



**SOUTHEAST IOWA LINK (SEIL)  
MENTAL HEALTH AND  
DISABILITY SERVICES REGION**

**DES MOINES, HENRY, JEFFERSON,  
KEOKUK, LEE, LOUISA, VAN BUREN  
& WASHINGTON COUNTIES**

**FY23 ANNUAL SERVICE & BUDGET PLAN**

**SUBMITTED  
3/15/2022**

**GEOGRAPHIC AREA:** *Des Moines, Henry, Jefferson, Keokuk, Lee, Louisa, Van Buren, Washington*

**APPROVED BY ADVISORY BOARD: 3/9/2022**

**APPROVED BY GOVERNING BOARD: 3/9/2022**

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## **Introduction**

The SEIL Region 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 FY2023 Annual Service and Budget Plan covers the period of July 1, 2022 to June 30, 2023. 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.

There have been no modifications to the SEIL Region county membership.

The SEIL Governing Board is comprised of designated member county Board of Supervisors, an adult or adult family member lived experience representative, a children's family member lived experience representative, a representative from the educational system, an Adult service provider representative, and a Children's service provider representative. The SEIL Governing Board functions as a political subdivision in its efforts of Mental health and Disability Services and complies to all laws and rules applicable to public meetings and disclosure of information.

The SEIL Governing Board appoints membership to two distinct advisory committees as identified below:

SEIL Adult Advisory Committee- comprised of individuals with lived experience, family members of individuals with lived experience, adult service providers, and a representative from the SEIL Governing Board.

SEIL Children's Advisory Committee- comprised of parent/family member of child accessing behavioral health services, education system, early childhood advocates, child welfare advocates, children's service provider, juvenile court services, pediatrician, child care provider, law enforcement, and a representative from the SEIL Governing Board.

\*Please see Appendix A for full listing of Governing Board and Advisory Committee membership.

## **A. Local Access Points**

An access point is a part of the SEIL Region service system trained to complete MHDS regional applications for persons with a disability. Additionally, resource and referral, service eligibility, and service management assistance are also provided in the below identified locations and are typically available to the public during regular county office business hours and by appointment as needed in certain locations.

The SEIL Region has designated the following access points for adult mental health and disability services.

<b>Access Point</b>	<b>Location</b>	<b>Contact Information</b>
Des Moines	910 Cottonwood, Suite 1000, Burlington, IA 52601	319-754-8556
Henry	106 E Clay St, Suite 102 Mt Pleasant, IA 52641	319-385-4050
Jefferson	Courthouse, 51 E. Briggs Fairfield, IA 52556	641-472-8637
Keokuk	615 South Jefferson St Sigourney, IA 52591	641-622-2383
Lee	307 Bank St PO Box 937 Keokuk, IA 52632	319-524-1052

Louisa	503 Franklin St, Suite 1 Wapello, IA 52653	319-523-5125
Van Buren	404 Dodge Street, Courthouse Keosauqua, IA 52565	641-919-6776
Washington	2175 Lexington Blvd. Bldg. #2, PO Box 902, Washington, IA 52353	319-653-7751

The SEIL Region has designated the following access points for children’s behavioral health services.

Access Point	Location	Contact Information
Des Moines	910 Cottonwood, Suite 1000, Burlington, IA 52601	319-754-8556
Henry	106 E Clay St, Suite 102 Mt Pleasant, IA 52641	319-385-4050
Jefferson	Courthouse, 51 E. Briggs Fairfield, IA 52556	641-472-8637
Keokuk	615 South Jefferson St Sigourney, IA 52591	641-622-2383
Lee	307 Bank St PO Box 937 Keokuk, IA 52632	319-524-1052
Louisa	503 Franklin St, Suite 1 Wapello, IA 52653	319-523-5125
Van Buren	404 Dodge Street, Courthouse Keosauqua, IA 52565	641-919-6776
Washington	2175 Lexington Blvd. Bldg. #2, PO Box 902, Washington, IA 52353	319-653-7751

## **B. Service Coordination and Targeted Case Management**

The following agencies provide service coordination and/or targeted case management for *the SEIL Region*.

Service Coordination Provider	Adult/Child/Both	Location	Contact Information
Counseling Associates	Adult	1013 Ave I, Suite 1 Fort Madison, IA 52627	319-372-8045 Fax: 319-372-2459
First Resources	Adult	204 South Jefferson, Suite 103 Mt. Pleasant, IA 52641	641-954-7244 Fax: 641-201-4342
Hillcrest	Both	218 N 2nd St, Wapello, IA 52653	319-527-4455 Fax: 319-527-4458
Southern Iowa Mental Health Center	Both	1527 Albia Rd Ottumwa, IA 52501	641-682-8772 Fax: 641-682-1924
Young House Family Services	Child	400 South Broadway St Burlington, IA 52601	319-752-4000 Fax: 319-758-6650
AmeriGroup	Both	4800 Westown Parkway Suite 200 West Des Moines, IA 50266	800-600-4441 Fax: 844-556-6121
Iowa Total Care	Both	1080 Jordan Creek Parkway, Suite 100 South West Des Moines, IA 50266	800-735-2942 Fax: 844-536-2997
Transition Link Jail Based Service Coordination	Adult	106 E Clay St, Suite 102 Mt Pleasant, IA 52641	319-385-4050 Fax: 319-385-1948

## C. Crisis Planning

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
Counseling Associates	1124 Avenue H Suite 2, Fort Madison, IA 52627 1522 Morgan St Keokuk, IA 52632	319-372-7689  319-524-0510
Hillcrest	106 N Jackson, Mount Pleasant, IA 52641 218 N 2 <sup>nd</sup> St Wapello, IA 52653 2175 Lexington Blvd Building 2 Washington, IA 52353	319-385-7177  319-527-5455 319-653-6161
Optimae	823 N 6 <sup>th</sup> St Suite 2 Burlington, IA 52601 301 West Burlington Avenue Fairfield, IA 52556 509 Avenue F Ft. Madison, IA 52627 605 East Winfield Avenue Mt. Pleasant, IA 52641 208 Bank St Keokuk, IA 52632 1415 W 5 <sup>th</sup> St Suite C Washington, IA 52353	319-237-1732  641-472-5771  319-372-3566  319-385-2830  319-524-5106  319-385-8051
River Hills Community Health Center	300 West Kelly St Sigourney, IA 52591	641-224-8061
Southern Iowa Mental Health Center	1527 Albia Rd Ottumwa, IA 52501	641-682-8772

### 24 Hour Crisis Hotline

Provider	Location	Contact Information
Your life Iowa	Online: <a href="https://yourlifeiowa.org/">https://yourlifeiowa.org/</a> 1540 2 <sup>nd</sup> Avenue Southeast Cedar Rapids, IA 52403	Call: 855-581-8111 Text: 855-895-8398

