tax levy revenue as the guideline. We continually assess community needs and may reallocate funds within the budget as needed to areas of unmet need.

Always keeping our mission of increasing community inclusion and capacity through nurturing partnerships at the forefront, our November 2019 Annual CSS Stakeholder Meeting allowed plenty of time for collaboration and input among attendees regarding FY2021 priorities.

It was interesting to hear some of the top stakeholder priorities are not necessarily service delivery issues but involve structural and system issues within the region and statewide. The stakeholders felt strongly that CSS should partner with our providers to encourage rebasing of the Medicaid rates and suggest legislation to review rate adjustments annually. They also discussed interagency colllaboration at the local level so all agencies know what resources are available and what other agencies are doing. Along with that, consensus was that the region needs to invest in marketing so we have an informed community. Stakeholders also wondered why Medicaid will fund higher rates for out-of-state placements but won't fund those rates for in-state providers. Showing how forward-thinking this stakeholder group is, they asked how we can use technology to better serve people. Can Medicaid reimburse SCL support for telephonic/video support? Seeing where we are today, this question was very timely.

Stakeholders clearly prioritized children's services. The group was asked if CSS should push beyond the mandated services and the answer was yes. We should strive for prevention in our delivery and funding of children's services. Also a priority to stakeholders is an Access Center in the west service area of the region, which is being worked on. The comment also was made that there needs to be incentive for providers to serve complex individuals in order to meet the Intensive Residential Services requirement.

The final question posed to the group was, "If nothing else changes by this time next year, what is the one thing that needs to change?" Medicaid reimbursement was the top answer.

County Social Services will also budget for additional service development in the areas of Crisis Services and Intensive Mental Health Services in order to be in compliance by July 1, 2021. The addition of Children's Behavioral Services will impact this year's budget, as well. Although County Social Services currently funds outpatient and crisis stabilization residential services for children, as well as many other services in our matrix, the allocation of a staff position and the impact of a higher sliding fee income threshold will both add to our FY2021 budget. Crisis stabilization residential expenditures for children are expected to increase with the implementation of mobile crisis and more awareness of this service. We are budgeting approximately \$575,000 for Children's Behavioral Services in FY2021.

County Social Services strives to be responsible stewards of the taxpayer's finances, while at the same time be responsive to the needs of the mental health and disability service system. While our fund balance may be used for start-up funds for some needed projects, we keep in mind that ongoing region funding for services that should be funded by Medicaid is not sustainable. Region funding with the property tax revenue available continues to be for gaps in the current service system and needed services not reimbursed by Medicaid.

H. Provider Reimbursement Provisions

The following is a description of the types of funding used by County Social Services.

Fee for service:

County Social Services will contract with MHDS providers whose base of operation is within the region County Social Services may also honor contracts that other regions have with their local providers or may choose to contract with providers outside of the region. A contract may not be required with providers that provide one-time or as needed services. A fee for service approach will be utilized in most provider contracts outlining the services to be provided and the rate of reimbursement. All payments will be based on a pre-authorized request for service authorization with the exception of court ordered payments, such as civil commitment costs, and crisis services.

Block grant payments:

County Social Services utilizes block grant funding for activities not specified to one individual, but that benefit the population as a whole. Block grant funding is used for drop-in centers, matching dollars for the federal PATH grant for homeless outreach, judicial hospital referees, mental health reentry programs, etc.

- Compensation for a "system of care" approach:
 - A System of Care funding approach is used for services such as our CSS I-START services. Even though County Social Services employs the I-START staff, we apply a per member per month rate to each individual served. We also use this methodology to fund the psychiatric services in the Black Hawk County Jail, spreading the cost over the individuals served that month.
- Use of nontraditional providers:

