**Olmstead Consumer Taskforce Board of Directors Meeting**

**May 10, 2013**

**Pleasant Hill Public Library, Pleasant Hill**

**Minutes**

Handouts

Agenda

Minutes of the Previous Meeting – March 8, 2013

Executive Committee Minutes – April 30, 2013

Letter to H.H.S. Secretary Kathleen Sebelius Regarding Proposed Iowa Health Exchange Benchmark Plan – April 30, 2013

Communication to Senator Hatch Expressing Neutrality on Amendment to HF 198 – April 22, 2013

Letter to IFA Board Urging Retention of Accessibility Incentive – March 27, 2013

Follow – up Communication to IFA Board – April 4, 2013.

Proposed ByLaws Revision Regarding Standing Committees

Housing & Transportation Committee Minutes – April 22, 2013

Map of regions for redesigned mental health and disability services system

Information sheets on Integrated Health Homes

**Taskforce Members Present:** Mark Block;Joan Bruhn;Roxanne Cogil; Paula Connolly; Lynsie Crawford; Carrie England; Dawn Francis; Geoff Lauer; Michele Meadors; Kathleen O’Leary; Len Sandler; Rik Shannon; Casey Westhoff; Jennifer Wolff

**Members Present by Phone:** Randy Davis; Darryl Lipscomb; Bruce Teague

**State Agency Representatives Present:** Chuck Palmer, DHS Director;Jennifer Vermeer, Iowa Medicaid Director; Theresa Armstrong andBecky Flores (DHS – MHDS); Diane Blackburn (Veterans Home); Karin Ford (IDPH); Kristin Haar (IDOT); Molly Hammer (DoE); Terri Rosonke (Iowa Finance Authority)

**Staff:** Terry Cunningham; Liz O’Hara

**Guests:**  Teresa Bomhoff (MH Planning Council, NAMI); Gerry Bruhn; Jane Hudson (DRI); Jule Reynolds (Senator Harkin’s Office)

**I. Welcome and Introductions**

Chair Geoff Lauer called the meeting to order at 10:10 am. A quorum was declared. A warm welcome was extended to new members Joan Bruhn, Roxanne Cogil, Lynsie Crawford, Darryl Lipscomb, Michele Meadors, Kathleen O’Leary, Len Sandler and Jennifer Wolff. Geoff briefly described the mission of the Taskforce, to remove barriers to community living for people with disabilities and to promote compliance with *Olmstead* principles in Iowa.

**II. Approval of the Agenda**

Liz O’Hara stated that three additions/changes to the agenda were necessary: (1) One item needed to be added to the Executive Committee Report under A: Request for Endorsement of Taskforce Letter to Legislators Advocating for Medicaid Expansion – May 6, 2013; (2) Iowa Medicaid Director Jennifer Vermeer wwould be present in the afternoon to provide information on the Healthy Iowa Plan. (3) Agenda Item VII should indicate an action item— the Third Reading of proposed bylaws change on Standing Committees. Moved by Dawn Frances and supported by Kathleen O’Leary to approved the agenda as amended. Motion carried.

**III. Approval of the Minutes of the Previous Meeting – March 8, 2013**

Becky asked that her statement reflected in the minutes that federal sequestration *will* result in funding for one less **SOAR** provider be changed to “*could* result” since that impact at this point is unknown. Dawn Francis updated her information reflected in the minutes about federal cuts in Part B funding for Independent Living. She noted that Iowa Vocational Rehabilitation Services has decided to absorb all of the cuts, leaving the SILC and centers for independent living budgets whole. Moved by Carrie England and supported by Casey Westhoff to approve the minutes of the previous meeting on March 8, 2013, as amended. Motion carried.