### Crisis Evaluation

Provider	Adult/Child/Both	Location	Contact Information
Community Health Center of Southeastern Iowa	Both	1706 West Agency Rd West Burlington, IA 52655	319-768-5858
Counseling Associates	Both	1124 Avenue H Suite 2, Fort Madison, IA 52627 1522 Morgan St Keokuk, IA 52632	319-372-7689  319-524-0510
Hillcrest	Both	106 North Jackson St Mt. Pleasant, IA 52641 218 North 2 <sup>nd</sup> St Wapello IA 52653 2175 Lexington Blvd. Building #2 Washington, IA 52353	319-385-7177  319-527-4455 319-653-6161
Optimae	Both	Offices and EDs-Southeast Iowa Regional Medical-Ft. Madison, Jefferson County Health Center, Van Buren County Hospital, Blessing Health Keokuk, Henry County Health Center, Keokuk County Health Center, and Washington County Hospital	641-472-5771

River Hills Community Health Center	Both	300 West Kelly St Sigourney, IA 52591	641-224-8061
Southern Iowa Mental Health	Both	1527 Albia Rd Ottumwa, IA 52501	641-682-8772

### Mobile Response

Provider	Location	Contact Information
None at this time		

### Crisis Stabilization Community-based Services

Provider	Adult/Child/Both	Location	Contact Information
American Home Finding	Child	217 East 5 <sup>th</sup> St Ottumwa, IA 52501	641-682-3449

### Crisis Stabilization Residential Services

Provider	Adult/Child/Both	Location	Contact Information
Hope Haven	Adult	828 North 7 <sup>th</sup> St Burlington, IA 52601	319-209-2066
Southern Iowa Mental Health Center	Adult	1527 Albia Rd Ottumwa, IA 52501	641-682-8772
First Resources	Adult	101 North 16 <sup>th</sup> St Fairfield, IA 52556	641-472-7601
American Home Finding	Child	217 East 5 <sup>th</sup> St Ottumwa, IA 52501	641-682-3449

### 23-Hour Observation

Provider	Location	Contact Information
Southern Iowa Mental Health Center	1527 Albia Rd Ottumwa, IA 52501	641-682-8772

The SEIL Region recognizes the above identified service providers as preferred. Residents of the SEIL Region may also access other core crisis services outside of the SEIL Region with accredited contracted service providers of other MHDS Regions. The method of reimbursement for SEIL non-contracted providers is on a Medicaid fee for service rate as identified by IME.

## D. Intensive Mental Health Services

The region has designated the following provider(s) as an **Access Center** that meet the requirements according to IAC 441—25.6(1) in a coordinated manner in one or more locations:

Provider	Location	Contact Information
Southern Iowa Mental Health Center	1527 Albia Rd Ottumwa, IA 52501	641-682-8772

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).

Provider	Location	Contact Information
UIHC	200 Hawkins Dr. Iowa City IA 52242	319-356-1616
Southern Iowa Mental Health Center	1527 Albia Rd Ottumwa, IA 52501	641-682-8772

The region has designated the following **Subacute** service providers which meet the criteria and are licensed by the Department of Inspections and Appeals.

Provider	Location	Contact Information
Southern Iowa Mental Health Center	1527 Albia Rd Ottumwa, IA 52501	641-682-8772

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 at this time		

## **E. Scope of Services & Budget and Financing Provisions**

The table below identifies the scope of services offered by SEIL Region. 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 SEIL Region’s policy and procedure 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 located in section F, pages 13-19 of the SEIL Region’s policy and procedure manual. The Policy and procedure manual can be found online at : <https://www.seiowalink.org> or <https://dhs.iowa.gov/mhds-providers/providers-regions/regions/policies-procedures>

The SEIL Region will utilize braided funding that includes regional, state and other funding sources as necessary and available to meet the service needs within the region. Just as identified in the SEIL Region Management Plan, region funding is the payer of last resort. All other viable funding options must be exhausted prior to region funding authorization. Region funds will not be used to supplant Medicaid funding.

**Table A. Expenditures**

FY 2023 Budget	SEIL MHDS Region	MI (40)	ID(42)	DD(43)	BI (47)	Admin (44)	Total
<b>Core Domains</b>							
<b>COA</b>	<b>Treatment</b>						
42305	Mental health outpatient therapy **	\$ 35,000					\$ 35,000
42306	Medication prescribing & management **	\$ 10,000					\$ 10,000
43301	Assessment, evaluation, and early identification **	\$ 15,000					\$ 15,000
71319	Mental health inpatient therapy-MHI	\$ 571,868					\$ 571,868
73319	Mental health inpatient therapy **	\$ 57,686					\$ 57,686
	<b>Crisis Services</b>						
32322	Personal emergency response system						\$ -
44301	Crisis evaluation	\$ 267,431					\$ 267,431
44302	23 hour crisis observation & holding	\$ 20,302					\$ 20,302
44305	24 hour access to crisis response						\$ -

44307	Mobile response **	\$ 703,147					\$ 703,147
44312	Crisis Stabilization community-based services **	\$ 525,695					\$ 525,695
44313	Crisis Stabilization residential services **	\$ 1,305,766					\$ 1,305,766
44396	Access Centers: start-up / sustainability	\$ 125,859					\$ 125,859
	<b>Support for Community Living</b>						
32320	Home health aide						\$ -
32325	Respite						\$ -
32328	Home & vehicle modifications						\$ -
32329	Supported community living	\$ 315,195					\$ 315,195
42329	Intensive residential services	\$ 539,973					\$ 539,973
	<b>Support for Employment</b>						
50362	Prevocational services	\$ 52,872					\$ 52,872
50364	Job development	\$ 31,723					\$ 31,723
50367	Day habilitation	\$ 10,094		\$ 10,094			\$ 20,188
50368	Supported employment	\$ 58,104		\$ 12,394			\$ 70,498
50369	Group Supported employment-enclave	\$ 2,022		\$ 2,022			\$ 4,045
	<b>Recovery Services</b>						
45323	Family support	\$ 40,000					\$ 40,000
45366	Peer support	\$ 35,756					\$ 35,756
	<b>Service Coordination</b>						
21375	Case management						\$ -
24376	Health homes	\$ 112,407					\$ 112,407
	<b>Sub-Acute Services</b>						
63309	Subacute services-1-5 beds	\$ 5,520					\$ 5,520
64309	Subacute services-6 and over beds						\$ -
	<b>Core Evidenced Based Treatment</b>						
04422	Education & Training Services - provider competency	\$ 40,000					\$ 40,000
32396	Supported housing	\$ 41,437					\$ 41,437
42398	Assertive community treatment (ACT)	\$ 75,466					\$ 75,466
45373	Family psychoeducation	\$ 40,000					\$ 40,000
	<b>Core Domains Total</b>	<b>\$ 5,038,324</b>	<b>\$ -</b>	<b>\$ 24,510</b>	<b>\$ -</b>		<b>\$ 5,062,834</b>
	<b>Mandated Services</b>						
46319	Oakdale	\$ 50,000					\$ 50,000
72319	State resource centers						\$ -
74XXX	Commitment related (except 301)	\$ 185,102					\$ 185,102
75XXX	Mental health advocate	\$ 207,983					\$ 207,983
	<b>Mandated Services Total</b>	<b>\$ 443,085</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>		<b>\$ 443,085</b>
	<b>Additional Core Domains</b>						
	<b>Justice system-involved services</b>						



