



CICS

Supporting Individuals. Strengthening Communities.

Regional Governing Board

January 25, 2024 @ 1:00 PM

Story County Administration Building
900 6th Street, Nevada, Iowa 50201

SPECIAL NOTE TO THE PUBLIC: Members of the public who would like to call in: 1-312-626-6799

Meeting ID: 856 5155 9472, Passcode: 878794

or Join the Zoom Meeting at <https://us06web.zoom.us/j/85651559472?pwd=0z88Fx5cSRraSaYMIlqdbcOZP2JFqn.1>

Tentative Agenda

1) Roll Call

- Kendra Alexander
- Scott Hand
- Dennis Quinn
- Allie Wulfekuhle

- Phil Clifton
- Lisa Heddens
- Gary Rayhons

- JD Deambra
- Jerry Kloberdanz
- Julie Smith

- Andrea Dickerson
- Richard Lukensmeyer
- Brandon Talsma

2) Agenda (Brandon Talsma, Chair)

January 25, 2024 Agenda

Action

Board Chair asks for motion to approve

Motion by: _____

Second: _____

Vote on motion: _____

3) Minutes (Brandon Talsma, Chair)

November 16, 2023 and January 10, 2024 Minutes

Action

Board Chair asks for motion to approve

Motion by: _____

Second: _____

Vote on motion: _____

4) Administration (Russell Wood, CEO)

Update on Legislation and HHS Alignment Topics – Possible appointment of committee/next steps

Action

Board Chair asks for motion

Motion by: _____

Second: _____

Vote on motion: _____

Employee MOUs (Betsy Stursma)

Action

Brenda Daily revised MOU, Holly Coogler, Caitlyn Dellinger, Kaitlyn Hoeft, Kasey Dierks, Angela Scudder

Board Chair asks for motion

Motion by: _____

Second: _____

Vote on motion: _____

Abstaining: _____

CICS Children’s Behavioral Health Advisory Committee Appointment (Robin McKee) – Christa Mattly

Action

Board Chair asks for motion

Motion by: _____

Second: _____

Vote on motion: _____

Abstaining: _____

Central Iowa Juvenile Detention Therapist (Russell Wood)

Action

Board Chair asks for motion

Motion by: _____

Second: _____

Vote on motion: _____

Abstaining: _____

Office Space - Story County

Action

Board Chair asks for motion

Motion by: _____

Second: _____

Vote on motion: _____

Abstaining: _____

5) Finance (Betsy Stursma)

Claims November 28, December 12 and 22, 2023 and January 9 and 23, 2024

Action

Board Chair asks for motion

Motion by: _____

Second: _____

Vote on motion: _____

Roll call vote (mark if ‘aye’)

- Kendra Alexander
- Scott Hand
- Dennis Quinn
- Allie Wulfekuhle

- Phil Clifton
- Lisa Heddens
- Gary Rayhons

- JD Deambra
- Jerry Kloberdanz
- Julie Smith

- Andrea Dickerson
- Richard Lukensmeyer
- Brandon Talsma

November and December Expenditure Reports

Informational



Preliminary Budget Conversation

Informational

FY25 Wage Discussion and Direction

Action

Board Chair asks for motion

Motion by: _____

Second: _____

Vote on motion: _____

Roll call vote (mark if 'aye')

- | | | | |
|---|---------------------------------------|---|--|
| <input type="checkbox"/> Kendra Alexander | <input type="checkbox"/> Phil Clifton | <input type="checkbox"/> JD Deambra | <input type="checkbox"/> Andrea Dickerson |
| <input type="checkbox"/> Scott Hand | <input type="checkbox"/> Lisa Heddens | <input type="checkbox"/> Jerry Kloberdanz | <input type="checkbox"/> Richard Lukensmeyer |
| <input type="checkbox"/> Dennis Quinn | <input type="checkbox"/> Gary Rayhons | <input type="checkbox"/> Julie Smith | <input type="checkbox"/> Brandon Talsma |
| <input type="checkbox"/> Allie Wulfekuhle | | | |

6) Planning and Program Development (Jen Sheehan)

Contracts

Action

CFR Building Purchase

Board Chair asks for motion

Motion by: _____

Second: _____

Vote on motion: _____

Roll call vote (mark if 'aye')

- | | | | |
|---|---------------------------------------|---|--|
| <input type="checkbox"/> Kendra Alexander | <input type="checkbox"/> Phil Clifton | <input type="checkbox"/> JD Deambra | <input type="checkbox"/> Andrea Dickerson |
| <input type="checkbox"/> Scott Hand | <input type="checkbox"/> Lisa Heddens | <input type="checkbox"/> Jerry Kloberdanz | <input type="checkbox"/> Richard Lukensmeyer |
| <input type="checkbox"/> Dennis Quinn | <input type="checkbox"/> Gary Rayhons | <input type="checkbox"/> Julie Smith | <input type="checkbox"/> Brandon Talsma |
| <input type="checkbox"/> Allie Wulfekuhle | | | |

Easterseals Multi-Systemic Therapy

Board Chair asks for motion

Motion by: _____

Second: _____

Vote on motion: _____

Roll call vote (mark if 'aye')

- | | | | |
|---|---------------------------------------|---|--|
| <input type="checkbox"/> Kendra Alexander | <input type="checkbox"/> Phil Clifton | <input type="checkbox"/> JD Deambra | <input type="checkbox"/> Andrea Dickerson |
| <input type="checkbox"/> Scott Hand | <input type="checkbox"/> Lisa Heddens | <input type="checkbox"/> Jerry Kloberdanz | <input type="checkbox"/> Richard Lukensmeyer |
| <input type="checkbox"/> Dennis Quinn | <input type="checkbox"/> Gary Rayhons | <input type="checkbox"/> Julie Smith | <input type="checkbox"/> Brandon Talsma |
| <input type="checkbox"/> Allie Wulfekuhle | | | |



Elevate Housing Foundation – IRSH Fort Dodge

Board Chair asks for motion

Motion by: _____

Second: _____

Vote on motion: _____

Roll call vote (mark if 'aye')

- | | | | |
|---|---------------------------------------|--|--|
| <input type="checkbox"/> Kendra Alexander | <input type="checkbox"/> Phil Clifton | <input type="checkbox"/> JD Deambra | <input type="checkbox"/> Andrea Dickerson |
| <input type="checkbox"/> Scott Hand | <input type="checkbox"/> Lisa Heddens | <input type="checkbox"/> Jerry Klobberdanz | <input type="checkbox"/> Richard Lukensmeyer |
| <input type="checkbox"/> Dennis Quinn | <input type="checkbox"/> Gary Rayhons | <input type="checkbox"/> Julie Smith | <input type="checkbox"/> Brandon Talsma |
| <input type="checkbox"/> Allie Wulfekuhle | | | |

Elevate Housing Foundation – IRSH Indianola

Board Chair asks for motion

Motion by: _____

Second: _____

Vote on motion: _____

Roll call vote (mark if 'aye')

- | | | | |
|---|---------------------------------------|--|--|
| <input type="checkbox"/> Kendra Alexander | <input type="checkbox"/> Phil Clifton | <input type="checkbox"/> JD Deambra | <input type="checkbox"/> Andrea Dickerson |
| <input type="checkbox"/> Scott Hand | <input type="checkbox"/> Lisa Heddens | <input type="checkbox"/> Jerry Klobberdanz | <input type="checkbox"/> Richard Lukensmeyer |
| <input type="checkbox"/> Dennis Quinn | <input type="checkbox"/> Gary Rayhons | <input type="checkbox"/> Julie Smith | <input type="checkbox"/> Brandon Talsma |
| <input type="checkbox"/> Allie Wulfekuhle | | | |

Elevate Housing Foundation – IRSH Marshalltown

Board Chair asks for motion

Motion by: _____

Second: _____

Vote on motion: _____

Roll call vote (mark if 'aye')

- | | | | |
|---|---------------------------------------|--|--|
| <input type="checkbox"/> Kendra Alexander | <input type="checkbox"/> Phil Clifton | <input type="checkbox"/> JD Deambra | <input type="checkbox"/> Andrea Dickerson |
| <input type="checkbox"/> Scott Hand | <input type="checkbox"/> Lisa Heddens | <input type="checkbox"/> Jerry Klobberdanz | <input type="checkbox"/> Richard Lukensmeyer |
| <input type="checkbox"/> Dennis Quinn | <input type="checkbox"/> Gary Rayhons | <input type="checkbox"/> Julie Smith | <input type="checkbox"/> Brandon Talsma |
| <input type="checkbox"/> Allie Wulfekuhle | | | |

Elevate Housing Foundation – IRSH Newton

Board Chair asks for motion

Motion by: _____

Second: _____

Vote on motion: _____

Roll call vote (mark if 'aye')

- | | | | |
|---|---------------------------------------|--|--|
| <input type="checkbox"/> Kendra Alexander | <input type="checkbox"/> Phil Clifton | <input type="checkbox"/> JD Deambra | <input type="checkbox"/> Andrea Dickerson |
| <input type="checkbox"/> Scott Hand | <input type="checkbox"/> Lisa Heddens | <input type="checkbox"/> Jerry Klobberdanz | <input type="checkbox"/> Richard Lukensmeyer |
| <input type="checkbox"/> Dennis Quinn | <input type="checkbox"/> Gary Rayhons | <input type="checkbox"/> Julie Smith | <input type="checkbox"/> Brandon Talsma |
| <input type="checkbox"/> Allie Wulfekuhle | | | |



Optimae – IRSH Ames

Board Chair asks for motion

Motion by: _____

Second: _____

Vote on motion: _____

Roll call vote (mark if 'aye')

- | | | | |
|---|---------------------------------------|--|--|
| <input type="checkbox"/> Kendra Alexander | <input type="checkbox"/> Phil Clifton | <input type="checkbox"/> JD Deambra | <input type="checkbox"/> Andrea Dickerson |
| <input type="checkbox"/> Scott Hand | <input type="checkbox"/> Lisa Heddens | <input type="checkbox"/> Jerry Klobberdanz | <input type="checkbox"/> Richard Lukensmeyer |
| <input type="checkbox"/> Dennis Quinn | <input type="checkbox"/> Gary Rayhons | <input type="checkbox"/> Julie Smith | <input type="checkbox"/> Brandon Talsma |
| <input type="checkbox"/> Allie Wulfekuhle | | | |

7) Planning and Program Development (Meghan Freie)

FY24 Contracts Signed by CEO - 43 North Iowa, Berryhill, Together We Can, Inc.

Informational

Rural Policy Partners – Provider Network Development

Action

Board Chair asks for motion

Motion by: _____

Second: _____

Vote on motion: _____

Roll call vote (mark if 'aye')

- | | | | |
|---|---------------------------------------|--|--|
| <input type="checkbox"/> Kendra Alexander | <input type="checkbox"/> Phil Clifton | <input type="checkbox"/> JD Deambra | <input type="checkbox"/> Andrea Dickerson |
| <input type="checkbox"/> Scott Hand | <input type="checkbox"/> Lisa Heddens | <input type="checkbox"/> Jerry Klobberdanz | <input type="checkbox"/> Richard Lukensmeyer |
| <input type="checkbox"/> Dennis Quinn | <input type="checkbox"/> Gary Rayhons | <input type="checkbox"/> Julie Smith | <input type="checkbox"/> Brandon Talsma |
| <input type="checkbox"/> Allie Wulfekuhle | | | |

Provider Network Development Provider Incentives

Board Chair asks for motion

Motion by: _____

Second: _____

Vote on motion: _____

Roll call vote (mark if 'aye')

- | | | | |
|---|---------------------------------------|--|--|
| <input type="checkbox"/> Kendra Alexander | <input type="checkbox"/> Phil Clifton | <input type="checkbox"/> JD Deambra | <input type="checkbox"/> Andrea Dickerson |
| <input type="checkbox"/> Scott Hand | <input type="checkbox"/> Lisa Heddens | <input type="checkbox"/> Jerry Klobberdanz | <input type="checkbox"/> Richard Lukensmeyer |
| <input type="checkbox"/> Dennis Quinn | <input type="checkbox"/> Gary Rayhons | <input type="checkbox"/> Julie Smith | <input type="checkbox"/> Brandon Talsma |
| <input type="checkbox"/> Allie Wulfekuhle | | | |

NAMI – Support Groups Proposal

Board Chair asks for motion

Motion by: _____

Second: _____

Vote on motion: _____

Roll call vote (mark if 'aye')

- | | | | |
|---|---------------------------------------|--|--|
| <input type="checkbox"/> Kendra Alexander | <input type="checkbox"/> Phil Clifton | <input type="checkbox"/> JD Deambra | <input type="checkbox"/> Andrea Dickerson |
| <input type="checkbox"/> Scott Hand | <input type="checkbox"/> Lisa Heddens | <input type="checkbox"/> Jerry Klobberdanz | <input type="checkbox"/> Richard Lukensmeyer |
| <input type="checkbox"/> Dennis Quinn | <input type="checkbox"/> Gary Rayhons | <input type="checkbox"/> Julie Smith | <input type="checkbox"/> Brandon Talsma |
| <input type="checkbox"/> Allie Wulfekuhle | | | |



The Bridge Home – Permanent Supportive Housing

Board Chair asks for motion

Motion by: _____

Second: _____

Vote on motion: _____

Roll call vote (mark if 'aye')

- | | | | |
|---|---------------------------------------|---|--|
| <input type="checkbox"/> Kendra Alexander | <input type="checkbox"/> Phil Clifton | <input type="checkbox"/> JD Deambra | <input type="checkbox"/> Andrea Dickerson |
| <input type="checkbox"/> Scott Hand | <input type="checkbox"/> Lisa Heddens | <input type="checkbox"/> Jerry Kloberdanz | <input type="checkbox"/> Richard Lukensmeyer |
| <input type="checkbox"/> Dennis Quinn | <input type="checkbox"/> Gary Rayhons | <input type="checkbox"/> Julie Smith | <input type="checkbox"/> Brandon Talsma |
| <input type="checkbox"/> Allie Wulfekuhle | | | |

SATUCI – Contract Amendment for Jail Services

Board Chair asks for motion

Motion by: _____

Second: _____

Vote on motion: _____

Roll call vote (mark if 'aye')

- | | | | |
|---|---------------------------------------|---|--|
| <input type="checkbox"/> Kendra Alexander | <input type="checkbox"/> Phil Clifton | <input type="checkbox"/> JD Deambra | <input type="checkbox"/> Andrea Dickerson |
| <input type="checkbox"/> Scott Hand | <input type="checkbox"/> Lisa Heddens | <input type="checkbox"/> Jerry Kloberdanz | <input type="checkbox"/> Richard Lukensmeyer |
| <input type="checkbox"/> Dennis Quinn | <input type="checkbox"/> Gary Rayhons | <input type="checkbox"/> Julie Smith | <input type="checkbox"/> Brandon Talsma |
| <input type="checkbox"/> Allie Wulfekuhle | | | |

Dayton Doggie Dude/Rescue Ranch

Informational

8) Public Comments

Board Chair asks for public comments at this time

9) Calendar Year 2024 Meeting Dates

Discussion





CICS

Supporting Individuals. Strengthening Communities.

Regional Governing Board Meeting Minutes

November 16, 2023 @ 1:00 PM

Story County Administration Building

Board Members Present: Phil Clifton, JD Deambra, Andrea Dickerson, Scott Hand, Lisa Heddens, Jerry Kloberdanz, Richard Lukensmeyer, Dennis Quinn, Gary Rayhons, Julie Smith, Brandon Talsma. **Members Absent:** Kendra Alexander, Allie Wulfekuhle. **Leadership Team Present:** Linn Adams, Meghan Freie, Liza Maxwell, Jen Sheehan, Karla Webb, Russell Wood. **Others Present:** Rachel Adams – Polk County, Cary Williams - CFR

Motion to approve the November 16, 2023 agenda with the Eyerly Ball action item removed as requested. Motion by Rayhons, second by Kloberdanz to approve the agenda as amended. All ayes, motion carried.

Motion to approve the September 28, 2023 minutes. Motion by Clifton, second by Lukensmeyer. All ayes, motion carried.

Brandon Talsma presented Linn Adams and Kathy Johnson with years of service as they are retiring in December. Adams is retiring with 38 years of service. Kathy Johnson is retiring with 25 years of service.