**IV. Executive Committee Report**

A, Update on Medicaid Expansion and ACA implementation in Iowa. Geoff

stated that this was a time of great change in Iowa, with both redesign and implementation of the Affordable Care Act (ACA), both of which were being watched by the Taskforce. The Iowa Treasury has a $1 billion surplus, and we should be asking ourselves about the depth of Iowa’s commitment to community living. Dawn then provided an update on the issue of Medicaid expansion. She attends Iowa Human Needs Advocates’ meetings both as SILC Director and as Vice Chair of the Taskforce, and dozens of organizations have unified behind the Taskforce’s position statement on Medicaid expansion. The research Teresa Bomhoff of the Mental Health Planning Council has done has benefited advocates.

The Senate has passed a bill requiring expansion of Medicaid coverage to people earning up to 138% of federal poverty level (FPL). This would provide coverage to many currently ineligible childless adults, including people with mental illness or undiagnosed disabilities who can’t afford private coverage. The Governor and House Republicans oppose Medicaid expansion, and back the Governor’s Healthy Iowa Plan, which has just passed the House. Few details about the plan are available, though those earning less than 100% FPL would get limited coverage similar to the current IowaCare Plan and those between 100% and 138% of FPL would purchase coverage on the Exchange to be established. It appears that the Governor is open to the idea of using Medicaid funds to pay people’s premiums on the Exchange, which is the approach taken by Arkansas. Both the Healthy Iowa Plan(HIP) and the Senate’s version of Medicaid expansion incorporate implementation of Accountable Care Organizations, authorized under the ACA as mechanisms to improve care coordination and focus on health outcomes. The two bills will now go to conference committee.

Implementation of the HIP would require application to CMS for a waiver, which in turn requires a public comment period. Dawn stated that the Executive Committee will need to use its authority to act between now and the July meeting. Teresa Bomhoff stated that one important issue for people in the 100-138% range who have to get coverage on the Exchange is that the benchmark plan that sets minimum standards for the plans to be offered limits mental health services in a way that violates the mental health parity requirements of the ACA. She thought efforts should be devoted to correcting the situation with the benchmark plan. She referred to the conference committee members as “the Medicaid Ten” and suggested everyone try to contact them. AARP has disseminated a map that shows clearly how limited the access points for care under the HIP would be in Iowa, due to the requirement that people get their services through an ACO, whereas under Medicaid expansion access would be on a par with the current Medicaid program statewide. In addition, HIP would be more costly to taxpayers than Medicaid expansion, which is fully funded by the federal government in the first three years and supported at levels gradually decreasing to a permanent 90% share. HIP will require higher levels of state appropriations and the capture of $85.5 million in current property taxes. Finally, Teresa pointed to various punitive provisions, including loss of coverage in the HIP for people who over-utilize services or fail to make timely payment of monthly premiums.

Action Item: Request for Endorsement of Letter to H.H.S. Secretary Kathleen Sebelius Regarding Proposed Iowa Health Exchange Benchmark Plan – April 30, 2013. Geoff explained for the benefit of new members that while the Executive Committee is empowered to act on issues involving Taskforce policy priorities between meetings, it must request endorsement of those actions at the next Taskforce meeting or the action loses its validity as a Taskforce position. Liz explained that the letter sent to Health and Human Services Secretary Sebelius conveyed Taskforce objections (1) to the Governor’s Healthy Iowa Plan because its small scale compared to the expanded Medicaid coverage authorized under the ACA; and (2) to the benchmark plan Iowa submitted to establish standards for coverage plans to be offered on the exchange, for the lack of compliance with mental health parity and for the limited definition of habilitation services. Moved by Bruce Teague and supported by Mark Block to endorse the Executive Committee’s letter to H.H.S. Secretary Sebelius (4/30/13) regarding Iowa’s benchmark plan and the Healthy Iowa Plan. Motion carried.

Dawn stated that Senator Harkin has expressed his dismay at the Governor’s proposal to Secretary Sebelius. Jule Reynolds said that the Senator has also met with the Governor, and that at the request of any Taskforce member, Senator Harkin would probably be willing to follow up on the Taskforce’s letter by contacting the Secretary. Len Sandler asked if the Taskforce could register its position for or against the two bills on extension of health coverage. Liz is to check whether the Taskforce has the ability to do that. Teresa commented that she is unaware of any lobbyists registering in opposition to Medicaid Expansion.