25xxx	Coordination services	\$ 178,173					\$ 178,173
44346	24 hour crisis line*						\$ -
44366	Warm line*						\$ -
46305	Mental health services in jails						\$ -
46399	Justice system-involved services-other						\$ -
46422	Crisis prevention training	\$ 107,513					\$ 107,513
46425	Mental health court related costs						\$ -
74301	Civil commitment prescreening evaluation						\$ -
	<b>Additional Core Evidenced based treatment</b>						
42366	Peer self-help drop-in centers	\$ 991,391	\$ 75,509	\$ 75,509			\$ 1,142,408
42397	Psychiatric rehabilitation (IPR)						\$ -
	<b>Additional Core Domains Total</b>	<b>\$ 1,277,078</b>	<b>\$ 75,509</b>	<b>\$ 75,509</b>	<b>\$ -</b>		<b>\$ 1,428,095</b>
	<b>Other Informational Services</b>						
03371	Information & referral	\$ 310,788					\$ 310,788
04372	Planning, consultation &/or early intervention (client related) **	\$ 38,549					\$ 38,549
04377	Provider Incentive Payment						\$ -
04399	Consultation Other						\$ -
04429	Planning and Management Consultants (non-client related)	\$ 62,721					\$ 62,721
05373	Public education, prevention and education **	\$ 133,683					\$ 133,683
	<b>Other Informational Services Total</b>	<b>\$ 545,741</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>		<b>\$ 545,741</b>
	<b>Community Living Supports</b>						
06399	Academic services						\$ -
22XXX	Services management	\$ 213,633					\$ 213,633
23376	Crisis care coordination	\$ 87,181					\$ 87,181
23399	Crisis care coordination other						\$ -
24399	Health home other						\$ -
31XXX	Transportation						\$ -
32321	Chore services						\$ -
32326	Guardian/conservator						\$ -
32327	Representative payee						\$ -
32335	CDAC						\$ -
32399	Other support						\$ -
33330	Mobile meals						\$ -
33340	Rent payments (time limited)	\$ 36,938					\$ 36,938
33345	Ongoing rent subsidy						\$ -
33399	Other basic needs						\$ -
41305	Physiological outpatient treatment						\$ -
41306	Prescription meds						\$ -

41307	In-home nursing						\$ -
41308	Health supplies						\$ -
41399	Other physiological treatment						\$ -
42309	Partial hospitalization						\$ -
42310	Transitional living program						\$ -
42363	Day treatment						\$ -
42396	Community support programs						\$ -
42399	Other psychotherapeutic treatment						\$ -
43399	Other non-crisis evaluation						\$ -
44304	Emergency care						\$ -
44399	Other crisis services						\$ -
45399	Other family & peer support						\$ -
46306	Psychiatric medications in jail						\$ -
50361	Vocational skills training						\$ -
50365	Supported education						\$ -
50399	Other vocational & day services						\$ -
63XXX	RCF 1-5 beds (63314, 63315 & 63316)						\$ -
63XXX	ICF 1-5 beds (63317 & 63318)						\$ -
63329	SCL 1-5 beds						\$ -
63399	Other 1-5 beds						\$ -
	<b>Community Living Supports</b>	\$ 337,752	\$ -	\$ -	\$ -		\$ 337,752
<b>Other Congregate Services</b>							
50360	Work services (work activity/sheltered work)						\$ -
64XXX	RCF 6 and over beds (64314, 64315 & 64316)	\$ 195,564					\$ 195,564
64XXX	ICF 6 and over beds (64317 & 64318)						\$ -
64329	SCL 6 and over beds						\$ -
64399	Other 6 and over beds						\$ -
	<b>Other Congregate Services Total</b>	\$ 195,564	\$ -	\$ -	\$ -		\$ 195,564
<b>Administration</b>							
11XXX	Direct Administration					689,734	\$ 689,734
12XXX	Purchased Administration					19,313	\$ 19,313
	<b>Administration Total</b>					\$ 709,047	\$ 709,047
	<b>Regional Totals</b>	\$ 7,837,543	\$ 75,509	\$ 100,019	\$ -	\$ 709,047	\$ 8,722,118
(45XX-XXX)County Provided Case Management							\$ -
(46XX-XXX)County							\$ -

<b>Provided Services</b>							
	<b>Regional Grand Total</b>						\$ 8,722,118
Transfer Numbers (Expenditures should only be counted when final expenditure is made for services/administration. Transfers are eliminated from budget to show true regional finances)							
<b>13951</b>	<b>Distribution to MHDS regional fiscal agent from member county</b>						\$ -
<b>14951</b>	<b>MHDS fiscal agent reimbursement to MHDS regional member county</b>						\$ -
*24 hour crisis line and warm line are transitioning from additional core to state wide services with state funding.							
**Core services for children with a serious emotional disturbance (SED)							

## Table B. Revenues

<b>FY 2023 Budget</b>	<b>SEIL MHDS Region</b>		
<b>Revenues</b>			
	<b>Projected Fund Balance as of 6/30/22</b>		\$ 3,231,814
	<b>Local/Regional Funds</b>		\$ -
1010	Delinquent Property Tax	-	
25XX	Other Governmental Revenues	-	
4XXX-5XXX	Charges for Services	-	
5310	Client Fees	-	
60XX	Interest	-	
6XXX	Use of Money & Property	-	
8XXX	Miscellaneous	-	
9040	Other Budgetary Funds (Polk Transfer Only)	-	
	<b>State Funds</b>		\$ 6,094,782.00
24XX	State/Federal pass thru Revenue	-	
2644	State Regional Service Payments	6,094,782	
2643	State Incentive Funds	-	
	Other	-	
	<b>Federal Funds</b>		\$ -
2345	Medicaid		
2347	American Rescue Plan Act (ARPA)		
	Other		
	<b>Total Revenues</b>		\$ 6,094,782