Wood explained that it is difficult for the two Service Coordination Officers to each supervise 10 staff. He is requesting that two Service Coordinators be promoted to Service Coordination Supervisors and replaced. If there is not internal interest than he would like to be able to advertise for these two positions. With the additional staff CICS would still have fewer staff than in 2021 when the four newest counties joined CICS. **Motion by Rayhons to approve additional staff as recommended, second by Clifton. All ayes on roll call vote. Motion carried.**

Karla Webb, Operation Officer presented the FY23 CICS Annual Report. Webb explained various items throughout the report and how the information is gathered each year. All information provided in the report for income and expenses is most accurate at the time the report was sent out. If updated numbers are obtained the report will be updated to reflect those numbers. **Motion by Heddens, second by Smith to approve the FY23 Annual Report with the understanding that the dollar amounts in the report may change depending on the audit. All ayes, motion carried.**

Webb presented the claims for October 3, 17, 31, and November 14, 2023. **Motion by Heddens, second by Kloberdanz to approve the claims as presented. All ayes, motion carried on roll call vote.**

Wood presented the FY23 Ending Fund Balance Report Certification. The target was to have the ending fund balance below 20% and CICS is at 19%. That means CICS should not see a reduction in state funding this year. **Motion to approve authorizing Talsma and Wood to sign the FY23 Ending Fund Balance Report Certification with the understanding that the amount may change depending upon the audit. Motion by Deambra, second by Quinn. All ayes, motion carried on roll call vote.**

Webb presented the September and October expenditure report.

Meghan Freie, Planning and Development Officer presented the FY24 contracts signed by CEO.

Jen Sheehan, Planning and Development Officer presented the Community and Family Resources FY24 contract amendment. This is to put a treatment provider in place for Story County Mental Health Court which is beginning in January. This is for non-billable time required for the provider's peer support staff and clinician. This amount is comparable to others throughout the state. **Motion by Heddens, second by Deambra to approve the Community and Family Resources FY24 contract amendment. All ayes, motion carried. Hand and Kloberdanz abstained.**

Sheehan presented the Polk County General Services (Polk County MHDS) agreement. Polk is partnering with others and would like to partner with CICS for their 23-hour crisis observation services, behavioral health urgent care and a sobering center. This would be complete early fall 2024. It is anticipated to be able to expend the dollar amount within the fiscal year. This would give CICS the ability to market the 23-hour crisis observation and the behavioral health urgent care to the residents of CICS. It is anticipated that CICS would possibly utilize 25% in the future through this agreement. The idea is that law enforcement and walk-ins would be taken. Warm hand-offs between crisis stabilization, behavioral health urgent care and the sobering center would more easily be accomplished. Wood stated CICS would market this for more usage by the CICS population. If in the future a CICS provider was able to offer these same services, this would not prevent CICS from funding in the future. There are six CICS counties contiguous to Polk County. Transportation is available and paid for by CICS through CIJDC as 23-hour crisis observation is considered a crisis service. The CICS Crisis Network Service Coordinator for adults can work with the provider to coordinate services with the CICS residents that have utilized the services. Wood stated this would be an MOU rather than a contract with Polk County. **Motion by Rayhons, second by Smith to approve the Polk County General Services (Polk County MHDS) agreement. All ayes, motion carried.**

Sheehan updated the Board on the SATUCI request for funding. There is no action at this time as the offer was not accepted.

Linn Adams, Service Coordination Officer introduced Liza Howard, Service Coordination Officer to the Board. Adams presented the FY23 Service Coordination report and pointed out some of the highlights throughout. There were four focuses on Service Coordination throughout the year which included Justice Involved Service Coordination, standardization in services throughout the region, Service Coordination outreach throughout the region, and leadership transition for the Service Coordination Officers.

Wood stated he had an opportunity to tour the YSS Ember facility. It is moving along and looks nice. Reach out to Andrew Allen if you would like to tour the facility.

Next meeting will be January 25, 2024 with the option of a special meeting if necessary.

Motion to adjourn by Heddens, second by Kloberdanz. All ayes, meeting adjourned.

Lisa Hill, Recording Secretary

Brandon Talsma, Board Chair





CICS

Supporting Individuals. Strengthening Communities.

Regional Governing Board Meeting Minutes

January 10, 2024

Story County Administration Building

Board Members Present: Kendra Alexander, Phil Clifton, JD Deambra, Andrea Dickerson, Scott Hand, Jerry Kloberdanz, Richard Lukensmeyer, Julie Smith, Brandon Talsma, Allie Wulfekuhle. **Members Absent:** Lisa Heddens, Dennis Quinn, Gary Rayhons. **Leadership Team Present:** Meghan Freie, Liza Maxwell, Robin McKee, Jen Sheehan, Betsy Stursma, Karla Webb, Russell Wood. **HHS Representative Present:** Don Gookin.

Motion to approve the January 10, 2024 agenda. Motion by Smith, second by Lukensmeyer. All ayes, motion carried.

Russell Wood, CEO began the discussion regarding the Iowa Department of Human Services Health and Human Services Realignment.

HHS is changing the concept of Mental Health Regions and the Integrated Provider Network. They are looking at taking the Regions and combining them together into seven Behavioral Health Districts. A draft map of potential regions was provided. The potential is that some of the CICS counties will be moved to other BHD's. The state has provided three different options of how business will potentially be done in the future. CICS has invested in administrative staff to plan and develop programs throughout the region. CICS has moved towards a more formal approach for funding programs and has been fiscally responsible historically with investment of funds. A bill will be introduced next week. From a fiscal steward and human service perspective combining SUD and MH is a good step for individuals. Long term services and supports may go to Aging and Disability Services.

Kloberdanz pointed out that the maps do not align. Wood stated that has been a concern throughout this process. Part of the conversation is where is the traffic flow and where do people go for services. Don Gookin, HHS stated that the map is fluid, and this is early on in the process of coming to a finalized map. Latifah Faisal, Story County guest, wanted to know what the impact would be to County support for SUD services. Wood will share with HHS.

Wood discussed the next steps to take. How do we make sure this works for our clients. It is unknown how Governing Boards will be structured in the future, however it is important to let legislators know that all counties would like a say in what and how their region works in the future.

Motion to adjourn by Clifton, second by Talsma. All ayes, motion carried.

Chair adjourned the meeting.

Lisa Hill, Recording Secretary

Jerry Kloberdanz, Board Co-Chair



CICS

Supporting Individuals. Strengthening Communities.

*MEMORANDUM OF UNDERSTANDING (MOU) between
Franklin County, Iowa
and
Central Iowa Community Services (CICS)*

This is an agreement between Franklin County, Iowa, hereinafter referred to as “Franklin County” and Central Iowa Community Services, hereinafter referred to as “CICS.”

I. PURPOSE and SCOPE

The purpose of this MOU as identified in the 28E Agreement between Franklin County, Iowa and Central Iowa Community Services Section 1.1 is “Franklin County and CICS shall have a Memorandum of Understanding (MOU) for each employee performing duties for CICS, and such MOU will identify full time equivalent (FTE) status, rate of pay, and years of service (for initial employees the MOU will include number of hours of paid leave the employee will have upon transfer to Franklin County).”

II. EMPLOYEE DETAILS

NAME	FTE STATUS	RATE of PAY	CALCULATED HIRE DATE	YEARS of SERVICE
Brenda Daily	100%	\$32.28	10/11/10	13

III. EFFECTIVE DATE AND SIGNATURE

This MOU shall be effective 7/1/23 – 6/30/24, or upon employee changes.

Signature and Dates:

Chris Vanness, Franklin County, Iowa Board Chair

Brandon Talsma, CICS Governing Board Chair

Date

Date



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II. EMPLOYEE DETAILS

NAME	FTE STATUS	RATE of PAY	CALCULATED HIRE DATE	YEARS of SERVICE
Holly Coogler	100%	\$24.67	1/2/2024	0

III. EFFECTIVE DATE AND SIGNATURE

This MOU shall be effective 1/2/24 – 6/30/24, or upon employee changes.

Signature and Dates:

Chris Vanness, Franklin County, Iowa Board Chair

Brandon Talsma, CICS Governing Board Chair

Date

Date



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II. EMPLOYEE DETAILS

NAME	FTE STATUS	RATE of PAY	CALCULATED HIRE DATE	YEARS of SERVICE
Caitlyn Dellinger	100%	\$24.67	1/2/2024	0

III. EFFECTIVE DATE AND SIGNATURE

This MOU shall be effective 1/2/24 – 6/30/24, or upon employee changes.

Signature and Dates:

Chris Vanness, Franklin County, Iowa Board Chair

Brandon Talsma, CICS Governing Board Chair

Date

Date



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II. EMPLOYEE DETAILS

NAME	FTE STATUS	RATE of PAY	CALCULATED HIRE DATE	YEARS of SERVICE
Kaitlyn Hoeft	100%	\$24.67	1/15/2024	0

III. EFFECTIVE DATE AND SIGNATURE

This MOU shall be effective 1/15/24 – 6/30/24, or upon employee changes.

Signature and Dates:

Chris Vanness, Franklin County, Iowa Board Chair

Brandon Talsma, CICS Governing Board Chair

Date

Date



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II. EMPLOYEE DETAILS

NAME	FTE STATUS	RATE of PAY	CALCULATED HIRE DATE	YEARS of SERVICE
Kasey Dierks	100%	\$26.20	1/2/2024	0

III. EFFECTIVE DATE AND SIGNATURE

This MOU shall be effective 1/2/24 – 6/30/24, or upon employee changes.

Signature and Dates:

Chris Vanness, Franklin County, Iowa Board Chair

Brandon Talsma, CICS Governing Board Chair

Date

Date



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II. EMPLOYEE DETAILS

NAME	FTE STATUS	RATE of PAY	CALCULATED HIRE DATE	YEARS of SERVICE
Angela Scudder	100%	\$24.67	2/5/2024	0

III. EFFECTIVE DATE AND SIGNATURE

This MOU shall be effective 2/5/24 – 6/30/24, or upon employee changes.

Signature and Dates:

Chris Vanness, Franklin County, Iowa Board Chair

Brandon Talsma, CICS Governing Board Chair

Date

Date

Application for Appointment to CICS Committees



CICS

Supporting Individuals. Strengthening Communities.

Application for: Children's Behavioral Health Advisory Committee



(Committee)

Name: Christa Mattly

Date: 01/05/2023

Address: 711 E Lincoln Ave Indianola IA 50125 Warren
Street City State Zip County

Home #: none Business #: 515-282-4582 Cell #: 515-282-4582

E-mail: personal christa.mattly@gmail.com or business cmattly@broadlawns.org

This form assists the CICS Governing Board in evaluating the qualifications of applicants for appointment to a committee.

Place of employment and position and/or activities such as hobbies, volunteer work, etc. that you feel may qualify you for this position:

I currently work for Broadlawns Community Based Services Integrated Health Home as a peer support specialist and have been in this job for 2 1/2 years. I enjoy spending time with my family and working with several organizations to advocate for mental health and for expanding peer support services through Iowa.

Why do you wish to serve on this committee?

I would like to serve on the committee due to having my own lived mental health experience and lived experience as a parent of two children who struggle with mental health challenges. Once child is 23 and was diagnosed with severe depression and anxiety at age 13 and the other child is 9 and is diagnosed with Autism and anxiety disorder. We currently utilize services under the CMH waiver for this child.

What qualifications do you feel you have that would contribute to this committee?

I believe the best qualification I have is my lived experience and work as a peer support. Peer support has been shown to be an evidence based practice in helping people who struggle with mental health challenges. My other qualification is that I am a parent with lived experience of navigating the children's mental health system for a long time.

Do you have anything else to add?

I have been employed as a peer support specialist since August 2021 and became certified through the state in May 2022. I continually attend trainings to better myself in my job that allows me to help people better. I have taken youth mental health first aid also became a trained wellness recovery action plan aka WRAP co-facilitator in November with a goal to become advanced level facilitator trainer.

I certify that there is nothing that would prohibit me from serving on this committee.

Christa Mattly

01/05/2023

Signature

Date

Please return this application to:
 Karla Webb
 126 S. Kellogg Ave., Ste. 001
 Ames, Iowa 50010
 or email to karla.webb@cicsmhds.org

THIS APPLICATION IS A PUBLIC DOCUMENT AND AS SUCH CAN BE REPRODUCED AND DISTRIBUTED FOR THE PUBLIC.

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Claim #	Vendor#	Payee Name	Invoice#	Description	Fund	Funct	Obj	Dpt	Prj	Sub	Line	Amount
3935 V	129	Alliant Energy		Services Management - Ele	41500	04022	431	62				52.49
3935 V	129	Alliant Energy		Crisis Care Coordination	41500	04023	431	62				8.77
3935 V	129	Alliant Energy		Justice System Involved C	41500	04025	431	62				18.74
3935 V	129	Alliant Energy		Direct Admin - Electric P	41500	04411	431	62				44.99
				Disbursement# 8354							Disbursement Total	124.99
3938 V	588	Brittany Baker		Justice System Involved C	41500	04025	413	62				67.46
3938 V	588	Brittany Baker		Justice System Involved C	41500	04025	422	62				91.05
				Disbursement# 8355							Disbursement Total	158.51
3941 V	790	Black Hawk Co Sheriff		Commitment - Sheriff Tran	41500	04074	353	62				86.55
3941 V	790	Black Hawk Co Sheriff		Commitment - Sheriff Tran	41500	04074	353	62				36.55
3941 V	790	Black Hawk Co Sheriff		Commitment - Sheriff Tran	41500	04074	353	62				36.55
3941 V	790	Black Hawk Co Sheriff		Commitment - Sheriff Tran	41500	04074	353	62				36.55
				Disbursement# 8356							Disbursement Total	196.20
3942 V	876	Boone County Auditor		Services Management - Ren	41500	04022	450	62				356.91
3942 V	876	Boone County Auditor		Crisis Care Coordination	41500	04023	450	62				52.31
3942 V	876	Boone County Auditor		Justice System Involved C	41500	04025	450	62				128.25
3942 V	876	Boone County Auditor		Direct Admin - Building (	41500	04411	450	62				306.28
3942 V	876	Boone County Auditor		Purchased Admin - Account	41500	04412	420	62				1346.33
				Disbursement# 8357							Disbursement Total	2,190.08
3943 V	884	Boone County Jail		Prescription Medication (	41500	04046	306	62				275.90
				Disbursement# 8358							Disbursement Total	275.90
3944 V	928	Brick and Tile LLC		Services Management - Ren	41500	04022	450	62				891.03
3944 V	928	Brick and Tile LLC		Crisis Care Coordination	41500	04023	450	62				127.26
3944 V	928	Brick and Tile LLC		Justice System Involved C	41500	04025	450	62				318.15
3944 V	928	Brick and Tile LLC		Direct Admin - Building (	41500	04411	450	62				763.56
				Disbursement# 8359							Disbursement Total	2,100.00
3955 V	2160	The Bridge Home		Public Education Services	41500	04005	373	62				687.49
				Disbursement# 8360							Disbursement Total	687.49
3947 V	1327	Center Associates		Crisis Evaluation	41500	04044	301	62				1609.66
				Disbursement# 8361							Disbursement Total	1,609.66
3949 V	1349	Central Iowa Detention		Transportation - General	41500	04031	354	62				1001.60
3949 V	1349	Central Iowa Detention		Transportation - General	41500	04031	354	62				1721.50
3949 V	1349	Central Iowa Detention		Transportation - General	41500	04031	354	62				1580.65
3949 V	1349	Central Iowa Detention		Transportation - General	41500	04031	354	62				579.05
3949 V	1349	Central Iowa Detention		Transportation - General	41500	04031	354	62				219.10
3949 V	1349	Central Iowa Detention		Transportation - General	41500	04031	354	62				1768.45
3949 V	1349	Central Iowa Detention		Transportation - General	41500	04031	354	62				1017.25
3949 V	1349	Central Iowa Detention		Transportation - General	41500	04031	354	62				2832.65
3949 V	1349	Central Iowa Detention		Transportation - General	41500	04031	354	62				453.85
3949 V	1349	Central Iowa Detention		Transportation - General	41500	04031	354	62				1878.00
3949 V	1349	Central Iowa Detention		Transportation - General	41500	04031	354	62				140.85
3949 V	1349	Central Iowa Detention		Transportation - General	41500	04031	354	62				297.35