Moved by Dawn Francis and supported by Roxanne Cargil that the Taskforce request Senator Harkin to follow up on the Taskforce letter to Secretary Sebelius, and to urge him to work with Iowa’s Congressional delegation to support the Taskforce position, and that copies of the letter be sent to the Iowa delegation. Motion carried.

Action Item: Request for Endorsement of Taskforce Letter to Legislators Advocating for Medicaid Expansion – May 6, 2013. Moved by Paula Connolly and supported by Casey Westhoff to endorse the Executive Committee’s letter dated 5/6/13 to the Iowa Legislature’s Conference Committee members charged with developing compromise legislation on health coverage expansion, to advocate for Medicaid expansion. Motion carried.

B. Update on HCBS Waiver Rent Subsidy Program Funding. Bruce Teague was

asked to report on advocacy to increase HCBS Waiver Rent Subsidy funding for the next fiscal year. The program is important to waiver participants who need affordable, accessible housing but especially to Money Follows the Personal participants, for whom the lack of affordable, accessible housing can be a barrier to transition. The program’s funding was cut in 2012, and new applications were suspended from that fall to April 1st of this year. A letter was sent to legislators indicating Taskforce support for increasing appropriations from the current $658,000 level to $1 million. More recently, Housing and Transportation Committee members have begun work on individual legislative contacts.

C. Update on Direct Care Worker Credentialing Legislation.

Action Item: Request for Endorsement of Communication to Senator Hatch Expressing Neutrality on Amendment to HF 198 – April 22, 2013

This agenda item was deferred temporarily.

D. Update on IFA 2014 LIHTC Qualified Allocation Plan.

Action Item: Request for Endorsement of Letter to IFA Board Urging

Retention of Accessibility Incentive – March 27, 2013 and (2) Follow – up Communication to IFA Board – April 4, 2013.

Liz O’Hara explained that the Iowa Finance Authority’s Low Income Housing Tax Credit (LIHTC) Program is one of the most significant sources of accessible and affordable housing for people with disabilities in Iowa. Last year IFA staff sought to take advantage of the program’s great popularity with developers by working with the Olmstead Taskforce to add new incentives for developers to make *Olmstead*-friendly proposals. The incentives, which were written up in the annual Qualified Allocation Plan (QAP) that governs the way that funds are awarded, consist of extra points being given to applications which include commitments that 25 – 75% of units would be accessible, lesser points for pledges of visitable units, a commitment that project staff would be trained in either Mental Health First Aid or disability awareness, and a commitment that up to 25% of units would be set aside for housing for people with disabilities getting services.

IFA is accelerating the timetable for FY 14 applications to ensure earlier awards, enabling better use of the construction season, and the drafting of the next QAP is already underway. There had been indications that developers were likely to complain about the burden imposed by the accessibility incentives; although they don’t have to make accessibility commitments, they feel compelled to due to the highly competitive nature of the funding. Dawn stated that she attended the hearing on March 27th, and provided testimony in support of retaining accessibility incentives. The incentives were in fact opposed by many developers present. They were confusing the idea of maximum accessibility within apartment complexes, which opens up opportunities for a greater number of people with disabilities, with the new federal and state policy initiatives requiring that waiver slots only be awarded to people in integrated settings, which has led to the 25% cap on units for people with disabilities getting services. Developers at the meeting began to insist that accessibility incentives be limited to 25%. Because of the confusion of the two principles, a follow-up letter was sent to the IFA Board to try to clarify their different aims. Moved by Michele Meadors and supported by Bruce Teague to endorse the testimony and follow-up letter to the Iowa Finance Authority Board urging retention of the accessibility incentives in the FY 2014 Qualified Allocation Plan. Motion carried.