<b>Total Funds Available for FY2023</b>	\$ 9,326,596
<b>FY23 Actual Regional Expenditures</b>	\$ 8,722,118
<b>Accrual Fund Balance as of 6/30/2023</b>	\$ 604,478

## **G. Financial Forecasting Measures**

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

SEIL uses historical internal accounting and service data from the regions data warehouse and various other queries, in addition to external market and economic indicators from other comparable sources to engage in financial forecasting. To be reported once again, FY23 is presenting to be an even more complicated projection than years previous with the impact of administrative/organizational changes related to SF619 and the elimination of Region County Member Fund 10s. Additionally, the Covid pandemic continues to impact access to service, decimation of workforce, increased cost of face-to-face service provision, variance in cost related to tele-connected service (increase in numbers served and decrease in accompanying cost i.e. transportation, coordination, etc.), agencies' capacity to serve existing clients, agencies' inability to grow/develop additional services, etc. American Rescue Plan Act (ARPA) funds may impact the MHDS system depending on the investments made in the system, however there is concern about the administrative burden related to ARPA funds between the various levels of government and political subdivisions such as the Region's 28E organizational structure. Further complicating the maintenance and continued development of the MHDS system is the increase in inflation exacerbated by the downward financial pressure for regions to minimize their cash flow/fund balance. Unlike state government that is allowed a "rainy day fund", MHDS Regions are still obligated to restrict Fund Balance at or below 20% in FY23 and 5% each year thereafter unless a modification of those percentages is legislatively passed. The MHDS Regions' ability to project, manage, sustain, grow/develop services and address service needs ongoing, while attending to the mandated financial rules, has been extremely problematic because of the perpetual legislative changes that have been made over the past seven plus years. Breathing room for baselining the system to evaluate data inputs and outcomes has not been provided and the MHDS Regions' efforts have been further complicated by the Public Health Emergency. Systemically, business and employees have modified their practices of doing business on the fly in attempts to navigate CDC guidelines, state mandates, employer policies, and make every attempt to maintain and retain a healthy and functioning workforce to engage in their given duties. The great resignation has hit the human services industry very hard- not unlike other healthcare professions. Unfamiliarity of persons that should be key partners, inconsistent staffing patterns, reassigned work locations, and vacated/unfilled positions in the workforce have devastated business in Southeast Iowa as well as across the state.

SEIL remains focused on creating an effective continuum of care for our region residents given the availability of resources to accomplish this goal. SEIL also intends to continue our efforts with regional partners to accomplish service availability mandates in the most cost effective and population useful means possible. SEIL has definitely had to be very agile in recalibrating our forward efforts in this space with the challenges and obstacles that have presented. In the following sections, SEIL will address some of those obstacles and challenges and ways in which the region is attempting to mitigate those identified situations.

### **ADULT SERVICES**

#### **Access Centers**

Means the coordinated provision of intake assessment, screening for multi-occurring conditions, care coordination, crisis stabilization residential services, subacute mental health services, and substance abuse treatment for individuals experiencing a mental health or substance use crisis who do not need inpatient psychiatric hospital treatment, but who do need significant amounts of supports and services not available in other home and community-based settings.

SEIL, along with our partner regions of CROSS and South Central Behavioral Health Regions have designated Southern Iowa Mental Health Center as our Access Center. At present and moving into FY23 the Access Center has available for expedited crisis access- three 23 Hour Crisis Observation chairs, five Crisis Stabilization Residential beds, and 7 Subacute beds. The SEIL region also budgets for additional Access Center services with other accredited providers to ensure access to care and treatment oriented service necessity based on needs of individual and access to locations that may contribute to overall treatment success.

\*Non eligibility-based, braid funding, region pays gap for purpose of access

### **ACT (Assertive Community Treatment)**

Means a program of comprehensive outpatient services consistent with evidence-based practice standards published by the Substance Abuse and Mental Health Services Administration, provided in the community and directed toward the amelioration of symptoms and the rehabilitation of behavioral, functional, and social deficits of individuals with severe and persistent mental illness and individuals with complex symptomology who require multiple mental health and supportive services to live in the community.

SEIL has had many discussions in public forum pertaining to ACT services and the value that service component can add to the outpatient system of care/individual continuity of care. As indicated in the year previous, insufficiency in the Southeast Iowa area workforce is an obstacle for development as is the current rate structure of the service to meet all accreditation standards and fidelity measures. Lastly, there is a lack of projected data indicating the number of eligible individuals that may benefit from ACT services in addition and/or as opposed to the services that they are currently accessing. This projected utilization data must be a joint effort between Regions and MCOs to develop ACT access that is beneficial to complex need individuals, attends to financial and workforce resources, and is effective and sustainable in deriving meaningful outcomes. Beyond the projected qualifying complex needs individuals, consideration must be given to the desire of qualifying individuals in utilizing ACT services to meet their individual needs. SEIL piggy backs on the East Central Region contract with UIHC for ACT services and based on the region's perspective, it would be most pragmatic to have UIHC expand and/or add additional ACT teams in the SEIL region to address the needs of those that require this comprehensive service to manage their chronic condition. SEIL also contracts with Southern Iowa Mental Health Center for ACT services. Ongoing discussions and efforts will be made to expand the geographic footprint of ACT services within the SEIL region.

\*Eligibility-based, region start-up, braid funding, region pays gap for purpose of sustainability of a Medicaid funded service because Medicaid does not fully fund cost of service

### **Crisis Stabilization Community Based (CSCB)**

Means the same as defined in rule 441—24.20(225C). "short-term services designed to de-escalate a crisis situation and stabilize an individual following a mental health crisis and provided where the individual lives, works or recreates."

In FY22 SEIL released a Crisis Services RFP that included adult CSCB services. Five services were included in this RFP and the structure of the RFP allowed for single service bid as well as multi-service bidding. SEIL received no applications for any of the identified crisis services. In FY23 SEIL will continue to investigate CSCB for adults and how this service can be implemented in a connected/collaborative manner that provides meaningful continuity of care and financial feasibility/sustainability.

\*Non eligibility-based, braid funding, region pays gap for purpose of access of a Medicaid funded service

### **Crisis Stabilization Residential Based (CSRS)**

Means the same as defined in rule 441—24.20(225C). “short-term alternative living arrangement designed to de-escalate a crisis situation and stabilize an individual following a mental health crisis and is provided in organization-arranged settings of no more than 16 beds.”