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Claim #	Vendor#	Payee Name	Invoice#	Description	Fund	Funct	Obj	Dpt	Prj	Sub	Line	Amount
3949	V	1349	Central Iowa Detention	Transportation - General	41500	04031	354	62				1345.90
3949	V	1349	Central Iowa Detention	Transportation - General	41500	04031	354	62				923.35
3949	V	1349	Central Iowa Detention	Transportation - General	41500	04031	354	62				391.25
3949	V	1349	Central Iowa Detention	Transportation - General	41500	04031	354	62				1408.50
3949	V	1349	Central Iowa Detention	Transportation - General	41500	04031	354	62				2112.75
3949	V	1349	Central Iowa Detention	Transportation - General	41500	04031	354	62				2597.90
3949	V	1349	Central Iowa Detention	Transportation - General	41500	04031	354	62				1878.00
3949	V	1349	Central Iowa Detention	Transportation - General	41500	04031	354	62				516.45
3949	V	1349	Central Iowa Detention	Transportation - General	41500	04031	354	62				1971.90
3949	V	1349	Central Iowa Detention	Transportation - General	41500	04031	354	62				1471.10
3949	V	1349	Central Iowa Detention	Transportation - General	41500	04031	354	62				2472.70
3949	V	1349	Central Iowa Detention	Transportation - General	41500	04031	354	62				2191.00
3949	V	1349	Central Iowa Detention	Transportation - General	41500	04031	354	62				1236.35
3949	V	1349	Central Iowa Detention	Transportation - General	41500	04031	354	62				266.05
3949	V	1349	Central Iowa Detention	Commitment - Sheriff Tran	41500	04074	353	62				532.10
3949	V	1349	Central Iowa Detention	Commitment - Sheriff Tran	41500	04074	353	62				1408.50
3949	V	1349	Central Iowa Detention	Commitment - Sheriff Tran	41500	04074	353	62				782.50
3949	V	1349	Central Iowa Detention	Commitment - Sheriff Tran	41500	04074	353	62				438.20
3949	V	1349	Central Iowa Detention	Commitment - Sheriff Tran	41500	04074	353	62				719.90
3949	V	1349	Central Iowa Detention	Commitment - Sheriff Tran	41500	04074	353	62				1893.65
3949	V	1349	Central Iowa Detention	Commitment - Sheriff Tran	41500	04074	353	62				313.00
3949	V	1349	Central Iowa Detention	Commitment - Sheriff Tran	41500	04074	353	62				250.40
3949	V	1349	Central Iowa Detention	Commitment - Sheriff Tran	41500	04074	353	62				985.95
3949	V	1349	Central Iowa Detention	Commitment - Sheriff Tran	41500	04074	353	62				751.20
				Disbursement#	8362	Disbursement	Total					42,348.90
3949	V	1349	Central Iowa Detention	Commitment - Sheriff Tran	41500	04074	353	62				547.75
3949	V	1349	Central Iowa Detention	Commitment - Sheriff Tran	41500	04074	353	62				704.25
3949	V	1349	Central Iowa Detention	Commitment - Sheriff Tran	41500	04074	353	62				281.70
3949	V	1349	Central Iowa Detention	Commitment - Sheriff Tran	41500	04074	353	62				829.45
3949	V	1349	Central Iowa Detention	Commitment - Sheriff Tran	41500	04074	353	62				939.00
3949	V	1349	Central Iowa Detention	Commitment - Sheriff Tran	41500	04074	353	62				297.35
3949	V	1349	Central Iowa Detention	Commitment - Sheriff Tran	41500	04074	353	62				375.60
3949	V	1349	Central Iowa Detention	Commitment - Sheriff Tran	41500	04074	353	62				406.90
3949	V	1349	Central Iowa Detention	Commitment - Sheriff Tran	41500	04074	353	62				766.85
				Disbursement#	8363	Disbursement	Total					5,148.85
3950	V	1361	CIR, Inc.	Psychotherapeutic Treatme	41500	04042	366	62				8403.48
3950	V	1361	CIR, Inc.	Psychotherapeutic Treatme	41500	04042	366	62				8403.48
3950	V	1361	CIR, Inc.	Psychotherapeutic Treatme	41500	04042	366	62				8403.48
3950	V	1361	CIR, Inc.	Psychotherapeutic Treatme	41500	04042	397	62				1230.39
3950	V	1361	CIR, Inc.	Support Services - Suppor	41500	04332	329	62				464.00
3950	V	1361	CIR, Inc.	Day Habilitation	41500	04350	367	62				1165.44
3950	V	1361	CIR, Inc.	Access Center start-up/su	41500	04044	396	62				1000.00
				Disbursement#	8364	Disbursement	Total					29,070.27
3948	V	1346	Central Iowa Residential Serv.	Support Services - Suppor	41500	04232	329	62				5706.30
3948	V	1346	Central Iowa Residential Serv.	Day Habilitation	41500	04250	367	62				1774.40
				Disbursement#	8365	Disbursement	Total					7,480.70

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3980 V	5696	Eyerly Ball CMHS		Mobile Response	41500	04044	307	62				1141.50	
3980 V	5696	Eyerly Ball CMHS		Mobile Response	41500	04044	307	62				3044.00	
3980 V	5696	Eyerly Ball CMHS		Mobile Response	41500	04044	307	62				2663.50	
3980 V	5696	Eyerly Ball CMHS		Mobile Response	41500	04044	307	62				2283.00	
3980 V	5696	Eyerly Ball CMHS		Mobile Response	41500	04044	307	62				1902.50	
3980 V	5696	Eyerly Ball CMHS		Mobile Response	41500	04044	307	62				1522.00	
3980 V	5696	Eyerly Ball CMHS		Mobile Response	41500	04044	307	62				761.00	
3980 V	5696	Eyerly Ball CMHS		Mobile Response	41500	04044	307	62				2283.00	
3980 V	5696	Eyerly Ball CMHS		Mobile Response	41500	04044	307	62				1141.50	
3980 V	5696	Eyerly Ball CMHS		Mobile Response	41500	04044	307	62				761.00	
3980 V	5696	Eyerly Ball CMHS		Mobile Response	41500	04244	307	62				380.50	
3980 V	5696	Eyerly Ball CMHS		Mobile Response	41500	04244	307	62				380.50	
3980 V	5696	Eyerly Ball CMHS		Mobile Response	41500	04344	307	62				380.50	
3980 V	5696	Eyerly Ball CMHS		Crisis Stabilization Comm	41500	04044	312	62				13105.76	
				Disbursement#	8372							Disbursement Total	70,181.49
3957 V	2420	Franklin County Auditor		Services Management - Sal	41500	04022	100	62				97572.69	
3957 V	2420	Franklin County Auditor		Services Management - Sal	41500	04222	100	62				7294.82	
3957 V	2420	Franklin County Auditor		Services Management - Sal	41500	04322	100	62				5289.02	
3957 V	2420	Franklin County Auditor		Services Management - Sal	41500	04722	100	62				1094.28	
3957 V	2420	Franklin County Auditor		Justice System Involved C	41500	04025	100	62				38084.23	
3957 V	2420	Franklin County Auditor		Crisis Care Coordination	41500	04023	100	62				12247.70	
3957 V	2420	Franklin County Auditor		Direct Admin - Salary Reg	41500	04411	100	62				94864.59	
3957 V	2420	Franklin County Auditor		Purchased Admin - Account	41500	04412	420	62				4837.57	
3957 V	2420	Franklin County Auditor		Purchased Admin - Data Pr	41500	04412	421	62				5403.80	
				Disbursement#	8373							Disbursement Total	266,688.70
3994 V	2420	Franklin County Auditor		Service Management-rental	41500	04022	450	62				338.05	
3994 V	2420	Franklin County Auditor		Crisis Care Coordination	41500	04023	450	62				56.35	
3994 V	2420	Franklin County Auditor		Justice System Involved C	41500	04025	450	62				141.00	
3994 V	2420	Franklin County Auditor		Direct Admin-Building ren	41500	04411	450	62				394.60	
				Disbursement#	8374							Disbursement Total	930.00
3963 V	2924	Frontier Communications		Services Management - Tel	41500	04022	414	62				38.64	
3963 V	2924	Frontier Communications		Crisis Care Coordination	41500	04023	414	62				6.45	
3963 V	2924	Frontier Communications		Justice System Involved C	41500	04025	414	62				13.80	
3963 V	2924	Frontier Communications		Direct Admin - Telecommun	41500	04411	414	62				33.12	
				Disbursement#	8375							Disbursement Total	92.01
3959 V	2654	Kent L. Geffe		Commitment - Legal Repres	41500	04074	393	62				123.50	
3959 V	2654	Kent L. Geffe		Commitment - Legal Repres	41500	04074	393	62				149.50	
3959 V	2654	Kent L. Geffe		Commitment - Legal Repres	41500	04074	393	62				136.50	
3959 V	2654	Kent L. Geffe		Commitment - Legal Repres	41500	04074	393	62				237.25	
				Disbursement#	8376							Disbursement Total	646.75
3958 V	2549	Gethmann Investment Corp.		Services Management - Ren	41500	04022	450	62				403.09	
3958 V	2549	Gethmann Investment Corp.		Crisis Care Coordination	41500	04023	450	62				57.57	
3958 V	2549	Gethmann Investment Corp.		Justice System Involved C	41500	04025	450	62				143.92	
3958 V	2549	Gethmann Investment Corp.		Direct Admin - Building (41500	04411	450	62				345.42	
				Disbursement#	8377							Disbursement Total	950.00

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Claim #	Vendor#	Payee Name	Invoice#	Description	Fund	Funct	Obj	Dpt	Prj	Sub	Line	Amount
3960 V	2724	Hamilton County		Commitment - Sheriff Tran	41500	04074	353	62				88.65
3960 V	2724	Hamilton County		Commitment - Sheriff Tran	41500	04074	353	62				106.00
				Disbursement# 8378								Disbursement Total 194.65
3961 V	2725	Hamilton County Auditor		Services Management - Ren	41500	04022	450	62				232.65
3961 V	2725	Hamilton County Auditor		Crisis Care Coordination	41500	04023	450	62				34.10
3961 V	2725	Hamilton County Auditor		Justice System Involved C	41500	04025	450	62				83.60
3961 V	2725	Hamilton County Auditor		Direct Admin - Building (	41500	04411	450	62				199.65
3961 V	2725	Hamilton County Auditor		Purchased Admin - Account	41500	04412	420	62				1382.18
				Disbursement# 8379								Disbursement Total 1,932.18
3969 V	3356	Heartland Business Systems LLC		Purchased Admin - Data Pr	41500	04412	421	62				215.91
				Disbursement# 8380								Disbursement Total 215.91
3978 V	4984	Lisa Hill		Direct Admin - Mileage &	41500	04411	413	62				64.19
				Disbursement# 8381								Disbursement Total 64.19
3965 V	3120	Hope Family Counseling		Psychotherapeutic Treatme	41500	04042	305	62				114.17
				Disbursement# 8382								Disbursement Total 114.17
3966 V	3227	Imagine The Possibilities Inc		Support Services - Suppor	41500	04232	329	62				1813.62
3966 V	3227	Imagine The Possibilities Inc		Voc/Day - Individual Supp	41500	04250	368	62				43.83
3966 V	3227	Imagine The Possibilities Inc		Support Services - Suppor	41500	04332	329	62				230.46
3966 V	3227	Imagine The Possibilities Inc		Day Habilitation	41500	04350	367	62				1152.15
3966 V	3227	Imagine The Possibilities Inc		Voc/Day - Individual Supp	41500	04350	368	62				853.71
3966 V	3227	Imagine The Possibilities Inc		Day Habilitation	41500	04750	367	62				1075.34
				Disbursement# 8383								Disbursement Total 5,169.11
3968 V	3253	Inside Out Wellness & Advocacy		Crisis Stabilization Resi	41500	04044	313	62				1800.95
3968 V	3253	Inside Out Wellness & Advocacy		Crisis Stabilization Resi	41500	04044	313	62				1440.76
3968 V	3253	Inside Out Wellness & Advocacy		Crisis Stabilization Resi	41500	04244	313	62				720.38
3968 V	3253	Inside Out Wellness & Advocacy		Crisis Stabilization Resi	41500	04244	313	62				1800.95
3968 V	3253	Inside Out Wellness & Advocacy		Crisis Stabilization Resi	41500	04044	313	62				1800.95
3968 V	3253	Inside Out Wellness & Advocacy		Crisis Stabilization Resi	41500	04044	313	62				360.19
3968 V	3253	Inside Out Wellness & Advocacy		Crisis Stabilization Resi	41500	04044	313	62				720.38
				Disbursement# 8384								Disbursement Total 8,644.56
3970 V	3430	Iowa State Assoc. of Counties		Direct Admin - Educationa	41500	04411	422	62				225.00
				Disbursement# 8385								Disbursement Total 225.00
3945 V	946	Madelynn Krutsinger		Justice System Involved C	41500	04025	413	62				183.40
3945 V	946	Madelynn Krutsinger		Justice System Involved C	41500	04025	422	62				119.21
				Disbursement# 8386								Disbursement Total 302.61
3971 V	4151	Life Connections		Psychotherapeutic Treatme	41500	04042	305	62				125.79
3971 V	4151	Life Connections		Psychotherapeutic Treatme	41500	04042	305	62				187.81
3971 V	4151	Life Connections		Psychotherapeutic Treatme	41500	04042	305	62				167.14
3971 V	4151	Life Connections		Psychotherapeutic Treatme	41500	04042	305	62				208.92
3971 V	4151	Life Connections		Psychotherapeutic Treatme	41500	04042	305	62				272.47
3971 V	4151	Life Connections		Psychotherapeutic Treatme	41500	04042	305	62				237.51

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3971 V	4151	Life Connections		Psychotherapeutic Treatme	41500	04042	305	62				155.04
3971 V	4151	Life Connections		Psychotherapeutic Treatme	41500	04042	305	62				303.92
3971 V	4151	Life Connections		Psychotherapeutic Treatme	41500	04042	305	62				116.28
3971 V	4151	Life Connections		Psychotherapeutic Treatme	41500	04042	305	62				93.02
				Disbursement#	8387						Disbursement Total	1,867.90
3946 V	1279	LifeWorks Community Services		Basic Needs - Rent Paymen	41500	04033	340	62				225.00
				Disbursement#	8388						Disbursement Total	225.00
3972 V	4443	Marshall County		Commitment - Sheriff Tran	41500	04074	353	62				127.00
3972 V	4443	Marshall County		Commitment - Sheriff Tran	41500	04074	353	62				146.00
3972 V	4443	Marshall County		Commitment - Sheriff Tran	41500	04074	353	62				181.00
3972 V	4443	Marshall County		Commitment - Sheriff Tran	41500	04074	353	62				31.00
				Disbursement#	8389						Disbursement Total	485.00
3995 V	4443	Marshall County		Prescription Medication (	41500	04046	306	62				373.35
				Disbursement#	8390						Disbursement Total	373.35
3973 V	4500	Mary Greeley Medical Center		Sub Acute Services (6+ Be	41500	04064	309	62				4000.00
3973 V	4500	Mary Greeley Medical Center		Sub Acute Services (6+ Be	41500	04064	309	62				3850.00
3973 V	4500	Mary Greeley Medical Center		Sub Acute Services (6+ Be	41500	04064	309	62				2450.00
3973 V	4500	Mary Greeley Medical Center		Sub Acute Services (6+ Be	41500	04064	309	62				4000.00
3973 V	4500	Mary Greeley Medical Center		Sub Acute Services (6+ Be	41500	04064	309	62				3150.00
3973 V	4500	Mary Greeley Medical Center		Sub Acute Services (6+ Be	41500	04064	309	62				1050.00
3973 V	4500	Mary Greeley Medical Center		Sub Acute Services (6+ Be	41500	04064	309	62				3600.00
3973 V	4500	Mary Greeley Medical Center		Sub Acute Services (6+ Be	41500	04064	309	62				3850.00
3973 V	4500	Mary Greeley Medical Center		Sub Acute Services (6+ Be	41500	04064	309	62				2800.00
3973 V	4500	Mary Greeley Medical Center		Sub Acute Services (6+ Be	41500	04064	309	62				3850.00
3973 V	4500	Mary Greeley Medical Center		Sub Acute Services (6+ Be	41500	04064	309	62				700.00
				Disbursement#	8391						Disbursement Total	33,300.00
3974 V	4508	Mason City Clinic		Commitment - Diagnostic E	41500	04074	300	62				60.00
3974 V	4508	Mason City Clinic		Commitment - Diagnostic E	41500	04074	300	62				60.00
				Disbursement#	8392						Disbursement Total	120.00
3975 V	4719	Medicap Pharmacy		Physiological Treatment -	41500	04041	306	62				33.00
				Disbursement#	8393						Disbursement Total	33.00
3977 V	4901	Medicap Pharmacy 8095		Prescription Medication (	41500	04046	306	62				2941.77
3977 V	4901	Medicap Pharmacy 8095		Prescription Medication (	41500	04046	306	62				489.17
3977 V	4901	Medicap Pharmacy 8095		Prescription Medication (	41500	04046	306	62				99.08
				Disbursement#	8394						Disbursement Total	3,530.02
3956 V	2383	Mercyone Forest Park Pharmacy		Physiological Treatment -	41500	04041	306	62				49.25
				Disbursement#	8395						Disbursement Total	49.25
3976 V	4766	Mid-Iowa Triumph Recovery Ctr		Psychotherapeutic Treatme	41500	04042	366	62				7194.00
				Disbursement#	8396						Disbursement Total	7,194.00
3979 V	5283	North Iowa Vocational Center		Basic Needs - Other	41500	04033	399	62				1112.59