Len applauded both IFA and the Taskforce for its work to incorporate Olmstead principles in the QAP. He stated that the Plan’s standards for visitability are minimal, and he would prefer to see them raised. In Iowa City developers are already required to incorporate visitibility in housing construction. He recommended that future letters on the issue be stronger. Geoff stated that he would welcome Len’s comments and suggestions, and Terri echoed the statement on behalf of IFA. She said that IFA’s architect is proposing revised visitability standards, including full accessibility of bathrooms. Dawn expressed support for a new incentive for 100% accessibility of project units; this does not mean that they all have to be occupied by people with disabilities, but when a vacancy occurs it puts people with disabilities on equal footing with the general population. Terri expressed some doubt about future inclusion of a 100% accessibility standard, but encouraged Taskforce input to IFA on the issue. Jen Wolff added that our population is aging, increasing the need for accessible units.

Terri quoted developers as saying they can’t rent accessible units because people don’t like their appearance, while disability advocates claim that a critical shortage of such units. IFA is now requiring project managers to notify the DHS field offices, MFP and DHS – Targeted Case Management of any vacancies, and will be watching to see if this helps reduce the time it takes to rent the units. Dawn pointed out, however, that one developer at the IFA hearing said he never had a problem. Len Sandler asked if the IFA database could be available for review to determine the accessibility standards being applied to IFA program applicants. Terri suggested that Len talk to John Kurz, IFA’s architect. Moved by Michele Meadors and supported by Kathleen O’Leary to authorize a representative of the Olmstead Taskforce to meet with the IFA architect to review the Authority’s accessibility standards and develop recommendations to help strengthen future Taskforce communications about IFA accessibility incentives. Motion carried. Len will take the lead in setting up the IFA visit; he will be accompanied by Michele, Randy Davis, and Darryl Lipscomb, forming an ad hoc work group.

C. Update on Direct Care Worker Credentialing Legislation (deferred agenda

item). Geoff briefly described Taskforce advocacy efforts that led to significant changes in the legislation (HF 198) that had previously been viewed as extremely harmful to people with disabilities needing personal attendant services in order to live in the community. The most important change is that due to vigorous advocacy, Senator Hatch had agreed to make credentialing of direct care workers voluntary. Other changes would reduce the costs for those workers who choose to become credentialed. Geoff stated that he had sent a communication to Senator Hatch on behalf of the Taskforce confirming that in light of the changes the Taskforce was no longer opposed to the bill. Moved by Dawn and supported by Carrie England to endorse the communication to Senator Hatch (4/22/13) expressing neutrality on HF 198. Motion carried.

E. Ad Hoc Workgroup to Review Recent Changes in Administrative Code

Governing Waiver Services. Geoff reminded the Taskforce that following an extended conversation between Deb Johnson and Randy Davis about the negative impact of waiver rule changes on his service plan, Deb had asked that the Taskforce set up a small workgroup to review Chapter 83 rule changes with her and to provide a consumer perspective. Geoff has asked Randy and Paula to join him as members of the Ad Hoc Workgroup.

**V. Housing & Transportation Committee Report**

Bruce noted that the Rent Subsidy funding issue and the LIHTC accessibility incentives had already been addressed, so he confined his report to an update on the Taskforce communication with the Iowa Economic Development Authority about the Authority’s assignment of a priority to sheltered workshops in its award of community development block grant (CDBG) funds to localities. He has been informed by Derek Lord of the EDA that Mr. Lord recognizes the importance the Taskforce places on the uses of state resources like CDBG to support community integration. Mr. Lord is interested in coming to a Taskforce meeting to have a dialogue on this. Dawn cited recent developments in New Jersey, which is phasing out its sheltered workshops. Geoff stated that integrated employment should begin to get more attention from the Taskforce. Dawn asked if the issue should be assigned to the Housing & Transportation Committee or elsewhere.

Joan Bruhn cited her experience in Minnesota trying to get people who were served in sheltered workshops into the community, when few alternatives were available. Paula said that reimbursement policies have to be aligned with the goal of competitive employment. Michele said it is also a challenge to find other employment options and connect people to them. Dawn said that the Taskforce is not demanding an immediate closure of workshops, but a methodical transition to other service models. We also need to deal with issue of allowing employers to pay people with disabilities subminimum wage.