SEIL has two contracted agencies for adult CSRS. First Resources in Fairfield and Hope Haven in Burlington are both accredited providers with 5 beds available in each of their programs. SEIL performs utilization review of these programs and takes every effort to ensure that all funding sources are pursued prior to the utilization of Region funds. Both CSRS programs are also considered a stop gap for individuals in crisis and ensuring that post crisis, individuals are connected with sustainable ongoing services to meet their needs.

\*Non eligibility-based, braid funding, region pays gap for purpose of access of a Medicaid funded service

### **Subacute**

Means the same as defined in Iowa Code section 225C.6(4)“c” and includes both subacute facility-based services and subacute community-based services. “As used in [this subsection](#), “*subacute mental health services*” means all of the following:

- (1) A comprehensive set of wraparound services for persons who have had or are at imminent risk of having acute or crisis mental health symptoms that do not permit the persons to remain in or threatens removal of the persons from their home and community, but who have been determined by a mental health professional and a licensed health care professional, subject to the professional’s scope of practice, not to need inpatient acute hospital services. For the purposes of this subparagraph, “*mental health professional*” means the same as defined in [section 228.1](#) and “*licensed health care professional*” means a person licensed under [chapter 148](#) to practice medicine and surgery or osteopathic medicine and surgery, an advanced registered nurse practitioner licensed under [chapter 152](#) or [152E](#), or a physician assistant licensed to practice under the supervision of a physician as authorized in [chapters 147](#) and [148C](#).
- (2) Intensive, recovery-oriented treatment and monitoring of the person with direct or remote access to a psychiatrist or advanced registered nurse practitioner.
- (3) An outcome-focused, interdisciplinary approach designed to return the person to living successfully in the community.
- (4) Services that may be provided in a wide array of settings ranging from the person’s home to a facility providing subacute mental health services.
- (5) Services that are time limited to not more than ten days or another time period determined in accordance with rules adopted for this purpose.”

SEIL contracts with Southern Iowa Mental Health for their licensed subacute facility services. This contract is shared between CROSS, South Central Behavioral Health and SEIL Regions. Moving into FY23, Southern Iowa mental health will have seven (7) subacute beds available for individuals in need of this level of service. The increase in beds is directly related to the provider and each of the Region's efforts to educate and market bed availability. Utilization has increased over time and this has grown to become a much needed component of the continuum of care to assist in stepping down individuals from inpatient acute as well as getting subacute users connected with necessary community based services to support their long-term needs.

\*Eligibility-based, region start-up, braid funding, region pays gap for purpose of sustainability of a Medicaid funded service because Medicaid does not fully fund cost of service

### **Intensive Residential Service Homes**

Means intensive, community-based services provided 24 hours a day, 7 days a week, 365 days a year to individuals with a severe and persistent mental illness who have functional impairments and may also have multi-occurring conditions. Providers of intensive residential service homes are enrolled with Medicaid as providers of HCBS habilitation or HCBS intellectual disability waiver supported community living *and meet additional criteria specified in sub rule 25.6(8).*

SEIL has had conversation with two service providers regarding IRSH services. First Resources and Hope Haven, along with the Region has had preliminary communications with Amerigroup about IRSH services and potential plans to move forward. It is identified that there are concerns as related to workforce shortages in order to facilitate this service. The SEIL Region is currently engaged in efforts to expand and increase workforce in human service related fields. This effort will continue into FY23, all in coordination with the East Central Region and Polk County. Efforts through additional partnerships including state authorities in Southeast Iowa with Iowa Workforce Development and Iowa Vocational Rehabilitation is also underway. In short, there is no quick means to stand up IRSH services in Southeast Iowa. Long-term efforts and strategy must be engaged in order to develop this highly skilled and complex service delivery model.

\*Eligibility-based, region start-up, braid funding, region pays gap for purpose of sustainability of a Medicaid funded service because Medicaid does not fully fund cost of service

### **Mobile Response**

Means the same as defined in rule 441—24.20(225C). "A mental health service which provides on-site, face-to-face mental health crisis services for an individual experiencing a mental health crisis. Crisis response staff providing mobile response have the capacity to intervene wherever the crisis is occurring, including but not limited to the individual's place of residence, an emergency room, police station, outpatient mental health setting, school, recovery center or any other location where the individual lives, works, attends school, or socializes."

In FY22 SEIL released a Crisis Services RFP that included adult Mobile Response services. Five services were included in this RFP and the structure of the RFP allowed for single service bid as well as multi-service bidding. SEIL received no applications for any of the identified crisis services. In FY23 SEIL will continue to investigate Mobile Response for adults, the implications of

the 988 roll out that will impact Mobile Response services, and how this service can be implemented locally given the availability of financial and workforce resources.

\*Non eligibility-based, braid funding, region pays gap for purpose of access of a Medicaid funded service

### **23 Hour Observation and Holding**

Means the same as defined in rule 441—24.20(225C). “A level of care provided for up to 23 hours in a secure and protected, medically staffed, psychiatrically supervised treatment environment.”

In FY22 SEIL released a Crisis Services RFP that included adult 23 Hour Observation and Holding services. Five services were included in this RFP and the structure of the RFP allowed for single service bid as well as multi-service bidding. SEIL received no applications for any of the identified crisis services. SEIL has access to 23 Hour Observation and Holding via Southern Iowa Mental health in Ottumwa, however it was felt that another program located in the more populated areas of the SEIL Region would be conducive to improved access without distancing individuals geographically from their community of choice. In FY23 SEIL will continue to discuss options for standing up this service with any provider capable of effectively staffing the program and in a location conducive to maximum potential for utilization. Attention will be given to financial feasibility and sustainability also.

\*Non eligibility-based, braid funding, region pays gap for purpose of access of a Medicaid funded service

## **CHILDREN SERVICES**

### **Assessment and Evaluation related to eligibility for service**

The clinical review by a mental health professional of the current functioning of the individual using the service in regard to the individual’s situation, needs, strengths, abilities, desires and goals to determine the appropriate level of care.

SEIL already contracts with our local community mental health center (CMHC) agencies/designated mental health providers for access to care for adults and children in need of assessment and evaluation. This occurs not only in the CMHCs/designated mental health providers, but also in our local EDs that may not have access to clinical staff within their system. The region also contracts for urgent Care appointments to facilitate expedited access to assessment and evaluation for children in need. Due diligence is made to ensure that primary funding sources are utilized for this service but with additional consideration of the eligibility scale of up to 500% Federal Poverty Level (FPL) for children and their families.

\*Non eligibility-based, braid funding

### **Behavioral health outpatient therapy**

Means the same as outpatient services described in Iowa Code section 230A.106(2)“a”.