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Claim #	Vendor#	Payee Name	Invoice#	Description	Fund	Funct	Obj	Dpt	Prj	Sub	Line	Amount	
3979 V	5283	North Iowa Vocational Center		Comm Based Settings (6+ B	41500	04064	329	62				2225.18	
3979 V	5283	North Iowa Vocational Center		Basic Needs - Rent Paymen	41500	04233	340	62				500.00	
3979 V	5283	North Iowa Vocational Center		Psychotherapeutic Treatme	41500	04042	379	62				6640.38	
				Disbursement#	8397							Disbursement Total	10,478.15
3962 V	2872	Optimae LifeServices, Inc.		Basic Needs - Ongoing Ren	41500	04033	345	62				390.00	
3962 V	2872	Optimae LifeServices, Inc.		Basic Needs - Ongoing Ren	41500	04033	345	62				390.00	
3962 V	2872	Optimae LifeServices, Inc.		Basic Needs - Ongoing Ren	41500	04033	345	62				390.00	
3962 V	2872	Optimae LifeServices, Inc.		Support Services - Suppor	41500	04032	329	62				13431.94	
3962 V	2872	Optimae LifeServices, Inc.		Comm Based Settings (6+ B	41500	04064	314	62				5673.50	
3962 V	2872	Optimae LifeServices, Inc.		Comm Based Settings (6+ B	41500	04064	329	62				6829.80	
3962 V	2872	Optimae LifeServices, Inc.		Comm Based Settings (6+ B	41500	04064	329	62				3414.90	
3962 V	2872	Optimae LifeServices, Inc.		Comm Based Settings (6+ B	41500	04064	329	62				13376.98	
3962 V	2872	Optimae LifeServices, Inc.		Support Services - Suppor	41500	04232	329	62				485.26	
3962 V	2872	Optimae LifeServices, Inc.		Support Services - Suppor	41500	04332	329	62				1481.32	
3962 V	2872	Optimae LifeServices, Inc.		Support Services - Suppor	41500	04332	329	62				319.25	
3962 V	2872	Optimae LifeServices, Inc.		Support Services - Suppor	41500	04332	329	62				1379.16	
3962 V	2872	Optimae LifeServices, Inc.		Day Habilitation	41500	04350	367	62				276.67	
3962 V	2872	Optimae LifeServices, Inc.		Voc/Day - Individual Supp	41500	04350	368	62				390.00	
3962 V	2872	Optimae LifeServices, Inc.		Basic Needs - Ongoing Ren	41500	04033	345	62				308.00	
3962 V	2872	Optimae LifeServices, Inc.		Basic Needs - Rent Paymen	41500	04033	340	62				5205.86	
3962 V	2872	Optimae LifeServices, Inc.		Basic Needs - Ongoing Ren	41500	04033	345	62				1523.00	
3962 V	2872	Optimae LifeServices, Inc.		Basic Needs - Other	41500	04033	399	62				525.00	
				Disbursement#	8398							Disbursement Total	55,790.64
3981 V	5816	Poweshiek County Auditor		Services Management - Ren	41500	04022	450	62				253.80	
3981 V	5816	Poweshiek County Auditor		Crisis Care Coordination	41500	04023	450	62				37.20	
3981 V	5816	Poweshiek County Auditor		Justice System Involved C	41500	04025	450	62				91.20	
3981 V	5816	Poweshiek County Auditor		Direct Admin - Building (	41500	04411	450	62				217.80
				Disbursement#	8399							Disbursement Total	600.00
3992 V	82831	Prairie Ridge Integrated		Psychotherapeutic Treatme	41500	04042	366	62				6831.00	
				Disbursement#	8400							Disbursement Total	6,831.00
3993 V	83117	The Pride Group		Comm Based Settings (6+ B	41500	04064	314	62				3018.30	
3993 V	83117	The Pride Group		Comm Based Settings (6+ B	41500	04064	314	62				28517.77	
				Disbursement#	8401							Disbursement Total	31,536.07
3982 V	5840	Progress Industries		Voc/Day - Individual Supp	41500	04050	368	62				390.33	
3982 V	5840	Progress Industries		Day Habilitation	41500	04250	367	62				921.72	
3982 V	5840	Progress Industries		Voc/Day - Individual Supp	41500	04250	368	62				390.33	
3982 V	5840	Progress Industries		Support Services - Suppor	41500	04332	329	62				794.49	
3982 V	5840	Progress Industries		Voc/Day - Individual Supp	41500	04350	368	62				533.11	
3982 V	5840	Progress Industries		Support Services - Suppor	41500	04732	329	62				548.31	
3982 V	5840	Progress Industries		Day Habilitation	41500	04750	367	62				3072.40	
				Disbursement#	8402							Disbursement Total	6,650.69
3936 V	322	Salvation Army		Support Services - Repres	41500	04032	327	62				624.00	
				Disbursement#	8403							Disbursement Total	624.00

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Claim #	Vendor#	Payee Name	Invoice#	Description	Fund	Funct	Obj	Dpt	Prj	Sub	Line	Amount
				Disbursement#	8409	Disbursement	Total					2,872.54
3940	V	745 Visual Edge IT, Inc		Services Management - Off	41500	04022	444	62				49.69
3940	V	745 Visual Edge IT, Inc		Crisis Care Coordination	41500	04023	444	62				8.30
3940	V	745 Visual Edge IT, Inc		Justice System Involved C	41500	04025	444	62				17.74
3940	V	745 Visual Edge IT, Inc		Direct Admin - Office Equ	41500	04411	444	62				42.59
				Disbursement#	8410	Disbursement	Total					118.32
3996	V	745 Visual Edge IT, Inc		Services Management-offic	41500	04022	444	62				16.59
3996	V	745 Visual Edge IT, Inc		Crisis Care Coordination-	41500	04023	444	62				2.37
3996	V	745 Visual Edge IT, Inc		Justice System Involved c	41500	04025	444	62				6.32
3996	V	745 Visual Edge IT, Inc		Direct Admin-Office equip	41500	04411	444	62				14.22
				Disbursement#	8411	Disbursement	Total					39.50
3988	V	7703 Warren County Justice Center		Services Management - Ren	41500	04022	450	62				524.94
3988	V	7703 Warren County Justice Center		Crisis Care Coordination	41500	04023	450	62				76.94
3988	V	7703 Warren County Justice Center		Justice System Involved C	41500	04025	450	62				188.63
3988	V	7703 Warren County Justice Center		Direct Admin - Building (	41500	04411	450	62				450.48
				Disbursement#	8412	Disbursement	Total					1,240.99
3987	V	7680 Warren County Sheriff		Commitment - Sheriff Tran	41500	04074	353	62				69.44
3987	V	7680 Warren County Sheriff		Commitment - Sheriff Tran	41500	04074	353	62				53.78
3987	V	7680 Warren County Sheriff		Commitment - Sheriff Tran	41500	04074	353	62				76.40
3987	V	7680 Warren County Sheriff		Commitment - Sheriff Tran	41500	04074	353	62				40.44
				Disbursement#	8413	Disbursement	Total					240.06
3937	E	573 Karla K Webb		Direct Admin - Mileage &	41500	04411	413	62				124.45
3937	E	573 Karla K Webb		Direct Admin - Telecommun	41500	04411	414	62				50.00
3937	E	573 Karla K Webb		Direct Admin - Educationa	41500	04411	422	62				1100.68
				Disbursement#	8414	Disbursement	Total					1,275.13
3989	V	7806 Russell Wood		Direct Admin - Mileage &	41500	04411	413	62				565.92
3989	V	7806 Russell Wood		Direct Admin - Educationa	41500	04411	422	62				87.95
3989	V	7806 Russell Wood		Direct Admin - Mileage &	41500	04411	413	62				665.48
3989	V	7806 Russell Wood		Direct Admin - Telecommun	41500	04411	414	62				250.00
3989	V	7806 Russell Wood		Direct Admin - Educationa	41500	04411	422	62				31.28
				Disbursement#	8415	Disbursement	Total					1,600.63
3990	V	7840 Wright County Auditor		Services Management - Ren	41500	04022	450	62				253.80
3990	V	7840 Wright County Auditor		Crisis Care Coordination	41500	04023	450	62				37.20
3990	V	7840 Wright County Auditor		Justice System Involved C	41500	04025	450	62				91.20
3990	V	7840 Wright County Auditor		Direct Admin - Building (	41500	04411	450	62				217.80
				Disbursement#	8416	Disbursement	Total					600.00
					63	Total Disbursements						623,733.83
					0	Total ACH						.00
					0	Total EFT						.00
					63	Grand Total						623,733.83
						Credits/Refunds Included						.00

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Totals by Fund

41500	Central Iowa Community Service	623,733.83
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Final Total	623,733.83
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Claim #	Vendor#	Payee Name	Invoice#	Description	Fund	Funct	Obj	Dpt	Prj	Sub	Line	Amount	
4190 V	291	Access Systems Leasing		Services Management - Off	41500	04022	453	62				171.71	
4190 V	291	Access Systems Leasing		Crisis Care Coordination	41500	04023	453	62				30.07	
4190 V	291	Access Systems Leasing		Justice System Involved C	41500	04025	453	62				61.32	
4190 V	291	Access Systems Leasing		Direct Admin - Office Equ	41500	04411	453	62				145.74	
				Disbursement#	8417							Disbursement Total	408.84
4187 V	60	Linn Adams		Services Management - Mil	41500	04022	413	62				121.14	
4187 V	60	Linn Adams		Services Management - Tel	41500	04022	414	62				50.00	
4187 V	60	Linn Adams		Services Management - Mil	41500	04222	413	62				117.59	
4187 V	60	Linn Adams		Services Management - Mil	41500	04322	413	62				117.59	
				Disbursement#	8418							Disbursement Total	406.32
4193 V	445	Arc of Marshall County		Psychotherapeutic Treatme	41500	04242	366	62				661.29	
4193 V	445	Arc of Marshall County		Psychotherapeutic Treatme	41500	04342	366	62				16.95	
				Disbursement#	8419							Disbursement Total	678.24
4194 V	588	Brittany Baker		Justice System Involved C	41500	04025	413	62				139.52	
				Disbursement#	8420							Disbursement Total	139.52
4196 E	1141	Bryan J Barker		Commitment - Legal Repres	41500	04074	393	62				576.70	
				Disbursement#	8421							Disbursement Total	576.70
4195 V	876	Boone County Auditor		Mental Health Advocate -	41500	04075	395	62				1933.20	
4195 V	876	Boone County Auditor		Mental Health Advocate -	41500	04075	413	62				3769.98	
				Disbursement#	8422							Disbursement Total	5,703.18
4205 V	1849	Branstad & Olson Law		Commitment - Legal Repres	41500	04074	393	62				163.20	
				Disbursement#	8423							Disbursement Total	163.20
4223 V	3459	Janell A. Butler		Basic Needs - Rent Paymen	41500	04033	340	62				350.00	
				Disbursement#	8424							Disbursement Total	350.00
4198 V	1230	Capstone Behavioral Healthcare		Psychotherapeutic Treatme	41500	04042	366	62				8092.40	
4198 V	1230	Capstone Behavioral Healthcare		Psychotherapeutic Treatme	41500	04242	366	62				285.60	
4198 V	1230	Capstone Behavioral Healthcare		Psychotherapeutic Treatme	41500	04042	366	62				7844.00	
4198 V	1230	Capstone Behavioral Healthcare		Support Services - Suppor	41500	04032	329	62				1154.05	
4198 V	1230	Capstone Behavioral Healthcare		Justice System Involved C	41500	04025	376	62				7257.25	
4198 V	1230	Capstone Behavioral Healthcare		Access Center start-up/su	41500	04044	396	62				1000.00	
4198 V	1230	Capstone Behavioral Healthcare		Access Center start-up/su	41500	04044	396	62				2500.00	
4198 V	1230	Capstone Behavioral Healthcare		Crisis Evaluation	41500	04044	301	62				232.09	
4198 V	1230	Capstone Behavioral Healthcare		Crisis Evaluation	41500	04044	301	62				232.09	
4198 V	1230	Capstone Behavioral Healthcare		Crisis Evaluation	41500	04044	301	62				232.09	
4198 V	1230	Capstone Behavioral Healthcare		Crisis Evaluation	41500	04044	301	62				114.17	
				Disbursement#	8425							Disbursement Total	28,943.74
4207 V	2097	Cedar Valley Ranch, Inc.		Comm Based Settings (6+ B	41500	04064	314	62				5786.10	
				Disbursement#	8426							Disbursement Total	5,786.10
4199 V	1327	Center Associates		Psychotherapeutic Treatme	41500	04042	305	62				75.96	
4199 V	1327	Center Associates		Psychotherapeutic Treatme	41500	04042	305	62				75.96	

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4199 V	1327	Center Associates		Psychotherapeutic Treatme	41500	04042	305	62				75.96
4199 V	1327	Center Associates		Psychotherapeutic Treatme	41500	04042	305	62				47.54
4199 V	1327	Center Associates		Psychotherapeutic Treatme	41500	04042	305	62				47.54
4199 V	1327	Center Associates		Mental Health Services in	41500	04046	305	62				72.45
4199 V	1327	Center Associates		Mental Health Services in	41500	04046	305	62				72.45
4199 V	1327	Center Associates		Mental Health Services in	41500	04046	305	62				232.09
4199 V	1327	Center Associates		Mental Health Services in	41500	04046	305	62				232.09
4199 V	1327	Center Associates		Mental Health Services in	41500	04046	305	62				144.90
				Disbursement#	8427	Disbursement	Total					1,076.94
4245 V	6534	Central Iowa Broadband		Services Management - Tel	41500	04022	414	62				63.50
4245 V	6534	Central Iowa Broadband		Direct Admin - Telecommun	41500	04411	414	62				36.50
				Disbursement#	8428	Disbursement	Total					100.00
4201 V	1362	Central Iowa Psychological		Mental Health Services in	41500	04046	305	62				69.43
4201 V	1362	Central Iowa Psychological		Mental Health Services in	41500	04046	305	62				.00
4202 V	1362	Central Iowa Psychological		Mental Health Services in	41500	04046	305	62				69.43
4202 V	1362	Central Iowa Psychological		Mental Health Services in	41500	04046	305	62				114.17
4202 V	1362	Central Iowa Psychological		Mental Health Services in	41500	04046	305	62				69.43
4202 V	1362	Central Iowa Psychological		Mental Health Services in	41500	04046	305	62				69.43
4202 V	1362	Central Iowa Psychological		Mental Health Services in	41500	04046	305	62				114.17
4202 V	1362	Central Iowa Psychological		Mental Health Services in	41500	04046	305	62				114.17
4202 V	1362	Central Iowa Psychological		Mental Health Services in	41500	04046	305	62				114.17
4202 V	1362	Central Iowa Psychological		Mental Health Services in	41500	04046	305	62				114.17
4202 V	1362	Central Iowa Psychological		Mental Health Services in	41500	04046	305	62				114.17
4202 V	1362	Central Iowa Psychological		Mental Health Services in	41500	04046	305	62				155.61
4202 V	1362	Central Iowa Psychological		Mental Health Services in	41500	04046	305	62				114.17
4202 V	1362	Central Iowa Psychological		Mental Health Services in	41500	04046	305	62				114.17
4202 V	1362	Central Iowa Psychological		Mental Health Services in	41500	04046	305	62				339.21
4202 V	1362	Central Iowa Psychological		Mental Health Services in	41500	04046	305	62				114.17
4202 V	1362	Central Iowa Psychological		Mental Health Services in	41500	04046	305	62				339.21
4202 V	1362	Central Iowa Psychological		Mental Health Services in	41500	04046	305	62				138.86
4202 V	1362	Central Iowa Psychological		Mental Health Services in	41500	04046	305	62				297.77
4202 V	1362	Central Iowa Psychological		Mental Health Services in	41500	04046	305	62				183.60
4202 V	1362	Central Iowa Psychological		Mental Health Services in	41500	04046	305	62				183.60
				Disbursement#	8429	Disbursement	Total					2,828.94
4200 V	1346	Central Iowa Residential Serv.		Support Services - Suppor	41500	04232	329	62				464.88
				Disbursement#	8430	Disbursement	Total					464.88
4203 V	1370	Cerro Gordo Co. Sheriff		Prescription Medication (	41500	04046	306	62				784.66
				Disbursement#	8431	Disbursement	Total					784.66
4256 V	72467	Cherokee County Sheriff's Dept		Commitment - Sheriff Tran	41500	04074	353	62				35.00
				Disbursement#	8432	Disbursement	Total					35.00
4214 V	2663	Choices Therapy Services LLC		Mental Health Services in	41500	04046	305	62				581.00
4214 V	2663	Choices Therapy Services LLC		Mental Health Services in	41500	04046	305	62				695.17
4214 V	2663	Choices Therapy Services LLC		Mental Health Services in	41500	04046	305	62				466.83
4214 V	2663	Choices Therapy Services LLC		Mental Health Services in	41500	04046	305	62				581.00
4214 V	2663	Choices Therapy Services LLC		Mental Health Services in	41500	04046	305	62				466.83