Roxanne Cogil stated that there should be a separate committee for employment issues. Kathleen O’Leary, Joan Bruhn, Paula, Roxanne, Carrie England, and Bruce Teague would like to serve on the committee. DHS will soon be holding a series of community conversations on expanding employment options; Dawn suggested that Taskforce members let Liz know if they can attend.

**VI. Discussion of OCTF Committee Structure**

Geoff explained that a discussion was warranted because the bylaw provisions on Taskforce committees was up for a third reading and possible adoption, and he sensed there was still disagreement about OCTF committee structure. The proposed revision, which at this point can only be voted up or down and not amended, would limit standing committees to the Executive, the Nominations and the Strategic Planning Committees. The Taskforce would then have the flexibility each year to set up whatever other ad hoc committees are considered necessary to get the Taskforce’s work done. Dawn pointed out that there is currently no Strategic Planning Committee and we still lack a clear idea of its purpose, whereas a great deal of the Taskforce’s energies have been directed to legislation and policy changes to move Olmstead principles forward. She felt Legislation and Policy should be a standing committee. It was agreed to go ahead and make the changes to the bylaws with the expectation that the ad hoc workgroup would take another look at such issues as the function of the Strategic Planning Committee, and bring back more proposed changes in the future.

**VII. Ad Hoc Workgroup on Bylaws Revision**

Action Item: Third Reading of Proposed ByLaws Revision Regarding Standing Committees. Following the third reading of the proposed change, it was moved by Dawn and supported by Carrie to adopt the proposed bylaws revision. Motion carried.

**VIII. Charge to Nominations Committee: Candidates for Annual Ray Gerke Award**

Geoff charged the Nominations Committee with reviewing nominations for the annual Ray Gerke Systems Advocacy Award. Geoff encouraged nominations by Taskforce members of candidates who understand and have worked effectively to advance *Olmstead* principles (whether they are actually knowledgeable about the history and the facts of *Olmstead* or not). Nominations should go to Carrie or to Liz no later than June 7th so that the award can be given in July.

**Lunch**

**VIII. Update on Redesign and MHDS**

Theresa Armstrong of the DHS – MHDS Division, Bureau of Community Services and Planning, provided the update on redesign. She reviewed the DHS map of regions proposed as of that date; some counties are still in conversation and the map could be changed. Carroll, Polk and Jefferson Counties have or will seek waivers from the regionalization requirement; Polk County has already been approved as a stand-alone county. Counties need to establish 28E agreements, and lay out plans for staffing, governance, core services, allocation of funding, etc. They also need to set up advisory councils. Geoff asked about plan requirements—the deadline for the plan and the extent of consistency expected among regions. Theresa said the plan requirements are in Iowa Code, so there will be basic similarities across the state. Counties are not required to pool funding at this point.

Len stated that regions can provide more than the required core services, as Linn County is doing. Theresa said that individuals currently getting services beyond the core required may be grandfathered in and continue to do so, but this would not extend across the region. It is not clear how long someone would receive those services. The services stipulated in the regional plan would be offered region-wide, however. The same application and eligibility determination processes would be used across the region

DHS Director Chuck Palmer joined the discussion of the appeals process. It may vary from one region to another. Some people favor appeals to the county CPCs, while others think they should be to the county board of supervisors. Appeals not resolved locally will be decided by DHS and the Department of Inspections and Appeals (DIA). There will be a performance-based contract between DHS and the regions. It is not developed yet but will be by January.

Theresa discussed legislative action related to redesign. SF 406 deals with judicial issues, placing mental health advocates in the DIA. It is in a House Committee. SF440 is the MHDS redesign bill. SF 452 is the standings bill, currently in conference committee. It includes $55,000 for youth suicide prevention and would require teachers to get trained in trauma-informed care and suicide prevention. The House favors a $29 million appropriation for property tax equalization across counties; the Senate proposes $43 million. Current county management plans will stay in place until 7/1/14, though the county can begin implementation of the regional plan earlier than that if the region is ready.