When a non-traditional provider arrangement is more appropriate than a fee for service approach with a contracted provider, the service coordinator will request such arrangements. A non-traditional provider may be an individual, organization and/or business who delivers services in the consumer's home and/or other community setting. Non-traditional providers typically are individuals, organizations, or businesses which do not provide MHDS services as a part of their normal business. These services are not to provide treatment but are supportive and may be rehabilitative in focus, and are initiated when there is a reasonable likelihood that such services will benefit the consumer's functioning, assist them in maintaining community tenure, and act as an alternative way to achieve the consumer's stated goals or outcomes. A request can be made by any consumer, or the consumer's authorized representative, to utilize non-traditional providers for services as approved in the Regional Management Plan. Non-traditional providers may be subject to certain licensing, certification, accreditation or other state approval standards. County Social Services contracts with Veridian Fiscal Solutions to enroll members in region-funded Self-Directed Services. This service delivery model allows the individual to select a non-traditional provider of their choice and become the actual employer. Payroll is run through Veridian Fiscal Solutions.

Incorporation of all funding sources for individuals including Medicaid:
 The Region is responsible for ensuring that MHDS services are available to all residents of the region regardless of funding source. County Social Services will ensure that individuals apply for all funding sources prior to accessing regional funding, including private insurance, Medicaid, Medicare and other funding mechanisms which ensure that individuals and their families are able to optimally live, work, and recreate in integrated

communities of their choice.

Appendix A

County Social Services Board July 2020				
Name	Title	Representing		
Roy Schwickerath	Board Chair	Floyd County Board of Supervisors		
Craig White	Vice Chair	Black Hawk County Board of Supervisors		
Karl Helgevold	Secretary/Treasurer	Wright County Board of Supervisors		
Dennis Koenig	Board Member	Allamakee County Board of Supervisors		
Greg Barnett	Board Member	Butler County Board of Supervisors		
Chris Watts	Board Member	Cerro Gordo County Board of Supervisors		
Jacob Hackman	Board Member	Chickasaw County Board of Supervisors		
Sharon Keehner	Board Member	Clayton County Board of Supervisors		
John Pluth	Board Member	Emmet County Board of Supervisors		
Jeanine Tellin	Board Member	Fayette County Board of Supervisors		
Jim Ross	Board Member	Grundy County Board of Supervisors		
Gary Rayhons	Board Member	Hancock County Board of Supervisors		
Pat Murray	Board Member	Howard County Board of Supervisors		
Sandy Loney	Board Member	Humboldt County Board of Supervisors		
Barb Francis	Board Member	Mitchell County Board of Supervisors		
Clarence Siepker	Board Member	Pocahontas County Board of Supervisors		
Larry Vest	Board Member	Tama County Board of Supervisors		
Mark Campbell	Board Member	Webster County Board of Supervisors		
Floyd Ashbacher	Board Member	Winneshiek County Board of Supervisors		
Eric Donat	Board Member	Adult or Actively Involved Relative of Adult who utilizes MHDS		
June Klein-Bacon	Board Member	Parent or Actively Involved Relative of Child who Utilizes CBH		
Jamie Heard	Board Member	Regional Education System Representative		
	Non-voting Ex-Officio			
Marcia Oltrogge	Board Member	Regional MHDS Adult Service Provider		
Cody Williams	Non-voting Ex-Officio Board Member	Regional Children's Behavioral Service Provider		

CSS Children's Behavioral Health Advisory Committee

Representing	Member(s)			
Parents/Actively Involved Relatives of a	June Klein-Bacon, Brain Injury Alliance of Iowa			
Child who Utilizes Children's Behavioral	Megan Sprecher, Child Health Specialty Clinics			
Health Services	Katie Wahl, UnityPoint-Black Hawk-Grundy Mental Health Center			
	Kristi Aschenbrenner, Osage Community Schools			
	Courtney Cook, Prairie Lakes AEA			
	Jamie Heard, Mason City Community Schools			
The Education System	Mary Kenny, Fort Dodge Community Schools			
	Donna Kitrick, Waterloo Community Schools			
	Deb Koester-Rees, Fort Dodge Community Schools			
	Dana Miller, Central Rivers AEA			
Early Childhood Advocate	Alyse DeVries, North Iowa Children's Alliance			
Child Welfare Advocate	Melissa Clough, Community Partnership for Protecting Children			
Child Wellare Advocate	Shanda Hansen, YSS - Francis Lauer Youth Services (CO-CHAIR)			
	Mia Masteller, Four Oaks Family and Children Services			
Children's Behavioral Health Service	Roger Pollack, Four Oaks Family and Children Services			
Providers	Laura Wilcke, One Vision			
	Cody Williams, Turning Leaf Counseling Services (CHAIR)			
The Juvenile Court System	Ruth Frush, First Judicial District Juvenile Court Services			
Dediatrician	Kendra Elwood, MercyOne Waterloo			
Pediatrician	Stuart Feldman, MercyOne Waterloo			
Child Care Provider	Brenda Loop, Child Care Resource & Referral			
Local Law Enforcement	Mike McKelvey, Mason City Police Department			
Pagianal Causaning Board	Sharon Keehner, Clayton County Board of Supervisors			
Regional Governing Board	Sandy Loney, Humboldt County Board of Supervisors			