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				Disbursement#	8433	Disbursement	Total					2,790.83
4204	V 1618	Community Support Advocates		Direct Admin - Educationa	41500	04411	422	62				120.00
				Disbursement#	8434	Disbursement	Total					120.00
4227	V 4287	Cornwall, Avery, Bjornstad &		Commitment - Legal Repres	41500	04074	393	62				85.00
				Disbursement#	8435	Disbursement	Total					85.00
4221	V 3236	Chloe Davis		Justice System Involved C	41500	04025	413	62				115.28
				Disbursement#	8436	Disbursement	Total					115.28
4206	V 1971	Dickinson County		Commitment - Sheriff Tran	41500	04074	353	62				533.44
				Disbursement#	8437	Disbursement	Total					533.44
4208	V 2219	eVizzit of Ia Psychiatry, JAIL		Crisis Evaluation	41500	04044	301	62				290.00
4208	V 2219	eVizzit of Ia Psychiatry, JAIL		Crisis Evaluation	41500	04044	301	62				290.00
4208	V 2219	eVizzit of Ia Psychiatry, JAIL		Crisis Evaluation	41500	04044	301	62				3190.00
4208	V 2219	eVizzit of Ia Psychiatry, JAIL		Crisis Evaluation	41500	04044	301	62				4350.00
4208	V 2219	eVizzit of Ia Psychiatry, JAIL		Crisis Evaluation	41500	04044	301	62				2320.00
4208	V 2219	eVizzit of Ia Psychiatry, JAIL		Crisis Evaluation	41500	04044	301	62				4060.00
4208	V 2219	eVizzit of Ia Psychiatry, JAIL		Crisis Evaluation	41500	04044	301	62				3770.00
4208	V 2219	eVizzit of Ia Psychiatry, JAIL		Crisis Evaluation	41500	04044	301	62				3480.00
4208	V 2219	eVizzit of Ia Psychiatry, JAIL		Crisis Evaluation	41500	04044	301	62				1160.00
4208	V 2219	eVizzit of Ia Psychiatry, JAIL		Crisis Evaluation	41500	04044	301	62				3190.00
4208	V 2219	eVizzit of Ia Psychiatry, JAIL		Crisis Evaluation	41500	04044	301	62				5510.00
4208	V 2219	eVizzit of Ia Psychiatry, JAIL		Crisis Evaluation	41500	04044	301	62				2320.00
4208	V 2219	eVizzit of Ia Psychiatry, JAIL		Crisis Evaluation	41500	04044	301	62				4350.00
4208	V 2219	eVizzit of Ia Psychiatry, JAIL		Crisis Evaluation	41500	04044	301	62				3190.00
4208	V 2219	eVizzit of Ia Psychiatry, JAIL		Crisis Evaluation	41500	04044	301	62				2900.00
4208	V 2219	eVizzit of Ia Psychiatry, JAIL		Crisis Evaluation	41500	04044	301	62				2320.00
4208	V 2219	eVizzit of Ia Psychiatry, JAIL		Crisis Evaluation	41500	04044	301	62				2900.00
4208	V 2219	eVizzit of Ia Psychiatry, JAIL		Crisis Evaluation	41500	04044	301	62				2320.00
4208	V 2219	eVizzit of Ia Psychiatry, JAIL		Crisis Evaluation	41500	04044	301	62				3480.00
4208	V 2219	eVizzit of Ia Psychiatry, JAIL		Crisis Evaluation	41500	04044	301	62				3480.00
4208	V 2219	eVizzit of Ia Psychiatry, JAIL		Crisis Evaluation	41500	04044	301	62				3770.00
4208	V 2219	eVizzit of Ia Psychiatry, JAIL		Crisis Evaluation	41500	04044	301	62				2610.00
4208	V 2219	eVizzit of Ia Psychiatry, JAIL		Crisis Evaluation	41500	04044	301	62				1740.00
4208	V 2219	eVizzit of Ia Psychiatry, JAIL		Crisis Evaluation	41500	04044	301	62				3770.00
4208	V 2219	eVizzit of Ia Psychiatry, JAIL		Crisis Evaluation	41500	04044	301	62				4060.00
4208	V 2219	eVizzit of Ia Psychiatry, JAIL		Crisis Evaluation	41500	04044	301	62				3190.00
4208	V 2219	eVizzit of Ia Psychiatry, JAIL		Crisis Evaluation	41500	04044	301	62				2900.00
4208	V 2219	eVizzit of Ia Psychiatry, JAIL		Crisis Evaluation	41500	04044	301	62				5220.00
4208	V 2219	eVizzit of Ia Psychiatry, JAIL		Crisis Evaluation	41500	04044	301	62				3770.00
4208	V 2219	eVizzit of Ia Psychiatry, JAIL		Crisis Evaluation	41500	04044	301	62				870.00
4208	V 2219	eVizzit of Ia Psychiatry, JAIL		Crisis Evaluation	41500	04044	301	62				2610.00
4208	V 2219	eVizzit of Ia Psychiatry, JAIL		Crisis Evaluation	41500	04044	301	62				4060.00
4208	V 2219	eVizzit of Ia Psychiatry, JAIL		Crisis Evaluation	41500	04044	301	62				2320.00
4208	V 2219	eVizzit of Ia Psychiatry, JAIL		Crisis Stabilization Comm	41500	04044	312	62				900.00
4208	V 2219	eVizzit of Ia Psychiatry, JAIL		Crisis Evaluation	41500	04244	301	62				290.00
4208	V 2219	eVizzit of Ia Psychiatry, JAIL		Crisis Evaluation	41500	04244	301	62				580.00

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Claim #	Vendor#	Payee Name	Invoice#	Description	Fund	Funct	Obj	Dpt	Prj	Sub	Line	Amount
				Disbursement#	8438	Disbursement	Total					101,530.00
4208	V 2219	eVizzit of Ia Psychiatry, JAIL		Crisis Evaluation	41500	04244	301	62				290.00
				Disbursement#	8439	Disbursement	Total					290.00
4212	V 2438	Foundation 2, Inc.		Mobile Response	41500	04044	307	62				9295.00
				Disbursement#	8440	Disbursement	Total					9,295.00
4210	V 2430	Freedom Pointe of Greater		Psychotherapeutic Treatme	41500	04042	366	62				8403.00
				Disbursement#	8441	Disbursement	Total					8,403.00
4209	V 2402	Meghan Freie		Direct Admin - Mileage &	41500	04411	413	62				226.63
4209	V 2402	Meghan Freie		Direct Admin - Mileage &	41500	04411	413	62				170.30
				Disbursement#	8442	Disbursement	Total					396.93
4211	V 2436	Friendship Ark Inc.		Support Services - Suppor	41500	04332	329	62				5966.82
4211	V 2436	Friendship Ark Inc.		Day Habilitation	41500	04350	367	62				195.73
				Disbursement#	8443	Disbursement	Total					6,162.55
4213	V 2654	Kent L. Geffe		Commitment - Legal Repres	41500	04074	393	62				136.50
4213	V 2654	Kent L. Geffe		Commitment - Legal Repres	41500	04074	393	62				156.00
				Disbursement#	8444	Disbursement	Total					292.50
4258	V 82851	Kelly Gerke		Direct Admin - Mileage &	41500	04411	413	62				105.13
				Disbursement#	8445	Disbursement	Total					105.13
4215	V 2724	Hamilton County		Commitment - Sheriff Tran	41500	04074	353	62				229.20
				Disbursement#	8446	Disbursement	Total					229.20
4222	V 3356	Heartland Business Systems LLC		Purchased Admin - Data Pr	41500	04412	421	62				1224.00
4222	V 3356	Heartland Business Systems LLC		Purchased Admin - Data Pr	41500	04412	421	62				800.90
				Disbursement#	8447	Disbursement	Total					2,024.90
4218	V 3019	Hillcrest Family Services		Comm Based Settings (6+ B	41500	04064	314	62				1256.76
4218	V 3019	Hillcrest Family Services		Comm Based Settings (6+ B	41500	04064	314	62				3246.63
				Disbursement#	8448	Disbursement	Total					4,503.39
4260	V 83215	Carrie Hisler		Services Management - Mil	41500	04022	413	62				136.00
4260	V 83215	Carrie Hisler		Services Management - Mil	41500	04222	413	62				118.02
4260	V 83215	Carrie Hisler		Services Management - Mil	41500	04322	413	62				123.26
				Disbursement#	8449	Disbursement	Total					377.28
4219	V 3120	Hope Family Counseling		Psychotherapeutic Treatme	41500	04042	305	62				114.17
				Disbursement#	8450	Disbursement	Total					114.17
4224	V 3532	Integrated Telehealth Partners		Mental Health Services in	41500	04046	305	62				577.98
4224	V 3532	Integrated Telehealth Partners		Mental Health Services in	41500	04046	305	62				124.17
4224	V 3532	Integrated Telehealth Partners		Mental Health Services in	41500	04046	305	62				1074.66
4224	V 3532	Integrated Telehealth Partners		Mental Health Services in	41500	04046	305	62				661.50
4224	V 3532	Integrated Telehealth Partners		Mental Health Services in	41500	04046	305	62				288.99

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Claim #	Vendor#	Payee Name	Invoice#	Description	Fund	Funct	Obj	Dpt	Prj	Sub	Line	Amount
4224 V	3532	Integrated Telehealth Partners		Mental Health Services in	41500	04046	305	62				826.32
4224 V	3532	Integrated Telehealth Partners		Mental Health Services in	41500	04046	305	62				826.32
4224 V	3532	Integrated Telehealth Partners		Mental Health Services in	41500	04046	305	62				413.16
4224 V	3532	Integrated Telehealth Partners		Mental Health Services in	41500	04046	305	62				248.34
4224 V	3532	Integrated Telehealth Partners		Mental Health Services in	41500	04046	305	62				577.98
4224 V	3532	Integrated Telehealth Partners		Mental Health Services in	41500	04046	305	62				413.16
4224 V	3532	Integrated Telehealth Partners		Mental Health Services in	41500	04046	305	62				288.99
4224 V	3532	Integrated Telehealth Partners		Mental Health Services in	41500	04046	305	62				577.98
4224 V	3532	Integrated Telehealth Partners		Mental Health Services in	41500	04046	305	62				413.16
4224 V	3532	Integrated Telehealth Partners		Mental Health Services in	41500	04046	305	62				248.34
4224 V	3532	Integrated Telehealth Partners		Mental Health Services in	41500	04046	305	62				826.32
				Disbursement#	8451	Disbursement		Total				8,387.37
4225 V	3620	Jasper County Sheriff		Prescription Medication (	41500	04046	306	62				135.68
				Disbursement#	8452	Disbursement		Total				135.68
4197 V	1224	Erin Kamerick		Justice System Involved C	41500	04025	413	62				167.03
				Disbursement#	8453	Disbursement		Total				167.03
4226 V	4264	Jeffrey S Lavallee		Commitment - Legal Repres	41500	04074	393	62				299.30
				Disbursement#	8454	Disbursement		Total				299.30
4255 V	8100	Marco		Services Management - Off	41500	04022	444	62				96.67
4255 V	8100	Marco		Crisis Care Coordination	41500	04023	444	62				14.16
4255 V	8100	Marco		Justice System Involved C	41500	04025	444	62				34.74
4255 V	8100	Marco		Direct Admin - Office Equ	41500	04411	636	62				82.96
				Disbursement#	8455	Disbursement		Total				228.53
4230 V	4443	Marshall County		Commitment - Sheriff Tran	41500	04074	353	62				47.00
4230 V	4443	Marshall County		Commitment - Sheriff Tran	41500	04074	353	62				93.00
4230 V	4443	Marshall County		Commitment - Sheriff Tran	41500	04074	353	62				31.00
				Disbursement#	8456	Disbursement		Total				171.00
4189 V	269	Tanya Martinson		Direct Admin - Mileage &	41500	04411	413	62				36.68
				Disbursement#	8457	Disbursement		Total				36.68
4231 V	4508	Mason City Clinic		Commitment - Diagnostic E	41500	04074	300	62				420.00
4231 V	4508	Mason City Clinic		Commitment - Diagnostic E	41500	04074	300	62				60.00
				Disbursement#	8458	Disbursement		Total				480.00
4220 V	3129	Liza Maxwell		Services Management - Mil	41500	04022	413	62				187.74
4220 V	3129	Liza Maxwell		Services Management - Tel	41500	04022	414	62				50.00
4220 V	3129	Liza Maxwell		Services Management - Edu	41500	04022	422	62				24.50
4220 V	3129	Liza Maxwell		Services Management - Mil	41500	04222	413	62				182.21
4220 V	3129	Liza Maxwell		Services Management - Edu	41500	04222	422	62				23.78
4220 V	3129	Liza Maxwell		Services Management - Mil	41500	04322	413	62				182.21
4220 V	3129	Liza Maxwell		Services Management - Edu	41500	04322	422	62				23.78
				Disbursement#	8459	Disbursement		Total				674.22
4228 V	4340	Tabatha McLain		Services Management - Mil	41500	04022	413	62				49.81

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4238 V	5815	Poweshiek Co Sheriff's Dept		Prescription Medication (41500	04046	306	62				1.90-
4238 V	5815	Poweshiek Co Sheriff's Dept		Prescription Medication (	41500	04046	306	62				260.76
				Disbursement#	8469	Disbursement	Total					258.86
4257 V	82831	Prairie Ridge Integrated		Psychotherapeutic Treatme	41500	04042	305	62				114.17
4257 V	82831	Prairie Ridge Integrated		Psychotherapeutic Treatme	41500	04042	305	62				28.36
4257 V	82831	Prairie Ridge Integrated		Psychotherapeutic Treatme	41500	04042	305	62				28.36
4257 V	82831	Prairie Ridge Integrated		Psychotherapeutic Treatme	41500	04042	305	62				51.64
4257 V	82831	Prairie Ridge Integrated		Psychotherapeutic Treatme	41500	04042	305	62				28.36
4257 V	82831	Prairie Ridge Integrated		Psychotherapeutic Treatme	41500	04042	305	62				28.36
4257 V	82831	Prairie Ridge Integrated		Psychotherapeutic Treatme	41500	04042	305	62				28.36
4257 V	82831	Prairie Ridge Integrated		Psychotherapeutic Treatme	41500	04042	305	62				28.36
4257 V	82831	Prairie Ridge Integrated		Psychotherapeutic Treatme	41500	04042	305	62				51.64
4257 V	82831	Prairie Ridge Integrated		Psychotherapeutic Treatme	41500	04042	305	62				114.17
4257 V	82831	Prairie Ridge Integrated		Psychotherapeutic Treatme	41500	04042	305	62				28.36
4257 V	82831	Prairie Ridge Integrated		Psychotherapeutic Treatme	41500	04042	305	62				28.36
4257 V	82831	Prairie Ridge Integrated		Psychotherapeutic Treatme	41500	04042	305	62				51.64
4257 V	82831	Prairie Ridge Integrated		Psychotherapeutic Treatme	41500	04042	305	62				28.36
4257 V	82831	Prairie Ridge Integrated		Psychotherapeutic Treatme	41500	04042	305	62				28.36
4257 V	82831	Prairie Ridge Integrated		Psychotherapeutic Treatme	41500	04042	305	62				51.64
4257 V	82831	Prairie Ridge Integrated		Psychotherapeutic Treatme	41500	04042	305	62				28.36
4257 V	82831	Prairie Ridge Integrated		Psychotherapeutic Treatme	41500	04042	305	62				28.36
4257 V	82831	Prairie Ridge Integrated		Psychotherapeutic Treatme	41500	04042	305	62				114.17
4257 V	82831	Prairie Ridge Integrated		Psychotherapeutic Treatme	41500	04042	306	62				29.75
4257 V	82831	Prairie Ridge Integrated		Psychotherapeutic Treatme	41500	04042	306	62				101.60
4257 V	82831	Prairie Ridge Integrated		Psychotherapeutic Treatme	41500	04042	306	62				36.23
4257 V	82831	Prairie Ridge Integrated		Psychotherapeutic Treatme	41500	04042	306	62				36.23
4257 V	82831	Prairie Ridge Integrated		Assertive Community Treat	41500	04042	398	62				55.83
4257 V	82831	Prairie Ridge Integrated		Assertive Community Treat	41500	04042	398	62				55.83
4257 V	82831	Prairie Ridge Integrated		Assertive Community Treat	41500	04042	398	62				55.83
4257 V	82831	Prairie Ridge Integrated		Assertive Community Treat	41500	04042	398	62				55.83
4257 V	82831	Prairie Ridge Integrated		Assertive Community Treat	41500	04042	398	62				55.83
4257 V	82831	Prairie Ridge Integrated		Assertive Community Treat	41500	04042	398	62				55.83
4257 V	82831	Prairie Ridge Integrated		Assertive Community Treat	41500	04042	398	62				55.83
4257 V	82831	Prairie Ridge Integrated		Assertive Community Treat	41500	04042	398	62				55.83
4257 V	82831	Prairie Ridge Integrated		Assertive Community Treat	41500	04042	398	62				55.83
4257 V	82831	Prairie Ridge Integrated		Assertive Community Treat	41500	04042	398	62				55.83
4257 V	82831	Prairie Ridge Integrated		Assertive Community Treat	41500	04042	398	62				55.83
4257 V	82831	Prairie Ridge Integrated		Psychotherapeutic Treatme	41500	04042	305	62				59.43
4257 V	82831	Prairie Ridge Integrated		Psychotherapeutic Treatme	41500	04042	305	62				114.17
				Disbursement#	8470	Disbursement	Total					1,880.93
4257 V	82831	Prairie Ridge Integrated		Psychotherapeutic Treatme	41500	04042	305	62				114.17
4257 V	82831	Prairie Ridge Integrated		Psychotherapeutic Treatme	41500	04042	305	62				114.17
4257 V	82831	Prairie Ridge Integrated		Psychotherapeutic Treatme	41500	04042	305	62				114.17
4257 V	82831	Prairie Ridge Integrated		Assertive Community Treat	41500	04042	398	62				55.83
4257 V	82831	Prairie Ridge Integrated		Assertive Community Treat	41500	04042	398	62				55.83
4257 V	82831	Prairie Ridge Integrated		Assertive Community Treat	41500	04042	398	62				55.83
4257 V	82831	Prairie Ridge Integrated		Assertive Community Treat	41500	04042	398	62				55.83
4257 V	82831	Prairie Ridge Integrated		Assertive Community Treat	41500	04042	398	62				55.83