Len asked how regions are communicating with the public about their planning decisions. Theresa stated this varies from one region to the next, depending on factors like their size and how far along they have advanced. DHS provides information on its redesign web page. The Iowa State Association of Counties holds monthly meetings on redesign for county boards and CPCs. DHS representatives frequently attend. DHS would like to start meetings with representatives of the regions to identify technical assistance needs.

Theresa also explained the Integrated Health Homes (IHH) initiative, referring to an information sheet that had been sent to Taskforce members. Health homes use an interdisciplinary team approach in which there is coordination of medical and mental and behavioral health services. Some people currently get care coordination through targeted case management (TCM). The initiative will be managed by Magellan, which estimates that about 24,000 adults and children in Iowa will be eligible for this service approach. Paula said there are many concerns about the loss of TCM. She suggested DHS develop online training about the IHH initiative. Theresa stated that DHS has developed a communication plan with Magellan, which will be doing webinars. Jennifer Vermeer asked if the IHH “FAQ” sheet was helpful. She pointed out that 800 children with Serious Emotional Disturbance are currently receiving TCM, but thousands will eventually be served by IHH. She expressed surprise that that seems not to favorably impress people. Paula attributed this to general confusion. Jennifer said she welcomed feedback on the handouts. She sees IHH as a tremendous opportunity to serve children and to support systems of care on which people have been working for years.

Casey Westhoff asked about access to IHH for people with ID. Jennifer said they are not eligible, but IME is working to promote the model of integrated care delivery through a primary care health home. She acknowledged that more work needs to be done to develop the delivery model.

Geoff asked Director Palmer for his sense of where the Legislature stood with respect to the Governor’s Healthy Iowa Plan. Chuck said there are three major bills preoccupying the Legislature—property tax, education reform and health. Things are moving slowly; the potential impact of the various bills on the General Fund, and certainly on redesign, is not clear. He expressed optimism about the prospects for compromise. The health coverage debate has two basic components—policy and funding. He saw the House, Senate and Governor as being very close on policy, with recent Senate compromises, but Chuck believed that funding differences could also be resolved. He personally was much more worried about DHS appropriations, especially funding to cover the Medicaid shortfall which does not seem to have anyone’s attention.

Jennifer Vermeer explained the elements of the Healthy Iowa Plan (HIP), which will cover all adults below 100% FPL except those falling into current Medicaid eligibility categories. HIP will cover a full array of acute care services, as well as mental health and substance abuse services and Section 1915(i) habilitation services for people with mental illness. Individuals at 100% FPL have incomes of about $11,000. They would make contributions toward coverage not to exceed 3% of their incomes. Incentives for appropriate use of services include a $10 co-pay for a non-emergency trip to the emergency room. There are also wellness incentives, e.g., $20 for undergoing a health risk assessment, or for having a physical or a mammogram, with the money going into a health savings account. This money can then be used for health-related expenses such as gym memberships.

The new Medicaid members will be served through Accountable Care organizations, which are focused on quality and cost outcomes. While the federal government pays 100% of the federal match for Medicaid expansion, HIP program expenditures would be eligible for the regular match rate of 60%. HIP will be funded in part by state appropriations and in part through capturing the property tax funds currently levied by the Broadlawns district to leverage IowaCare funding. Likewise, $12 million would come from the University of Iowa Hospitals and Clinics. The General Fund would be tapped for $23 million, roughly the same amount as that used currently for IowaCare, and $35.5. million would come from savings to Medicaid from various aspects of healthcare reform implementation (including savings from people leaving Medicaid to get coverage on the Exchange. Based on an analysis of expenses for disability and mental health services that would shift from counties to the HIP plan, HIP will rely on capture of $43 million out of the $131 million currently spent on non-Medicaid eligible individuals or on services not reimbursable under Medicaid. These funds could in turn be used as a match for federal Medicaid. An estimated 90,000 people who are currently served by counties will get their services from HIP.