“2. The initial core services identified shall include all of the following:



*a. Outpatient services.* Outpatient services shall consist of evaluation and treatment services provided on an ambulatory basis for the target population. Outpatient services include psychiatric evaluations, medication management, and individual, family, and group therapy. In addition, outpatient services shall include specialized outpatient services directed to the following segments of the target population: children, elderly, individuals who have serious and persistent mental illness, and residents of the service area who have been discharged from inpatient treatment at a mental health facility. Outpatient services shall provide elements of diagnosis, treatment, and appropriate follow-up. The provision of only screening and referral services does not constitute outpatient services.”

SEIL already contracts with our local community mental health center agencies/region system designated mental health providers for access to care for adults and children in need of outpatient service. Utilization reviews are accomplished quarterly to provide contracting insight to the level of need on behalf of the Region to facilitate connectedness of children and families to agencies that also provide pediatric IHH services and BHIS, both of which are funded through the Medicaid array.

\*Eligibility-based, braid funding, region pays fee for service for pre-authorized service

### **Education services**

Means activities that increase awareness and understanding of the causes and nature of conditions or factors which affect an individual’s development and functioning.

SEIL continues to work with local service providers and other disciplines/entities that share common mission to educate the public, families, and children to increase awareness, impart understanding, and offer resources for connectedness and referral. SEIL shall provide four (4) education opportunities at a minimum using various venues and mechanisms to accomplish our education requirements and as directed by our community needs via feedback received from stakeholders, SEIL Advisory committees, and the Governing Board. SEIL in partnership with other interested parties use multi-funding strategies to accommodate educational services. This ensures a quality cross pollination of education strategies and facilitates the opportunity to have meaningful collaboration across systems. In rural Iowa it is imperative that strong foundational working relationships be forged to accommodate the needs of the communities and use available resources judiciously.

\*Non eligibility-based, braid funding

### **Medication prescribing and management**

Management means services provided directly to or on behalf of the individual by a licensed professional as authorized by Iowa law including but not limited to, monitoring effectiveness of and compliance with a medication regime; coordination with care providers; investigation potentially negative or unintended psychopharmacologic or medical interactions; review laboratory reports; and activities pursuant to licensed prescriber orders.

Prescribing means services with the individual present provided by an appropriately licensed professional as authorized by Iowa law including but not limited to, determining how medication is affecting the individual; determining any drug interactions or adverse drug effects on the individual; determining the proper dosage level; and prescribing medication for the individual for the period of time before the individual is seen again.

SEIL already contracts with our local community mental health center agencies/region system designated mental health providers for access to care for adults and children in need of medication prescribing and management. Additional contracts will be added to accommodate increased utilization and to facilitate connectedness to agencies when new child and adolescent providers become available or are in need of recruitment and retention to answer an unmet need. As indicated previously in this report, SEIL is engaged in promoting and encouraging interest in human service related work so that services can be maintained as well as developed based on the demands of needs of our population.

\*Eligibility-based, braid funding, region pays fee for service for pre-authorized service.

### **Prevention**

Means efforts to increase awareness and understanding of the causes and nature of conditions or situations which affect an individual's functioning in society. Prevention activities are designed to convey information about the cause of conditions, situations, or problems that interfere with an individual's functioning or ways in which that information can be used to prevent their occurrences or reduce their effect and may include, but are not limited to, training events, webinars, presentations, and public meetings.

SEIL is working with local service providers and other disciplines/entities that share common mission to promote prevention. Prevention will be made available to the public, families, and children to increase awareness, impart understanding, and offer resources for connectedness to service that sufficiently addresses need. Emphasis will be placed on the effects of trauma and the social determinants of health.

\*Non eligibility-based, braid funding

### **Behavioral health inpatient treatment**

Inpatient psychiatric services to treat an acute psychiatric condition provided in a licensed hospital with a psychiatric unit or a licensed freestanding psychiatric hospital.

Pediatric inpatient utilization for children living in the SEIL region remains a complete data unknown except for children that are subject to a 229 mental health court order, of which the SEIL Region receives notification of order and other corresponding costs associated with the mental health order (i.e. transportation). SEIL is working with knowledgeable partners in identifying how frequently inpatient placement occurs, for what amounts of time, and what are the obstacles and barriers for accessing inpatient services when clinical need has been determined for this level of service. An additional effort related to inpatient treatment is SEIL's participation in statewide discussions for Psychiatric Intensive Care (PIC). Attending to service availability for children with complex co-morbidities is a sound effort to ensure the full continuum of care for Iowa's population service need.

\*Eligibility-based, braid funding, region pays fee for service for pre-authorized service

### **Crisis stabilization community-based services (CSCB)**

Same as adult definition above.

CSCB is currently available in 3 of the SEIL Region's eight counties via American Home Finding out of Agency, Iowa. In FY22 SEIL released a Crisis Services RFP that included children's CSCB services without any geographic limitation on CSCB within the SEIL Region. Five services in all were included in this RFP and the structure of the RFP allowed for single service bid as well as multi-service bidding. SEIL received no applications for any of the identified crisis services including Children's CSCB. In FY23 SEIL will continue to have conversation about CSCB services with specific attention to those counties that lack

coverage and SEIL will make effort to address the barriers with providers to be able to staff as well as finance this service.

\*Non eligibility-based, braid funding, region pays gap for purpose of access of a Medicaid funded service

### **Crisis stabilization residential services**

Same as adult definition above.

SEIL, along with our region partners CROSS and South Central Behavioral Health Regions, have collaborated with American Home Finding to create children's CSRS. In FY22, many obstacles presented in the development of this service. One of the primary obstacles was the regulations on the physical plant of the facility to meet expectation. Construction of the addition of rooms, upgrading of sprinkler system, access to water system with sufficient capacity to support the requirements of the sprinkler system and septic issues all added to the delay in implementation. Further, there was an identified need to have an Electronic Health Record (EHR) that was capable of meeting the needs of the service and assist with electronic billing of MCOs. American Home Finding has diligently committed themselves to this work and has gone above and beyond to make the service available to children and families. SEIL looks forward to a full year of service and the prospect of expanded knowledge and utilization of the service by those in need.

\*Non eligibility-based, braid funding, region pays gap for purpose of access of a Medicaid funded service

### **Early identification**

Means the process of detecting developmental delays, mental illness, or untreated conditions that may indicate the need for further evaluation.

SEIL continues to work with our early childhood experts, Area Education Agency (AEA), primary care physician, etc. to ensure expeditious identification of potential conditions that may negatively impact pediatric growth and development into a healthy and productive citizen. SEIL is adamant that early intervention is not a standalone service but the entry to a continuum of care that attends to the individualized needs of the child and the family. Our vested partners must know each other and be able to assist the family in navigating next steps as well as access to care. In these situations, the need for active coordination by the parties involved is shared and must be approached from a person centered, whole health, social determinants of health approach with acceptance of care and responsibility to the family. To do anything less is exclusively resource and referral which may not be sufficient to meet the needs of the child or family.