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Claim #	Vendor#	Payee Name	Invoice#	Description	Fund	Funct	Obj	Dpt	Prj	Sub	Line	Amount	
4244 V	6455	Scott County Sheriff		Commitment - Sheriff Tran	41500	04074	353	62				48.40	
4244 V	6455	Scott County Sheriff		Commitment - Sheriff Tran	41500	04074	353	62				48.40	
				Disbursement# 8478								Disbursement Total	138.95
4246 V	6579	Jen Sheehan		Direct Admin - Mileage &	41500	04411	413	62				682.51	
4246 V	6579	Jen Sheehan		Direct Admin - Educationa	41500	04411	422	62				196.50	
				Disbursement# 8479								Disbursement Total	879.01
4259 V	82938	The Shredder		Services Management - Cus	41500	04022	471	62				20.21	
4259 V	82938	The Shredder		Crisis Care Coordination	41500	04023	471	62				2.88	
4259 V	82938	The Shredder		Justice System Involved C	41500	04025	471	62				7.63	
4259 V	82938	The Shredder		Direct Admin - Custodial	41500	04411	471	62				17.28	
				Disbursement# 8480								Disbursement Total	48.00
4247 V	6618	Sigmeth Roberts Law, PLC		Commitment - Legal Repres	41500	04074	393	62				228.28	
4247 V	6618	Sigmeth Roberts Law, PLC		Commitment - Legal Repres	41500	04074	393	62				341.02	
				Disbursement# 8481								Disbursement Total	569.30
4216 V	2863	Nicholle Stangeland		Crisis Care Coordination	41500	04023	413	62				205.67	
				Disbursement# 8482								Disbursement Total	205.67
4192 V	367	Betsy Stursma		Direct Admin - Mileage &	41500	04411	413	62				146.72	
4192 V	367	Betsy Stursma		Direct Admin - Telecommun	41500	04411	414	62				50.00	
				Disbursement# 8483								Disbursement Total	196.72
4248 V	7202	Thrifty White Pharmacy		Prescription Medication (	41500	04046	306	62				186.14
4248 V	7202	Thrifty White Pharmacy		Prescription Medication (	41500	04046	306	62				82.88
				Disbursement# 8484								Disbursement Total	269.02
4249 V	7401	Treasurer State of Iowa		State MHI Inpatient - Per	41500	04071	319	62				154.00	
4249 V	7401	Treasurer State of Iowa		State MHI Inpatient - Per	41500	04071	319	62				130.00	
4249 V	7401	Treasurer State of Iowa		State MHI Inpatient - Per	41500	04071	319	62				489.00	
4249 V	7401	Treasurer State of Iowa		State MHI Inpatient - Per	41500	04071	319	62				33.38	
4249 V	7401	Treasurer State of Iowa		State MHI Inpatient - Per	41500	04071	319	62				677.00	
4249 V	7401	Treasurer State of Iowa		State MHI Inpatient - Per	41500	04071	319	62				4050.37	
4249 V	7401	Treasurer State of Iowa		State MHI Inpatient - Per	41500	04071	319	62				13827.72	
4249 V	7401	Treasurer State of Iowa		State MHI Inpatient - Per	41500	04071	319	62				.00	
4249 V	7401	Treasurer State of Iowa		State MHI Inpatient - Per	41500	04071	319	62				.00	
4249 V	7401	Treasurer State of Iowa		State MHI Inpatient - Per	41500	04071	319	62				13304.92	
4250 V	7401	Treasurer State of Iowa		State MHI Inpatient - Per	41500	04071	319	62				1094.82	
4250 V	7401	Treasurer State of Iowa		State MHI Inpatient - Per	41500	04071	319	62				46.00	
4250 V	7401	Treasurer State of Iowa		State MHI Inpatient - Per	41500	04071	319	62				21649.80	
4250 V	7401	Treasurer State of Iowa		State MHI Inpatient - Per	41500	04071	319	62				962.23	
4250 V	7401	Treasurer State of Iowa		State MHI Inpatient - Per	41500	04071	319	62				1541.89	
4250 V	7401	Treasurer State of Iowa		State MHI Inpatient - Per	41500	04071	319	62				2495.58	
4250 V	7401	Treasurer State of Iowa		State MHI Inpatient - Per	41500	04071	319	62				8141.22	
4250 V	7401	Treasurer State of Iowa		State MHI Inpatient - Per	41500	04071	319	62				12909.05	
				Disbursement# 8485								Disbursement Total	81,506.98
4251 V	7421	Trilix Marketing Group		Public Education Services	41500	04005	373	62				400.00	

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Claim #	Vendor#	Payee Name	Invoice#	Description	Fund	Funct	Obj	Dpt	Prj	Sub	Line	Amount
				Disbursement#	8486	Disbursement	Total					400.00
4229	V 4376	U.S. Bank Equipment Finance		Services Management - Off	41500	04022	636	62				80.25
4229	V 4376	U.S. Bank Equipment Finance		Crisis Care Coordination	41500	04023	636	62				13.39
4229	V 4376	U.S. Bank Equipment Finance		Justice System Involved C	41500	04025	636	62				28.66
4229	V 4376	U.S. Bank Equipment Finance		Direct Admin - Office Equ	41500	04411	636	62				68.79
				Disbursement#	8487	Disbursement	Total					191.09
4188	V 77	Verizon Wireless		Services Management - Tel	41500	04022	414	62				33.60
4188	V 77	Verizon Wireless		Crisis Care Coordination	41500	04023	414	62				5.62
4188	V 77	Verizon Wireless		Justice System Involved C	41500	04025	414	62				12.00
4188	V 77	Verizon Wireless		Direct Admin - Telecommun	41500	04411	414	62				28.80
				Disbursement#	8488	Disbursement	Total					80.02
4252	V 7601	VISA		Services Management - Sta	41500	04022	260	62				228.09
4252	V 7601	VISA		Services Management - Tel	41500	04022	414	62				305.01
4252	V 7601	VISA		Crisis Care Coordination	41500	04023	260	62				32.58
4252	V 7601	VISA		Crisis Care Coordination	41500	04023	414	62				43.56
4252	V 7601	VISA		Justice System Involved C	41500	04025	260	62				81.44
4252	V 7601	VISA		Justice System Involved C	41500	04025	414	62				108.91
4252	V 7601	VISA		Direct Admin - Stationary	41500	04411	260	62				195.46
4252	V 7601	VISA		Direct Admin - Informatio	41500	04411	262	62				224.11
4252	V 7601	VISA		Direct Admin - Telecommun	41500	04411	414	62				261.37
				Disbursement#	8489	Disbursement	Total					1,480.53
4263	V 7601	VISA		Direct Admin - Educationa	41500	04411	422	62				170.00
				Disbursement#	8490	Disbursement	Total					170.00
4253	V 7680	Warren County Sheriff		Prescription Medication (	41500	04046	306	62				260.09
				Disbursement#	8491	Disbursement	Total					260.09
4191	V 350	Woolstock Mutal Telephone Assn		Services Management - Tel	41500	04022	414	62				23.10
4191	V 350	Woolstock Mutal Telephone Assn		Crisis Care Coordination	41500	04023	414	62				3.85
4191	V 350	Woolstock Mutal Telephone Assn		Justice System Involved C	41500	04025	414	62				8.25
4191	V 350	Woolstock Mutal Telephone Assn		Direct Admin - Telecommun	41500	04411	414	62				19.80
				Disbursement#	8492	Disbursement	Total					55.00
4254	V 7870	Youth & Shelter Services, Inc		Public Education Services	41500	04005	373	62				4000.00
				Disbursement#	8493	Disbursement	Total					4,000.00
					77	Total Disbursements						446,787.25
					0	Total ACH						.00
					0	Total EFT						.00
					77	Grand Total						446,787.25
						Credits/Refunds Included						1.90

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Totals by Fund

41500	Central Iowa Community Service	446,787.25
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Final Total	446,787.25
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Claim #	Vendor#	Payee Name	Invoice#	Description	Fund	Funct	Obj	Dpt	Prj	Sub	Line	Amount
4545	V 15	Abbe Center for Community		Comm Based Settings (6+ B Disbursement#	41500 8511	04064 Disbursement	314	62				9235.80 9,235.80
4546	V 129	Alliant Energy		Services Management - Ele	41500	04022	431	62				59.26
4546	V 129	Alliant Energy		Crisis Care Coordination	41500	04023	431	62				6.79
4546	V 129	Alliant Energy		Justice System Involved C	41500	04025	431	62				20.20
4546	V 129	Alliant Energy		Direct Admin - Electric P Disbursement#	41500 8512	04411 Disbursement	431	62				48.44 134.69
4551	V 508	ARC of Story County		Psychotherapeutic Treatme	41500	04042	366	62				283.32
4551	V 508	ARC of Story County		Psychotherapeutic Treatme	41500	04242	366	62				3623.96
4551	V 508	ARC of Story County		Psychotherapeutic Treatme Disbursement#	41500 8513	04342 Disbursement	366	62				401.37 4,308.65
4561	E 1141	Bryan J Barker		Commitment - Legal Repres	41500	04074	393	62				255.50
4561	E 1141	Bryan J Barker		Commitment - Legal Repres	41500	04074	393	62				408.80
4561	E 1141	Bryan J Barker		Commitment - Legal Repres	41500	04074	393	62				211.70
4561	E 1141	Bryan J Barker		Commitment - Legal Repres Disbursement#	41500 8514	04074 Disbursement	393	62				240.90 1,116.90
4554	V 712	A Better Image, Inc.		Services Management - Sta	41500	04022	260	62				3121.04
4554	V 712	A Better Image, Inc.		Services Management - Sta Disbursement#	41500 8515	04022 Disbursement	260	62				1333.06 4,454.10
4556	V 790	Black Hawk Co Sheriff		Commitment - Sheriff Tran Disbursement#	41500 8516	04074 Disbursement	353	62				36.55 36.55
4558	V 877	Boone Co Sheriff		Commitment - Sheriff Tran	41500	04074	353	62				74.10
4558	V 877	Boone Co Sheriff		Commitment - Sheriff Tran	41500	04074	353	62				37.05
4558	V 877	Boone Co Sheriff		Commitment - Sheriff Tran	41500	04074	353	62				37.05
4558	V 877	Boone Co Sheriff		Commitment - Sheriff Tran Disbursement#	41500 8517	04074 Disbursement	353	62				39.67 187.87
4557	V 876	Boone County Auditor		Services Management - Ren	41500	04022	450	62				358.00
4557	V 876	Boone County Auditor		Crisis Care Coordination	41500	04023	450	62				51.13
4557	V 876	Boone County Auditor		Justice System Involved C	41500	04025	450	62				127.83
4557	V 876	Boone County Auditor		Direct Admin - Building (	41500	04411	450	62				306.79
4557	V 876	Boone County Auditor		Purchased Admin - Account	41500	04412	420	62				1346.33
4557	V 876	Boone County Auditor		Mental Health Advocate -	41500	04075	395	62				2851.89
4557	V 876	Boone County Auditor		Mental Health Advocate - Disbursement#	41500 8518	04075 Disbursement	413	62				2851.29 7,893.26
4559	V 928	Brick and Tile LLC		Services Management - Ren	41500	04022	450	62				891.03
4559	V 928	Brick and Tile LLC		Crisis Care Coordination	41500	04023	450	62				127.26
4559	V 928	Brick and Tile LLC		Justice System Involved C	41500	04025	450	62				318.15
4559	V 928	Brick and Tile LLC		Direct Admin - Building (	41500	04411	450	62				763.56
				Disbursement#	8519	Disbursement						2,100.00
4563	V 1327	Center Associates		Crisis Evaluation Disbursement#	41500 8520	04044 Disbursement	301	62				1605.35 1,605.35

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Claim #	Vendor#	Payee Name	Invoice#	Description	Fund	Funct	Obj	Dpt	Prj	Sub	Line	Amount
4565 V	1361	CIR, Inc.		Psychotherapeutic Treatme	41500	04042	366	62				8351.28
4565 V	1361	CIR, Inc.		Psychotherapeutic Treatme	41500	04242	366	62				52.20
4565 V	1361	CIR, Inc.		Psychotherapeutic Treatme	41500	04042	366	62				8403.48
4565 V	1361	CIR, Inc.		Psychotherapeutic Treatme	41500	04042	366	62				8275.20
4565 V	1361	CIR, Inc.		Psychotherapeutic Treatme	41500	04242	366	62				128.28
4565 V	1361	CIR, Inc.		Psychotherapeutic Treatme	41500	04042	397	62				1184.82
4565 V	1361	CIR, Inc.		Access Center start-up/su	41500	04044	396	62				1000.00
4565 V	1361	CIR, Inc.		Support Services - Suppor	41500	04332	329	62				464.00
4565 V	1361	CIR, Inc.		Day Habilitation	41500	04350	367	62				864.32
				Disbursement#	8521							28,723.58
												Disbursement Total
4564 V	1346	Central Iowa Residential Serv.		Support Services - Suppor	41500	04232	329	62				5114.67
4564 V	1346	Central Iowa Residential Serv.		Day Habilitation	41500	04250	367	62				1419.52
4564 V	1346	Central Iowa Residential Serv.		Support Services - Suppor	41500	04232	329	62				476.80
				Disbursement#	8522							7,010.99
												Disbursement Total
4566 V	1372	Central Services 2-5-12		Services Management - Ren	41500	04022	450	62				318.23
4566 V	1372	Central Services 2-5-12		Crisis Care Coordination	41500	04023	450	62				45.45
4566 V	1372	Central Services 2-5-12		Justice System Involved C	41500	04025	450	62				113.62
4566 V	1372	Central Services 2-5-12		Direct Admin - Building (	41500	04411	450	62				272.70
				Disbursement#	8523							750.00
												Disbursement Total
4570 V	1473	ChildServe Community Options		Support Services - Respit	41500	04232	325	62				531.06
				Disbursement#	8524							531.06
												Disbursement Total
4571 V	1751	Jessica Crawford		Services Management - Mil	41500	04022	413	62				171.92
4571 V	1751	Jessica Crawford		Services Management - Mil	41500	04222	413	62				166.87
4571 V	1751	Jessica Crawford		Services Management - Mil	41500	04322	413	62				166.87
				Disbursement#	8525							505.66
												Disbursement Total
4572 V	1762	Crossroads Mental Hlth Ctr		Mental Health Services in	41500	04046	305	62				155.61
				Disbursement#	8526							155.61
												Disbursement Total
4573 V	1773	Culligan		Services Management - Wat	41500	04022	432	62				18.98
4573 V	1773	Culligan		Crisis Care Coordination	41500	04023	432	62				3.17
4573 V	1773	Culligan		Justice System Involved C	41500	04025	432	62				6.78
4573 V	1773	Culligan		Direct Admin - Water & Se	41500	04411	432	62				16.27
				Disbursement#	8527							45.20
												Disbursement Total
4616 V	6709	Duncan Heights, Inc.		Services Management - Tel	41500	04022	414	62				16.28
4616 V	6709	Duncan Heights, Inc.		Services Management - Ren	41500	04022	450	62				63.64
4616 V	6709	Duncan Heights, Inc.		Crisis Care Coordination	41500	04023	414	62				2.33
4616 V	6709	Duncan Heights, Inc.		Crisis Care Coordination	41500	04023	450	62				9.09
4616 V	6709	Duncan Heights, Inc.		Justice System Involved C	41500	04025	414	62				5.81
4616 V	6709	Duncan Heights, Inc.		Justice System Involved C	41500	04025	450	62				22.73
4616 V	6709	Duncan Heights, Inc.		Direct Admin - Telecommun	41500	04411	414	62				13.95
4616 V	6709	Duncan Heights, Inc.		Direct Admin - Building (	41500	04411	450	62				54.54
				Disbursement#	8528							188.37
												Disbursement Total
4607 V	5696	Eyerly Ball CMHS		Evaluation (Non Crisis) -	41500	04043	301	62				155.61