Regional Children's Behavioral Health Services Advisory Committee membership slate will be presented to the CSS Governing Board for approval at their May 27, 2020 meeting.

Appendix C

CSS Advisory Committees

	North Service Area	East Service Area	South Service Area	West Service Area
	Roy Schwickerath	Floyd Ashbacher- CHAIR	Greg Barnett	Sandy Loney
	Chris Watts	Sharon Keehner- VICE CHAIR	Craig White	John Pluth
CSS Board	Ken Abrams	Jeanine Tellin	Larry Vest	Mark Campbell
Representative	Gary Rahons	John Logsdon		Karl Helgevold
		Pat Murray		
	Pat Shirley	Dan Marx	Tony Thompson	James Stubbs
Sheriff or	Mike McKelvey- Vice Chair		,	Dean Kruger
Representative				Alex Leu
Public Health	Gayle Arjes	Cheryl McConnell	Jennifer Becker	
Representative	Chelcee Schleuger			Julie Richter
Primary Care	Sarah Enke	Julie Creery		
Representative	Laura Zwiefel			Beth Hively
·	Heather Curtis	Jamie Halse	June Klein-Bacon	
Network	Heidi Berg	Shirley Christainson	Haley Krall	Teresa Naughton
Provider	Melissa Clough		Brittney Montross- Vice Chair	Robert Ammann
Representative-	Heidi Hansen		Erika Benedict	
DD	Sherry Becker		Melody Moser	
	Simone Schmitt			
Network	Kelly Grunhovd	Marcia Oltrogge- Provider Rep	Tom Eachus	Beth Hively
Provider		Judy Holthaus	Chris Hoffman	Aaron McHone
Representative-			Trinette White	
СМНС			Gina Hiler- CHAIR	
School	Chris Hageman	Greg Schutte	Donna Kitrick	Jeff Herzberg
Representative	Mike Fisher	DJ Scholtes	Brian Foster	
Children's	Jen Hansen	Kristine Turner	Julie Johnson	Ashley- Lotus
Provider	Shanda Hansen- Provider Rep	Shannon Brown		Michael Popp
Representative		Heidi Loebig		
	Stewart Dalton- CHAIR	Janel Clarke- Consumer Rep	Melissa Hovenga	Nicole Spencer
Community,	Jolene Norby	Mary Kelly		Michelle DeLaRiva
consumer, or		Joy Conrad		Randy Hoover
family				Robin Hoover
				Andrew Osborn

Appendix D

2020 Federal Poverty Guidelines

Persons in Family or Household	48 Contiguous States and D.C.	Monthly 100%	Monthly 150%
1	\$12,760	\$1,063	\$1,595
2	17,240	\$1,437	\$2,155
3	21,720	\$1,810	\$2,715
4	26,200	\$2,183	\$3,275
5	30,680	\$2,557	\$3,835
6	35,160	\$2,930	\$4,395
7	39,640	\$3,303	\$4,955
8	44,120	\$3,677	\$5,515
For each additional person, add	4,480	\$373	\$560

Effective January 15, 2020 - Per the Department of Health and Human Services https://aspe.hhs.gov/poverty-guidelines

