

Mental Health & Disability Services Redesign QUICK REVIEW

The “Advocate’s Guide to Mental Health and Disability Services Reform” has a lot of information, and the information is pretty complicated. This “Quick Review” will help you remember some of the more important pieces of information from the Guide.

WHY redesign the system?

- To make sure lowans with disabilities have access to the same menu of services, no matter where they live.
- To provide a more equal and stable way of paying for the system, so funding keeps up with demand. Funding for the new system is still up in the air, so the success of redesign is also up in the air.

WHO will this effect?

- Anyone that receives services, provides services, or has a family member receiving services.
- How much you feel the effects, and whether they are positive or negative, will depend on your county, your disability, and your income. All inequities that redesign hoped to fix, but did not.

HOW does the system change?

- Core services are expanded and must be available to people regardless of where they live and who pays their bill, but only as funding allows.
- Eligibility for services is limited in order to contain costs. People with developmental disabilities and brain injuries are left off the list of those eligible.
- State now pays for all Medicaid services. Non-Medicaid services and services to people not eligible for Medicaid will be paid for with county property taxes.
- Legal settlement is ended and the system will move from a county-managed one, to one managed by regions.

HOW are we going to pay for the new system?

- The state keeps \$170 million that had been going to counties, and got an extra \$40 million to cover the shortfall. The state will then pay for all Medicaid services. If there isn’t enough money, they may start waiting lists.
- Counties will continue to raise money through property taxes to pay for non-Medicaid services, but they are only allowed to raise up to \$47.28 per person living in the county.
- For some counties, that means taxes will be cut and the county will have to cut spending on services. For others, the state will make up the difference, but that probably only helps them pay for the services they provide now (not the new list of core services).

WHEN will the changes happen?

- 🔊 **July 1, 2012:** State pays for Medicaid services; bills disputed by counties are written off; and DHS begins providing technical assistance to counties forming regions. Sometime after this date, all counties will use the same functional assessments to determine service needs.
- 🔊 **April 1, 2013:** Counties may voluntarily join a region.
- 🔊 **May 1, 2013:** Counties wanting to be a single county region or a two-county region must request waivers.
- 🔊 **July 1, 2013:** Counties not in a region will be assigned a region by DHS
- 🔊 **December 31, 2013:** All counties in a region (unless waived).
- 🔊 **July 1, 2013:** Core services and new limits on eligibility go into effect. Property tax changes and the new “per capita equalization” formula go into effect July 1, 2013. Legal settlement ends.
- 🔊 **July 1, 2014:** Regions are to be fully operational.

WHAT can I do?

- 🔊 TBA

WHERE can I find more information?

- 🔊 www.infonetiowa.com
- 🔊 www.dhs.state.ia.us/Partners/MHDSRedesign.html
- 🔊 www.legis.iowa.gov/Schedules/Interim.aspx
- 🔊 To get on redesign email contact lists, email jschroe3@dhs.state.ia.us.