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				Disbursement#	8529	Disbursement	Total					155.61
4575	V 2420	Franklin County Auditor		Services Management - Ren	41500	04022	450	62				394.60
4575	V 2420	Franklin County Auditor		Crisis Care Coordination	41500	04023	450	62				56.35
4575	V 2420	Franklin County Auditor		Justice System Involved C	41500	04025	450	62				140.90
4575	V 2420	Franklin County Auditor		Direct Admin - Building (	41500	04411	450	62				338.15
4575	V 2420	Franklin County Auditor		Services Management - Sal	41500	04022	100	62				8207.89
4575	V 2420	Franklin County Auditor		Crisis Care Coordination	41500	04023	100	62				1084.06
4575	V 2420	Franklin County Auditor		Justice System Involved C	41500	04025	100	62				4955.71
4575	V 2420	Franklin County Auditor		Direct Admin - Salary Reg	41500	04411	100	62				7123.83
4575	V 2420	Franklin County Auditor		Services Management - Sal	41500	04022	100	62				98899.60
4575	V 2420	Franklin County Auditor		Services Management - Sal	41500	04222	100	62				5690.67
4575	V 2420	Franklin County Auditor		Services Management - Sal	41500	04322	100	62				5886.67
4575	V 2420	Franklin County Auditor		Services Management - Sal	41500	04722	100	62				588.69
4575	V 2420	Franklin County Auditor		Justice System Involved C	41500	04025	100	62				38071.56
4575	V 2420	Franklin County Auditor		Direct Admin - Salary Reg	41500	04411	100	62				94865.36
4575	V 2420	Franklin County Auditor		Purchased Admin - Account	41500	04412	420	62				4944.89
4575	V 2420	Franklin County Auditor		Purchased Admin - Data Pr	41500	04412	421	62				5403.80
4575	V 2420	Franklin County Auditor		Crisis Care Coordination	41500	04023	100	62				12247.81
				Disbursement#	8530	Disbursement	Total					288,900.54
4630	V 72119	Franklin County Sheriff's Off.		Commitment - Sheriff Tran	41500	04074	353	62				41.88
				Disbursement#	8531	Disbursement	Total					41.88
4576	V 2430	Freedom Pointe of Greater		Psychotherapeutic Treatme	41500	04042	366	62				8403.00
				Disbursement#	8532	Disbursement	Total					8,403.00
4574	V 1815	Gatehouse Media IA Holdings		Direct Admin - Publ acct8	41500	04411	400	62				438.00
4574	V 1815	Gatehouse Media IA Holdings		Direct Admin - Publ acct8	41500	04411	400	62				303.00
				Disbursement#	8533	Disbursement	Total					741.00
4579	V 2654	Kent L. Geffe		Commitment - Legal Repres	41500	04074	393	62				97.50
4579	V 2654	Kent L. Geffe		Commitment - Legal Repres	41500	04074	393	62				481.00
4579	V 2654	Kent L. Geffe		Commitment - Legal Repres	41500	04074	393	62				468.00
				Disbursement#	8534	Disbursement	Total					1,046.50
4577	V 2549	Gethmann Investment Corp.		Services Management - Ren	41500	04022	450	62				403.09
4577	V 2549	Gethmann Investment Corp.		Crisis Care Coordination	41500	04023	450	62				57.57
4577	V 2549	Gethmann Investment Corp.		Justice System Involved C	41500	04025	450	62				143.92
4577	V 2549	Gethmann Investment Corp.		Direct Admin - Building (	41500	04411	450	62				345.42
				Disbursement#	8535	Disbursement	Total					950.00
4578	V 2605	Gregory F. Greiner		Commitment - Legal Repres	41500	04074	393	62				109.50
				Disbursement#	8536	Disbursement	Total					109.50
4580	V 2724	Hamilton County		Commitment - Sheriff Tran	41500	04074	353	62				705.25
				Disbursement#	8537	Disbursement	Total					705.25
4581	V 2725	Hamilton County Auditor		Services Management - Ren	41500	04022	450	62				233.37
4581	V 2725	Hamilton County Auditor		Crisis Care Coordination	41500	04023	450	62				33.33

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4581 V	2725	Hamilton County Auditor		Justice System Involved C	41500	04025	450	62				83.32
4581 V	2725	Hamilton County Auditor		Direct Admin - Building (	41500	04411	450	62				199.98
4581 V	2725	Hamilton County Auditor		Purchased Admin - Account	41500	04412	420	62				1382.18
				Disbursement# 8538							Disbursement Total	1,932.18
4582 V	2726	Hamilton County Jail		Prescription Medication (	41500	04046	306	62				86.71
				Disbursement# 8539							Disbursement Total	86.71
4613 V	5962	Hardin County Auditor		Mental Health Advocate -	41500	04075	395	62				6050.45
				Disbursement# 8540							Disbursement Total	6,050.45
4583 V	2917	Heart of Ia Communications Co		Services Management - Tel	41500	04022	414	62				53.11
4583 V	2917	Heart of Ia Communications Co		Crisis Care Coordination	41500	04023	414	62				7.58
4583 V	2917	Heart of Ia Communications Co		Justice System Involved C	41500	04025	414	62				18.95
4583 V	2917	Heart of Ia Communications Co		Direct Admin - Telecommun	41500	04411	414	62				45.50
				Disbursement# 8541							Disbursement Total	125.14
4587 V	3356	Heartland Business Systems LLC		Purchased Admin - Data Pr	41500	04412	421	62				335.86
				Disbursement# 8542							Disbursement Total	335.86
4600 V	5137	HIRTA Public Transit		Transportation - General	41500	04031	354	62				751.59
4600 V	5137	HIRTA Public Transit		Transportation - General	41500	04331	354	62				131.23
4600 V	5137	HIRTA Public Transit		Transportation - General	41500	04031	354	62				332.92
4600 V	5137	HIRTA Public Transit		Transportation - General	41500	04331	354	62				83.23
4600 V	5137	HIRTA Public Transit		Transportation - General	41500	04031	354	62				79.24
4600 V	5137	HIRTA Public Transit		Transportation - General	41500	04331	354	62				106.26
4600 V	5137	HIRTA Public Transit		Transportation - General	41500	04231	354	62				309.14
				Disbursement# 8543							Disbursement Total	1,793.61
4584 V	3132	Horn Law Offices		Commitment - Legal Repres	41500	04074	393	62				116.80
				Disbursement# 8544							Disbursement Total	116.80
4636 V	83184	Hy-Vee Accts Rcvble		Physiological Treatment -	41500	04041	306	62				124.49
				Disbursement# 8545							Disbursement Total	124.49
4631 V	72556	Ia Specialty Hospital-Clarion		Psychotherapeutic Treatme	41500	04042	305	62				15562.88
				Disbursement# 8546							Disbursement Total	15,562.88
4585 V	3227	Imagine The Possibilities Inc		Support Services - Suppor	41500	04032	329	62				3187.24
4585 V	3227	Imagine The Possibilities Inc		Support Services - Suppor	41500	04032	329	62				3642.56
4585 V	3227	Imagine The Possibilities Inc		Support Services - Suppor	41500	04032	329	62				2276.60
4585 V	3227	Imagine The Possibilities Inc		Support Services - Suppor	41500	04232	329	62				1583.16
4585 V	3227	Imagine The Possibilities Inc		Voc/Day - Individual Supp	41500	04250	368	62				43.83
4585 V	3227	Imagine The Possibilities Inc		Support Services - Suppor	41500	04332	329	62				280.56
4585 V	3227	Imagine The Possibilities Inc		Day Habilitation	41500	04350	367	62				691.29
4585 V	3227	Imagine The Possibilities Inc		Voc/Day - Individual Supp	41500	04350	368	62				853.71
4585 V	3227	Imagine The Possibilities Inc		Day Habilitation	41500	04750	367	62				844.91
				Disbursement# 8547							Disbursement Total	13,403.86
4586 V	3253	Inside Out Wellness & Advocacy		Crisis Stabilization Resi	41500	04044	313	62				720.38

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				Disbursement#	8548							720.38
4588 V	3620	Jasper County Sheriff		Commitment - Sheriff Tran	41500	04074	353	62				514.71
4588 V	3620	Jasper County Sheriff		Commitment - Sheriff Tran	41500	04074	353	62				376.50
4588 V	3620	Jasper County Sheriff		Commitment - Sheriff Tran	41500	04074	353	62				829.30
4588 V	3620	Jasper County Sheriff		Commitment - Sheriff Tran	41500	04074	353	62				164.25
4588 V	3620	Jasper County Sheriff		Commitment - Sheriff Tran	41500	04074	353	62				69.05
				Disbursement#	8549							1,953.81
4560 V	946	Madelynn Krutsinger		Justice System Involved C	41500	04025	413	62				172.92
				Disbursement#	8550							172.92
4589 V	4092	Michelle Lauchner		Direct Admin - Mileage &	41500	04411	413	62				65.50
4589 V	4092	Michelle Lauchner		Direct Admin - Stationary	41500	04411	260	62				201.00
				Disbursement#	8551							266.50
4590 V	4103	Lisa Leanhart		Direct Admin - Mileage &	41500	04411	413	62				32.75
				Disbursement#	8552							32.75
4591 V	4151	Life Connections		Psychotherapeutic Treatme	41500	04042	305	62				235.31
4591 V	4151	Life Connections		Psychotherapeutic Treatme	41500	04042	305	62				95.00
4591 V	4151	Life Connections		Psychotherapeutic Treatme	41500	04042	305	62				234.76
4591 V	4151	Life Connections		Psychotherapeutic Treatme	41500	04042	305	62				93.02
4591 V	4151	Life Connections		Psychotherapeutic Treatme	41500	04042	305	62				187.81
4591 V	4151	Life Connections		Psychotherapeutic Treatme	41500	04042	305	62				95.00
4591 V	4151	Life Connections		Psychotherapeutic Treatme	41500	04042	305	62				235.31
4591 V	4151	Life Connections		Psychotherapeutic Treatme	41500	04042	305	62				93.02
4591 V	4151	Life Connections		Psychotherapeutic Treatme	41500	04042	305	62				300.84
4591 V	4151	Life Connections		Psychotherapeutic Treatme	41500	04042	305	62				235.31
4591 V	4151	Life Connections		Psychotherapeutic Treatme	41500	04042	305	62				93.02
4591 V	4151	Life Connections		Psychotherapeutic Treatme	41500	04042	305	62				303.92
				Disbursement#	8553							2,202.32
4568 E	1423	Jennifer Lockhart		Direct Admin - Mileage &	41500	04411	413	62				49.13
				Disbursement#	8554							49.13
4592 V	4358	Madison County Sheriff		Prescription Medication (	41500	04046	306	62				135.00
4592 V	4358	Madison County Sheriff		Prescription Medication (	41500	04046	306	62				100.00
4593 V	4358	Madison County Sheriff		Prescription Medication (	41500	04046	306	62				245.00
4593 V	4358	Madison County Sheriff		Prescription Medication (	41500	04046	306	62				83.00
4593 V	4358	Madison County Sheriff		Prescription Medication (	41500	04046	306	62				80.00
				Disbursement#	8555							643.00
4594 V	4400	Mainstream Living		Voc/Day - Group Supported	41500	04350	369	62				119.18
4594 V	4400	Mainstream Living		Day Habilitation	41500	04250	367	62				1152.15
4594 V	4400	Mainstream Living		Day Habilitation	41500	04350	367	62				844.91
				Disbursement#	8556							2,116.24
4595 V	4443	Marshall County		Prescription Medication (	41500	04046	306	62				13.33
4595 V	4443	Marshall County		Prescription Medication (41500	04046	306	62				140.69

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4595 V	4443	Marshall County		Prescription Medication (41500	04046	306	62				118.92
				Disbursement#	8557	Disbursement	Total					272.94
4637 V	4443	Marshall County		Commitment - Sheriff Tran	41500	04074	353	62				31.00
4637 V	4443	Marshall County		Commitment - Sheriff Tran	41500	04074	353	62				31.00
4637 V	4443	Marshall County		Commitment - Sheriff Tran	41500	04074	353	62				259.00
4637 V	4443	Marshall County		Commitment - Sheriff Tran	41500	04074	353	62				31.00
4637 V	4443	Marshall County		Commitment - Sheriff Tran	41500	04074	353	62				87.00
4637 V	4443	Marshall County		Commitment - Sheriff Tran	41500	04074	353	62				31.00
				Disbursement#	8558	Disbursement	Total					470.00
4596 V	4508	Mason City Clinic		Commitment - Diagnostic E	41500	04074	300	62				60.00
4596 V	4508	Mason City Clinic		Commitment - Diagnostic E	41500	04074	300	62				60.00
4596 V	4508	Mason City Clinic		Commitment - Diagnostic E	41500	04074	300	62				60.00
				Disbursement#	8559	Disbursement	Total					180.00
4629 V	7953	Robin McKee		Services Management - Mil	41500	04022	413	62				129.40
4629 V	7953	Robin McKee		Services Management - Mil	41500	04222	413	62				125.58
4629 V	7953	Robin McKee		Services Management - Mil	41500	04322	413	62				125.58
				Disbursement#	8560	Disbursement	Total					380.56
4633 V	72919	Medicap Pharmacy		Physiological Treatment -	41500	04041	306	62				69.30
				Disbursement#	8561	Disbursement	Total					69.30
4599 V	4901	Medicap Pharmacy 8095		Prescription Medication (	41500	04046	306	62				458.94
				Disbursement#	8562	Disbursement	Total					458.94
4597 V	4698	Ruth Helen Melby		Mental Health Advocate -	41500	04075	395	62				72.05
4597 V	4698	Ruth Helen Melby		Mental Health Advocate -	41500	04075	414	62				15.67
4597 V	4698	Ruth Helen Melby		Mental Health Advocate -	41500	04075	395	62				11.97
4597 V	4698	Ruth Helen Melby		Mental Health Advocate -	41500	04075	395	62				95.76
4597 V	4698	Ruth Helen Melby		Mental Health Advocate -	41500	04075	395	62				23.94
4597 V	4698	Ruth Helen Melby		Mental Health Advocate -	41500	04075	395	62				36.01
4597 V	4698	Ruth Helen Melby		Mental Health Advocate -	41500	04075	414	62				15.67
				Disbursement#	8563	Disbursement	Total					271.07
4598 V	4766	Mid-Iowa Triumph Recovery Ctr		Psychotherapeutic Treatme	41500	04042	366	62				7194.00
				Disbursement#	8564	Disbursement	Total					7,194.00
4562 V	1226	NAMI Central Iowa		Public Education Services	41500	04005	373	62				2000.00
4562 V	1226	NAMI Central Iowa		Psychotherapeutic Treatme	41500	04042	366	62				8403.00
4562 V	1226	NAMI Central Iowa		Peer Family Support - Fam	41500	04045	323	62				2000.00
				Disbursement#	8565	Disbursement	Total					12,403.00
4601 V	5220	Nite Owl Print & Copy		Services Management - Sta	41500	04022	260	62				1018.50
				Disbursement#	8566	Disbursement	Total					1,018.50
4602 V	5240	Norse Ventures DBA Thrive		Voc/Day - Individual Supp	41500	04250	368	62				390.33
4602 V	5240	Norse Ventures DBA Thrive		Voc/Day - Individual Supp	41500	04350	368	62				1998.53
				Disbursement#	8567	Disbursement	Total					2,388.86