Geoff questioned whether this puts redesign at risk, taking away the funds that counties need to build up services. Jennifer responded that about $40 now becomes freed up for other purposes. She believes that advocates should try to ensure they go into redesign service capacity. Chuck stated that Medicaid expansion would save the state $60 million, and acknowledged that it was a more attractive option. Teresa said that while DHS was using $131 million as the amount currently spent on non-Medicaid services, she has heard from the Iowa State Association of Counties that the figure is closer to $114, to capturing $43 million of that is a much bigger relative hit at a time when counties are experiencing serious budget shortfalls. Chuck said that some counties have been spending more than they are taking in, and relying on the “float” in their Medicaid bill payments to the state. Now that the State has taken over responsibility for the non-federal share of Medicaid there will be no more “float,” and the counties will shortly have to pay what they owe.

Teresa cited what she saw as serious deficiencies in HIP: it does not cover EPSDT, dental care, eye exams and glasses, or hearing aids, nursing home services, transportation and waiver services. Moreover, she said the Governor intends to cap the number of people in HIP. Jennifer responded that only 18 to 20 year olds lose EPSDT coverage, that Medicaid expansion does not cover waiver services either, and that CMS does not allow caps on enrollment in Section 1115 waivers, which is the vehicle used to implement HIP. Teresa also expressed concerns for those between 100-138% of poverty level seeking subsidized insurance on the Exchange, who would likely still be able to afford only the lowest ranked plans with the least coverage. Jennifer acknowledged that affordability will be a factor.

Chuck reminded the Taskforce of all of the uncertainty connected to ACA implementation since 2010, and uncertainty remains. DHS is simply trying to report the facts to stakeholders. Public hearings have been scheduled even though the final bill hasn’t been passed, and DHS hopes to apply for the Section 1115 waiver by 6/28.

**IX. Discussion of Status of DHS Olmstead Plan Implementation**

This item was deferred.

**X. State Agency Reports**

Iowa Finance Authority (IFA) – Terri Rosonke asked for Olmstead Taskforce input on the question of whether IFA and DHS should collaborate in the development of an application for Section 811 Project Based Rental Assistance (PBRA) for people with disabilities. She reminded Taskforce members that last year she had discussed the release by HUD of a Notice of Funding Availability for the newly revamped Section 811 program. Unlike the earlier version of Section 811, there is no assistance for construction costs, and projects in which 100% of the units are set aside for people with disabilities receiving services are no longer allowed. To bring the program into greater alignment with emerging policies at CMS requiring the Medicaid HCBS services be provided in “integrated settings,” no more than 25% of the units in Section 811 projects can be rented to people with disabilities who are getting services. IFA saw technical issues in last year’s NOFA, and with a short time line to put everything in place for the application, IFA decided not to apply. Terri now understands that a second NOFA can be expected, perhaps as early as this summer, and IFA and DHS have discussed whether to apply. Feedback from the Taskforce would be helpful.

The Taskforce discussed the difference between project-based rental assistance, tied to the physical location, and tenant based assistance which can follow the person when they move. Dawn commented that in this regard HUD seems out of touch with current CMS thinking on basic issues such as choice and community integration. Paula asked what was known about how states in the first funding round dealt with the program’s issues. Terri said there were 3500 units funded. Jane Hudson stated that the Technical Assistance Collaborative (TAC) has information about these projects that could be shared. She thought the 25% cap was a good policy move, and she said that DRI is encouraging IFA to apply.

Terri said she appreciated the free technical assistance TAC has provided to Iowa, but noted that TAC still does not seem to have answers to questions raised last year about technical issues in the program. Geoff asked about timing, and Terri said that feedback is needed now because in order for the Section 811 PBRA to work, it has to be tied to assistance in project financing, and for most states that means the Low Income Housing Tax Credit program. IFA is in process of developing the Qualified Allocation Plan governing the next round of applications. The idea would be that the winners in the next round of LIHTC applications would be required to participate in Section 811. If Section 811 is to be successful in Iowa, developers have to see the advantage in applying.