\*Non eligibility-based, braid funding

### **Early intervention**

Means services designed to address the social, emotional, and developmental needs of children at their earliest stages to decrease long-term effects and provide support in meeting developmental milestones.

SEIL is working with our early childhood experts, AEA, community mental health providers, children services agencies, etc. to promote early interventions related to potential conditions that may negatively impact pediatric growth and development into a healthy and productive citizen. Just as mentioned in early identification above, early intervention is a component of a continuum of care. In

the SEIL region there are vested partners in addressing early intervention needs across various environments in which children and families are engaged. Active service, acceptance of responsibility, and commitment to communicating/working with other partners to attend to unique needs of the child and family is the obligation to achieve desirable and optimal outcomes/success. Service delivery that is warm and welcoming to the child and family is incredibly important also to ensuring the continued engagement in the helping process.

\*Non eligibility-based, braid funding

### **Mobile response**

Same as adult definition above.

In FY22 SEIL released a Crisis Services RFP that included children's Mobile Response services. Five services were included in this RFP and the structure of the RFP allowed for single service bid as well as multi-service bidding. SEIL received no applications for any of the identified crisis services. In FY23 SEIL will continue to investigate Mobile Response for children, the implications of the 988 roll out that will impact Mobile Response services, and how this service can be implemented locally given the availability of financial and workforce resources.

\*Non eligibility-based, braid funding, region pays gap for purpose of access of a Medicaid funded service

## **H. Provider Reimbursement Provisions**

The following is a description of the types of funding used by SEIL.

The SEIL Region will contract with MHDS providers whose base of operation is within or near to the geography of our region. SEIL maintains Memorandums of Understandings with Region partners on various services that the region partners have collaborated in the development and financial maintenance of service. SEIL may also honor contracts that other regions have with their local providers. A contract may not be required with providers that provide one-time or as needed services, so long as less than 12 individuals are served by the provider or have an annual dollar amount less than \$50,000. Beyond these thresholds, SEIL will pursue a contract with said provider(s).

SEIL will ensure that MHDS services are available to all residents of the region regardless of funding source. It is SEIL's expectation 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. SEIL will not supplant other funding sources however, the SEIL Region will assist individuals transitioning into Medicaid funded eligibility-based services with a maximum bridge funding of 90 days to access the sufficiently identified, need verified, and requested eligibility-based service.

A fee for service approach will be utilized in most eligibility-based service provider contracts outlining the services to be provided and the rate of reimbursement. All payments for eligibility-based services will be based on a pre-authorized request for service authorization. Non eligibility-based emergency and crisis services contracting will be accomplished utilizing billing methodology based on actual cost with maximum projected fees based off of a mutually agreed upon projected budget. Please see the below for more detail in the mechanics of provider reimbursements.

Each service provider shall provide monthly billing invoices and other information requested of the provider for utilization review. The monthly billings shall include the following information/data points:

- Name and unique identifier of each individual served during the reporting period.
- Number of units of service delivered to each individual served.
- When requested, attendance records.
- Unit rate and total cost of the units provided to each individual co-payment or other charges billed to other sources shown as deductions on the billing.
- Verification of non-payment from other funding sources when the region is invoiced for a service with a contracted provider based on a capitated program rate fee structure.
- Actual amount to be charged to SEIL for each individual for the period.
- The invoice must contain the provider name, address, invoice date, invoice number, and signature.

SEIL staff shall review the billings and additional utilization information in comparison with service funding authorizations in place. Eligibility (pre-authorized) based services billed without service funding authorization shall be deducted from the billing.

SEIL uses a mix of fee-for-service, and capitated program rates for most of its non eligibility-based/Crisis services. It provides the Medicaid fee for service rate for Region eligible individuals and gap funding for actual cost that is not the obligation of other funding sources. SEIL and our provider network ensures 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. These services are identified in contract and reviewed annually at minimum.

SEIL intends to partner with the Department of Human Services/Managed Care Organizations to help incorporate all sources of funding including medical assistance program funding, so that a person can receive benefits conducive to a whole person approach to health and wellness. Attention needs to be given to financing services efficiently by leveraging federal match for all Medical Assistance Program fundable services and also analyzing service utilization to ensure state funds allocated to Regions are being used in a prudent and financially sustainable manner. SEIL would also propose that Medicaid rates for reimbursement be reevaluated to reflect the actual cost of service provision as this has profound impact on service availability and issues pertaining to workforce sufficiency.

SEIL service contracts require that all providers meet all applicable licensure, accreditations, designation, or certification standards; however, SEIL will make serious efforts to stimulate access to more natural supports and/or non-traditional providers in its service provider network. Successful attainment of positive outcomes, individual and family satisfaction, cost effective measures are the most important factors in continued network participation. SEIL has identified access points within each county of the region congruent with the physical location of that county's disability service coordinator to assist individuals or their representatives to apply for services.

**In regards to resources above the \$2000 / \$3000 limit in administrative rule for FY22, the SEIL Region does not allow for financial support for any eligibility-based service to a person(s) that exceeds the minimum resource limits.**

SEIL Governing Board

Voting- elected official	Voting- elected official
<p style="text-align: center;"><b>Lee County</b></p> <p>Rick Larkin, Chairman            1304 Avenue B,            Ft Madison, IA 52627            319-470-7744  <a href="mailto:rickleolarkin@gmail.com">rickleolarkin@gmail.com</a></p> <p>Alternate Ron Fedler            933 Avenue H, PO Box 190            Ft Madison, IA 52627            319-372-6557  <a href="mailto:rfedler@leecounty.org">rfedler@leecounty.org</a></p>	<p style="text-align: center;"><b>Jefferson County</b></p> <p>Dee Sandquist            51 E Briggs,            Fairfield, IA 52556            641-451-1293  <a href="mailto:dsandquist@jeffersoncountyiowa.com">dsandquist@jeffersoncountyiowa.com</a></p> <p>Alternate Susie Drish            51 E Briggs,            Fairfield, IA 52556            641-919-3741  <a href="mailto:susie@jeffersoncountyia.com">susie@jeffersoncountyia.com</a></p>
<p style="text-align: center;"><b>Washington County</b></p> <p>Jack Seward, Jr, Vice Chair            2030 Hemlock Avenue,            West Chester, IA 52359            319-461-9045  <a href="mailto:jseward@co.washington.ia.us">jseward@co.washington.ia.us</a></p> <p>Alternate Richard Young            PO Box 889, 222 West Main Street            Washington, IA 52353            319-653-7711  <a href="mailto:ryoung@co.washington.ia.us">ryoung@co.washington.ia.us</a></p>	<p style="text-align: center;"><b>Keokuk County</b></p> <p>Fred Snakenberg            19088 235<sup>th</sup> Ave.,            Sigourney, IA 52591            641-622-2902  <a href="mailto:fsnakenberg@keokukcountyia.com">fsnakenberg@keokukcountyia.com</a></p> <p>Alternate Michael Hadley            101 S Main,            Sigourney, IA 52591            641-622-2901</p>
<p style="text-align: center;"><b>Henry County</b></p> <p>Marc Lindeen, Secretary            100 East Washington,            Mt Pleasant, IA 52641</p>	<p style="text-align: center;"><b>Louisa County</b></p> <p>Randy Griffin            13791 Co. Rd. 252,            Letts, IA 52754</p>