Appendix E

County Social Services 2020 Sliding Fee Schedule for CMHC Outpatient Services

	Household Size:								
Client Co- Payments	1	2	3	4	5	6	7	8	% Poverty
	Income listed is the upper threshold for that copayment.								
No Fee	\$1,595	\$2,155	\$2,715	\$3,275	\$3,835	\$4,395	\$4,955	\$5,515	150%
\$10	\$1,808	\$2,442	\$3,077	\$3,712	\$4,346	\$4,981	\$5,616	\$6,250	170%
\$20	\$2,020	\$2,730	\$3,439	\$4,148	\$4,858	\$5,567	\$6,276	\$6,986	190%
\$30	\$2,233	\$3,017	\$3,801	\$4,585	\$5,369	\$6,153	\$6,937	\$7,721	210%
\$40	\$2,446	\$3,304	\$4,163	\$5,022	\$5,880	\$6,739	\$7,598	\$8,456	230%
\$50	\$2,658	\$3,592	\$4,525	\$5,458	\$6,392	\$7,325	\$8,258	\$9,192	250%
\$60	\$2,871	\$3,879	\$4,887	\$5,895	\$6,903	\$7,911	\$8,919	\$9,927	270%
\$70	\$3,084	\$4,166	\$5,249	\$6,332	\$7,414	\$8,497	\$9,580	\$10,662	290%
\$80	\$3,296	\$4,454	\$5,611	\$6,768	\$7,926	\$9,083	\$10,240	\$11,398	310%
\$90	\$3,509	\$4,741	\$5,973	\$7,205	\$8,437	\$9,669	\$10,901	\$12,133	330%
\$100	\$3,722	\$5,028	\$6,335	\$7,642	\$8,948	\$10,255	\$11,562	\$12,868	350%
Full Fee	>\$3,722	>\$5,028	>\$6,335	>\$7,642	>\$8,948	>\$10,255	>\$11,562	>\$12,868	>350%

^{*}monthly gross income

Income listed is the upper threshold for that copayment.

100%	\$1.063	\$1,437	\$1,810	\$2,183	\$2,557	\$2,930	\$3,303	\$3,677
Poverty	41,003	Ψ1, 437	Ψ1,010	. ,	φ 2,33 ,	Ψ2,330	ψ3,500	Ψ3,07,

Provider Update

May 2020

A few thoughts in this new age we are experiencing. Agencies are not able to provide business as usual but are adapting to the new reality. Some of the barriers are PPE (personal protective equipment), internet access, and technology. I know that many tech savvy individuals have occasional trouble with ZOOM meetings. Imagine elderly or disable individuals trying to connect. Or spots where internet is spotty or the individual can't afford to have internet. Agencies are using phone calls as a measure to provide services and keep in touch. Some face to face services are still being provided. This can change rapidly if someone is exposed to COVID-19 and has to quarantine. Agencies are gearing up for reopening but that brings a host of new issues to resolve as buildings are remodeled to allow for social distancing to keep everyone safe.

One area to think about is the potential changes with insurance coverage. We have heard that some carriers are ending telehealth as an option in a few weeks or will decrease reimbursement for the services. This will force face to face services, which for some people may be a positive option. For other clients in a high risk group this could be extremely dangerous. Forcing them to attend on site sessions or not be seen does not seem to be an answer. Providers would like CSS to consider r paying the difference in reimbursement if companies end parity for telehealth regardless of income for the same time frame IME and the MCOs are allowing telehealth. We have seen an increase in crisis calls and have heard of a number of suicides in the region. We recognize the increased stress on everyone and want to ensure services are available. The crisis times CSS implemented have been wonderful and certainly assisted many people. Now we need to make sure we can continue to provide the level of support. As usual, CSS would be the funder of last resort.

PPE continues to be an across the board issue. If your county has access to PPE consider sharing it with the mental health providers in your area. They are considered essential services but many are having a difficult time getting what they need currently and what they will require in the future. HAB providers, waiver homes, and other in home providers need it to keep everyone safe and healthy. Purchasing PPE currently, if it can be found, can be expensive. Some agencies, such as mine, have been able to use grant funds to buy it, but if those weren't available it would be a hardship.

Submitted:
Marcia Oltrogge