Dawn moved that the Taskforce direct the Executive Committee to draft a letter to HUD protesting its use Project Based Rental Assistance rather than Tenant Based Rental Assistance. Kathleen O’Leary supported the motion. Jane objected, stating that his would hurt people with disabilities, who need housing. Dawn asked why support should not be shown for rental assistance that follows people from one location to the next. Jane replied that this is integrated housing. Paula pointed out that Iowa has used Section 811 frequently in the past and has ended up with segregated housing projects. She did not want the Taskforce to seem to suggest that the status quo is all right, which she thought sent a mixed message on *Olmstead* principles. Len said it was premature to send such a letter when people need housing. Geoff asked about the possibility of referring the question either to the Housing & Transportation Committee or to the Executive Committee within the next five days. Terri said she could send the Taskforce the link to information on approved projects. Len suggested getting information from other states using the program. Moved by Dawn and supported by Len to recommend to IFA that it work with DHS to prepare to submit a Section 811 application in the next funding round. Motion carried.

Terri stated that in response to IFA’s invitation to apply for HCBS Waiver Rent Subsidy assistance on April 1st, more than 300 applications were received. Of these, 154 were approved. Many applications were ineligible. At this point 384 people are being served by the program, which has once again exhausted its funding and cannot take new applications.

Terri also reported on the most recent round of applications for Low Income Housing Tax Credits. There were 12 awards. Of the 11 applicants pledging to serve a target population, six pledged to serve people with disabilities and three to serve elderly. The accessibility incentives resulted in 5 applicants pledging 25% of units being accessible, 2 for 50% and 4 for 75 accessibility, compared to the 5% required in federal housing assistance programs. A twelfth award committed to 100% visitability. All twelve winning applicants included a pledge that project staff will get Mental Health First Aid training, and ten of the twelve will over multiple bedrooms per unit.

Iowa Department of Transportation (IDOT) – Kristin Haar reported that IDOT is concerned about the implications of Medicaid expansion because of people’s transportation needs, which IDOT has tried to address. Kristin reported that she continues to work with the Departments of Human Services and Aging to implement the “one call/one click” information and referral hotline.

Iowa Department of Public Health – Karin Ford reported that she continues to work to improve accessibility of IDPH communications, and is also working on the accessibility of mammogram clinics.

Veterans Home – Diane Blackburn reported that Jodi Tymeson has resigned as head of the Iowa Department of Veterans Affairs to assume the position of Chief Operating Officer of the Veterans Home. Diane declined to comment on the recent public controversy over management of the Veterans Home. She noted that a significant numbers of residents have received assistance in successful transitions to the community.

Department of Education – Molly Hammer reported that Barbara Guy has take the position of director of special education. The unit is defining its work goals to include building stronger partnerships, focusing to school to work transition, and working with families. Barb is working with the Iowa Coalition for Integrated Employment which is working to improve transitions.

**XI. Taskforce Member Reports**

Dawn reported that she attended “ADRC Day” in April, sponsored by the Iowa Department on Aging, where a wide variety of partners from communities across Iowa came to learn about the plan to establish a network of Aging and Disability Resource Centers. Small planning grants were announced to help area agencies on aging work with local partners to develop ADRCs, including decisions about the local lead agency. Dawn stated that the Iowa Association of Area Agencies on Aging shortly thereafter succeeding in getting legislative language introduced that would require that the AAAs be the lead agency. Dawn stated that there is a full expectation that AAAs would take the lead in most cases, but with the likelihood of additional federal funding in the future, flexibility in establishing local networks would be important. Dawn worked with local partners on compromise language that would allow for either AAAs or other local entities.

**XII. Public Comments**

None

**XIII. Adjournment**

The meeting adjourned at 3:10 pm.