<p>319-931-0760  <a href="mailto:supervisors@henrycountyiowa.us">supervisors@henrycountyiowa.us</a>          Alternate Chad White          100 East Washington Street,          Mt Pleasant, IA 52641          319-931-2802  <a href="mailto:supervisors@henrycountyiowa.us">supervisors@henrycountyiowa.us</a></p>	<p>319-850-0815  <a href="mailto:rgriffin@louisacomm.net">rgriffin@louisacomm.net</a>          Alternate Chris Ball          8945 Co. Rd. H22,          Mediapolis, IA 52637          319-209-0454  <a href="mailto:cball@louisacountyia.gov">cball@louisacountyia.gov</a></p>
<p><b>Des Moines County</b>          Tom Broeker          513 N. Main,          Burlington, IA 52601          319-759-1166  <a href="mailto:broekert@dmcounty.com">broekert@dmcounty.com</a>          Alternate          Vacant</p>	<p><b>Van Buren County</b>          Mark Meek          303 First Street,          Bonaparte, IA 52620          319-931-4322  <a href="mailto:tugboat@netins.net">tugboat@netins.net</a>          Alternate Robert Waugh          406 Dodge St PO Box 475,          Keosauqua, IA 52565          319-293-3129</p>
<p>Voting- non elected official</p>	<p>Voting-non elected official</p>
<p>Adult Individual or Family Representative of person with lived experience- Open          Wendy Eland  <a href="mailto:weland58@gmail.com">weland58@gmail.com</a></p>	<p>Parent/Family Representative of child accessing behavioral health services          Tricia Lipski  <a href="mailto:tricialipski@iowatelecom.net">tricialipski@iowatelecom.net</a>  <a href="mailto:tricialipski@gmail.com">tricialipski@gmail.com</a></p>
	<p>Education Representative of children with SED          Mark Schneider          PO Box 150,          Wellman, IA 52356</p>

	319-936-8601 <a href="mailto:mschneider@mphawks.org">mschneider@mphawks.org</a>
Ex-officio- non voting	Ex-officio- non voting
Adult Service Provider  Tracy Liptak  301 West Burlington Ave. Fairfield, IA  52556  641-472-5771  <a href="mailto:tliptak@optimaelifeservices.com">tliptak@optimaelifeservices.com</a>	Children's Service Provider  Ezra Allen  302 West Church St  Marshalltown, IA 50158  515-400-7578  <a href="mailto:ezra.allen@lsiowa.org">ezra.allen@lsiowa.org</a>

### Adult Advisory Committee

<b>Person with Lived Experience/Family member of Person with Lived Experience and/or Disability</b>	Wendy Eland Sandy Stever
<b>Adult Service Provider</b>	Tracy Liptak-Optimae Cheryl Plank- Hope Haven Christina Schark- Southern Iowa Mental Health Stephanie Millard- First Resources Marquise Lewis- DVIP
<b>SEIL Governing Board</b>	Tom Broeker, Des Moines Co. BOS



### Children's Advisory Committee

<b>Parent/Family Representative of child accessing behavioral health services</b>	Tricia Lipski
<b>The Education System</b>	<p>Mark Schneider, Mid Prairie Community School District</p> <p>Lori LaFrenz, Lincoln Elementary Mount Pleasant</p> <p>Cory Johnson, Burlington Community School District</p> <p>Linda Boshart, Great Prairie AEA</p> <p>Jen Weidman, Washington Community Schools</p> <p>Martha Peterson, Mt. Pleasant Community School District</p> <p>Rachael Kunzler, Maharishi International University</p> <p>Sara Westercamp, Mt. Pleasant Community School District</p> <p>Matt Smith, Fairfield Community School District</p>
<b>Early Childhood Advocates</b>	<p>Ginger Knisley, ECI</p> <p>Tasha Beghtol, ECI</p> <p>Tessa Schroeder, 1<sup>st</sup> Five HMDI Coordinator</p> <p>Christine Van Berkum, Lee County Health Dept.</p> <p>Roberta Sloat, 1<sup>st</sup> Five HMDI Coordinator</p> <p>Tammy Wetjen-Kesterson, ECI, Decat &amp; CPPC</p> <p>Pat McReynolds, ECI</p> <p>Sarah Smith, Maternal Child &amp; Adolescent Coordinator</p> <p>Amy McLaughlin, Parent's as Teachers Supervisor</p>
<b>Child Welfare Advocates</b>	<p>Nicole Mann, Decat</p> <p>Arin Jones, Community Partnership for Protecting Children</p> <p>Elizabeth Webster, Social Work Supervisor</p> <p>Kris Rankin, SAFE Coalition &amp; Best You Coalition</p> <p>Amy Huntington, DHS</p> <p>Amy Brown, Rape Victim Advocacy Program</p>
<b>Children's Behavioral Health Service Providers</b>	<p>Sara Butler, Young House Family Services</p> <p>Mike Maher, Counseling Associates</p> <p>Ezra Allen, Lutheran Services in Iowa</p>
<b>Juvenile Court System</b>	<p>Troy Seeley, Juvenile Court Officer</p> <p>Carrie Folkerts, SIACC</p>
<b>Pediatrician/Family Practice</b>	Cheryll Jones, Nurse Practitioner
<b>Child Care Provider</b>	<p>Jennifer Rehm, Head Start</p> <p>Matt Leclere, Head Start</p> <p>Kyeanne Forbess, Head Start</p> <p>Leah Haberichter, Head Start</p> <p>Tamee DeCoursey, Head Start</p>
<b>Local Law Enforcement</b>	Bradley Gillis, Mt. Pleasant Police Dept./CIT Trainer
<b>SEIL Governing Board</b>	Jack Seward, Jr. Washington Co. BOS