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Claim #	Vendor#	Payee Name	Invoice#	Description	Fund	Funct	Obj	Dpt	Prj	Sub	Line	Amount
4603 V	5283	North Iowa Vocational Center		Basic Needs - Other	41500	04033	399	62				1076.70
4603 V	5283	North Iowa Vocational Center		Comm Based Settings (6+ B	41500	04064	329	62				1076.70
4603 V	5283	North Iowa Vocational Center		Support Services - Suppor	41500	04032	329	62				338.34
4603 V	5283	North Iowa Vocational Center		Voc/Day - Individual Supp	41500	04050	368	62				58.44
4603 V	5283	North Iowa Vocational Center		Voc/Day - Group Supported	41500	04050	369	62				1440.65
4603 V	5283	North Iowa Vocational Center		Comm Based Settings (6+ B	41500	04064	329	62				24487.17
4603 V	5283	North Iowa Vocational Center		Support Services - Suppor	41500	04232	329	62				5691.50
4603 V	5283	North Iowa Vocational Center		Support Services - Suppor	41500	04232	329	62				7049.06
4603 V	5283	North Iowa Vocational Center		Day Habilitation	41500	04250	367	62				380.89
4603 V	5283	North Iowa Vocational Center		Voc/Day - Individual Supp	41500	04250	368	62				390.33
4603 V	5283	North Iowa Vocational Center		Voc/Day - Group Supported	41500	04250	369	62				324.36
4603 V	5283	North Iowa Vocational Center		Support Services - Suppor	41500	04332	329	62				33.84
4603 V	5283	North Iowa Vocational Center		Voc/Day - Prevocational S	41500	04350	362	62				421.20
4603 V	5283	North Iowa Vocational Center		Day Habilitation	41500	04350	367	62				336.81
4603 V	5283	North Iowa Vocational Center		Voc/Day - Individual Supp	41500	04350	368	62				1146.35
4603 V	5283	North Iowa Vocational Center		Voc/Day - Group Supported	41500	04350	369	62				697.68
4603 V	5283	North Iowa Vocational Center		Crisis Services - System	41500	04044	379	62				1945.25
4603 V	5283	North Iowa Vocational Center		Psychotherapeutic Treatme	41500	04042	329	62				5822.67
				Disbursement#	8568	Disbursement		Total				52,717.94
4604 V	5448	One Vision-Opportunity Village		Support Services - Suppor	41500	04332	329	62				140.28
				Disbursement#	8569	Disbursement		Total				140.28
4605 V	5476	Otto Law Office, PLLC		Commitment - Legal Repres	41500	04074	393	62				504.90
4605 V	5476	Otto Law Office, PLLC		Commitment - Legal Repres	41500	04074	393	62				165.00
4605 V	5476	Otto Law Office, PLLC		Commitment - Legal Repres	41500	04074	393	62				39.60
				Disbursement#	8570	Disbursement		Total				709.50
4606 V	5674	Pillar of Cedar Valley		Comm Based Settings (6+ B	41500	04064	317	62				8348.10
				Disbursement#	8571	Disbursement		Total				8,348.10
4608 V	5788	Pottawattamie Co Sheriff's Off		Commitment - Sheriff Tran	41500	04074	353	62				35.00
				Disbursement#	8572	Disbursement		Total				35.00
4609 V	5815	Poweshiek Co Sheriff's Dept		Commitment - Sheriff Tran	41500	04074	353	62				59.82
				Disbursement#	8573	Disbursement		Total				59.82
4638 V	5815	Poweshiek Co Sheriff's Dept		Prescription Medication (	41500	04046	306	62				206.50
				Disbursement#	8574	Disbursement		Total				206.50
4610 V	5816	Poweshiek County Auditor		Services Management - Ren	41500	04022	450	62				254.58
4610 V	5816	Poweshiek County Auditor		Crisis Care Coordination	41500	04023	450	62				36.36
4610 V	5816	Poweshiek County Auditor		Justice System Involved C	41500	04025	450	62				90.90
4610 V	5816	Poweshiek County Auditor		Direct Admin - Building (	41500	04411	450	62				218.16
				Disbursement#	8575	Disbursement		Total				600.00
4634 V	82831	Prairie Ridge Integrated		Psychotherapeutic Treatme	41500	04042	366	62				6831.00
				Disbursement#	8576	Disbursement		Total				6,831.00
4547 V	281	Premier		Services Management - Sta	41500	04022	260	62				358.03

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4547 V	281	Premier		Direct Admin - Office Equ	41500	04411	636	62				358.04
4548 V	281	Premier		Services Management - Sta	41500	04022	260	62				5.24
4548 V	281	Premier		Crisis Care Coordination	41500	04023	260	62				.76
4548 V	281	Premier		Justice System Involved C	41500	04025	260	62				1.87
4548 V	281	Premier		Direct Admin - Stationary	41500	04411	260	62				4.45
				Disbursement# 8577							Disbursement Total	728.39
4611 V	5825	Premier Payee, Inc		Support Services - Repres	41500	04032	327	62				52.00
				Disbursement# 8578							Disbursement Total	52.00
4635 V	83117	The Pride Group		Comm Based Settings (6+ B	41500	04064	314	62				1510.31
4635 V	83117	The Pride Group		Comm Based Settings (6+ B	41500	04064	314	62				21561.24
				Disbursement# 8579							Disbursement Total	23,071.55
4612 V	5840	Progress Industries		Day Habilitation	41500	04250	367	62				603.75-
4612 V	5840	Progress Industries		Day Habilitation	41500	04250	367	62				680.56
4612 V	5840	Progress Industries		Voc/Day - Individual Supp	41500	04250	368	62				390.33-
4612 V	5840	Progress Industries		Voc/Day - Individual Supp	41500	04250	368	62				1169.90
4612 V	5840	Progress Industries		Support Services - Suppor	41500	04332	329	62				671.40
4612 V	5840	Progress Industries		Voc/Day - Individual Supp	41500	04350	368	62				747.28
4612 V	5840	Progress Industries		Support Services - Suppor	41500	04732	329	62				716.16
4612 V	5840	Progress Industries		Day Habilitation	41500	04750	367	62				2611.54
				Disbursement# 8580							Disbursement Total	5,602.76
4632 V	72591	Rural Policy Partners, LLC		Access Center start-up/su	41500	04044	396	62				4250.00
				Disbursement# 8581							Disbursement Total	4,250.00
4549 V	322	Salvation Army		Support Services - Repres	41500	04032	327	62				624.00
				Disbursement# 8582							Disbursement Total	624.00
4614 V	6470	Kim Schomaker		Justice System Involved C	41500	04025	413	62				131.66
				Disbursement# 8583							Disbursement Total	131.66
4615 V	6579	Jen Sheehan		Direct Admin - Mileage &	41500	04411	413	62				607.84
				Disbursement# 8584							Disbursement Total	607.84
4617 V	6804	SolutionPoint+, LLC		Crisis Prevention Trainin	41500	04046	422	62				15000.00
4617 V	6804	SolutionPoint+, LLC		Crisis Prevention Trainin	41500	04046	422	62				15000.00
				Disbursement# 8585							Disbursement Total	30,000.00
4567 E	1414	Nicole D Sprecher		Services Management - Mil	41500	04022	413	62				3.93
4567 E	1414	Nicole D Sprecher		Services Management - Mil	41500	04322	413	62				3.28
				Disbursement# 8586							Disbursement Total	7.21
4569 V	1425	Shannon Sproule		Services Management - Mil	41500	04022	413	62				48.94
4569 V	1425	Shannon Sproule		Services Management - Mil	41500	04222	413	62				57.41
4569 V	1425	Shannon Sproule		Services Management - Mil	41500	04322	413	62				23.34
				Disbursement# 8587							Disbursement Total	129.69
4618 V	7025	Story County Auditor		Services Management - Ren	41500	04022	450	62				207.91

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4553 V	700	UnityPoint Health		Assertive Community Treat	41500	04042	398	62				111.66
4553 V	700	UnityPoint Health		Assertive Community Treat	41500	04042	398	62				111.66
4553 V	700	UnityPoint Health		Assertive Community Treat	41500	04042	398	62				111.66
				Disbursement#	8595	Disbursement	Total					2,486.36
4555 V	745	Visual Edge IT, Inc		Services Management - Off	41500	04022	444	62				13.85
4555 V	745	Visual Edge IT, Inc		Crisis Care Coordination	41500	04023	444	62				2.32
4555 V	745	Visual Edge IT, Inc		Justice System Involved C	41500	04025	444	62				4.94
4555 V	745	Visual Edge IT, Inc		Direct Admin - Office Equ	41500	04411	444	62				11.87
				Disbursement#	8596	Disbursement	Total					32.98
4625 V	7703	Warren County Justice Center		Services Management - Ren	41500	04022	450	62				526.55
4625 V	7703	Warren County Justice Center		Crisis Care Coordination	41500	04023	450	62				75.21
4625 V	7703	Warren County Justice Center		Justice System Involved C	41500	04025	450	62				188.00
4625 V	7703	Warren County Justice Center		Direct Admin - Building (	41500	04411	450	62				451.23
				Disbursement#	8597	Disbursement	Total					1,240.99
4552 E	573	Karla K Webb		Direct Admin - Mileage &	41500	04411	413	62				119.21
4552 E	573	Karla K Webb		Direct Admin - Telecommun	41500	04411	414	62				50.00
				Disbursement#	8598	Disbursement	Total					169.21
4626 V	7772	Wild, Baxter, and Sand PC		Commitment - Legal Repres	41500	04074	393	62				269.10
				Disbursement#	8599	Disbursement	Total					269.10
4627 V	7806	Russell Wood		Direct Admin - Mileage &	41500	04411	413	62				827.92
4627 V	7806	Russell Wood		Direct Admin - Educationa	41500	04411	422	62				3560.16
				Disbursement#	8600	Disbursement	Total					4,388.08
4628 V	7840	Wright County Auditor		Services Management - Ren	41500	04022	450	62				254.58
4628 V	7840	Wright County Auditor		Crisis Care Coordination	41500	04023	450	62				36.36
4628 V	7840	Wright County Auditor		Justice System Involved C	41500	04025	450	62				90.90
4628 V	7840	Wright County Auditor		Direct Admin - Building (	41500	04411	450	62				218.16
				Disbursement#	8601	Disbursement	Total					600.00
					91	Total Disbursements						594,920.51
					0	Total ACH						.00
					0	Total EFT						.00
					91	Grand Total						594,920.51
						Credits/Refunds Included						1,104.00

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Totals by Fund

41500	Central Iowa Community Service	594,920.51
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Final Total	594,920.51
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4775 V	60	Linn Adams		Services Management - Mil	41500	04022	413	62				84.62
4775 V	60	Linn Adams		Services Management - Tel	41500	04022	414	62				50.00
4775 V	60	Linn Adams		Services Management - Mil	41500	04222	413	62				82.14
4775 V	60	Linn Adams		Services Management - Mil	41500	04322	413	62				82.14
				Disbursement#	8603						Disbursement Total	298.90
4783 E	1141	Bryan J Barker		Commitment - Legal Repres	41500	04074	393	62				627.80
4783 E	1141	Bryan J Barker		Commitment - Legal Repres	41500	04074	393	62				277.40
				Disbursement#	8604						Disbursement Total	905.20
4778 V	634	Baudville		Services Management - Sta	41500	04022	260	62				50.48
				Disbursement#	8605						Disbursement Total	50.48
4782 V	884	Boone County Jail		Prescription Medication (	41500	04046	306	62				30.06
4782 V	884	Boone County Jail		Prescription Medication (	41500	04046	306	62				268.26
				Disbursement#	8606						Disbursement Total	238.20
4784 V	1230	Capstone Behavioral Healthcare		Basic Needs - Rent Paymen	41500	04033	340	62				350.00
				Disbursement#	8607						Disbursement Total	350.00
4786 V	1327	Center Associates		Psychotherapeutic Treatme	41500	04042	305	62				155.61
4786 V	1327	Center Associates		Psychotherapeutic Treatme	41500	04042	306	62				61.58
4786 V	1327	Center Associates		Psychotherapeutic Treatme	41500	04042	306	62				185.67
4786 V	1327	Center Associates		Psychotherapeutic Treatme	41500	04042	306	62				72.45
4786 V	1327	Center Associates		Psychotherapeutic Treatme	41500	04042	306	62				72.45
4786 V	1327	Center Associates		Mental Health Services in	41500	04046	305	62				72.45
4786 V	1327	Center Associates		Mental Health Services in	41500	04046	305	62				304.54
4786 V	1327	Center Associates		Mental Health Services in	41500	04046	305	62				232.09
4786 V	1327	Center Associates		Mental Health Services in	41500	04046	305	62				144.90
4786 V	1327	Center Associates		Mental Health Services in	41500	04046	305	62				144.90
4786 V	1327	Center Associates		Mental Health Services in	41500	04046	305	62				232.09
4786 V	1327	Center Associates		Mental Health Services in	41500	04046	305	62				232.09
4786 V	1327	Center Associates		Mental Health Services in	41500	04046	305	62				144.90
4786 V	1327	Center Associates		Physiological Treatment -	41500	04041	305	62				26.38
4786 V	1327	Center Associates		Psychotherapeutic Treatme	41500	04042	306	62				72.45
4786 V	1327	Center Associates		Mental Health Services in	41500	04046	305	62				144.90
				Disbursement#	8608						Disbursement Total	2,299.45
4817 V	6534	Central Iowa Broadband		Services Management - Tel	41500	04022	414	62				63.50
4817 V	6534	Central Iowa Broadband		Direct Admin - Telecommun	41500	04411	414	62				36.50
				Disbursement#	8609						Disbursement Total	100.00
4787 V	1349	Central Iowa Detention		Transportation - General	41500	04031	354	62				814.73
				Disbursement#	8610						Disbursement Total	814.73
4788 V	1362	Central Iowa Psychological		Mental Health Services in	41500	04046	305	62				114.17
4788 V	1362	Central Iowa Psychological		Mental Health Services in	41500	04046	305	62				114.17
4788 V	1362	Central Iowa Psychological		Mental Health Services in	41500	04046	305	62				311.22
4788 V	1362	Central Iowa Psychological		Mental Health Services in	41500	04046	305	62				114.17
				Disbursement#	8611						Disbursement Total	653.73

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Claim #	Vendor#	Payee Name	Invoice#	Description	Fund	Funct	Obj	Dpt	Prj	Sub	Line	Amount
4821	V 8195	Cerro Gordo County Auditor		Mental Health Advocate -	41500	04075	395	62				2760.39
				Disbursement# 8612		Disbursement		Total				2,760.39
4823	V 82883	Christian Opportunity Center		Day Habilitation	41500	04250	367	62				495.49
4823	V 82883	Christian Opportunity Center		Voc/Day - Individual Supp	41500	04250	368	62				234.20
4823	V 82883	Christian Opportunity Center		Voc/Day - Individual Supp	41500	04250	368	62				234.20
4823	V 82883	Christian Opportunity Center		Voc/Day - Individual Supp	41500	04250	368	62				234.20
4823	V 82883	Christian Opportunity Center		Voc/Day - Individual Supp	41500	04250	368	62				234.20
4823	V 82883	Christian Opportunity Center		Day Habilitation	41500	04350	367	62				805.20
4823	V 82883	Christian Opportunity Center		Day Habilitation	41500	04350	367	62				805.20
4823	V 82883	Christian Opportunity Center		Day Habilitation	41500	04350	367	62				67.81
4823	V 82883	Christian Opportunity Center		Day Habilitation	41500	04350	367	62				1183.60
4823	V 82883	Christian Opportunity Center		Voc/Day - Individual Supp	41500	04350	368	62				390.33
4823	V 82883	Christian Opportunity Center		Voc/Day - Individual Supp	41500	04350	368	62				390.33
4823	V 82883	Christian Opportunity Center		Voc/Day - Individual Supp	41500	04350	368	62				390.33
4823	V 82883	Christian Opportunity Center		Voc/Day - Individual Supp	41500	04350	368	62				390.33
				Disbursement# 8613		Disbursement		Total				5,855.42
4790	V 1773	Culligan		Services Management - Wat	41500	04022	432	62				19.31
4790	V 1773	Culligan		Crisis Care Coordination	41500	04023	432	62				2.54
4790	V 1773	Culligan		Justice System Involved C	41500	04025	432	62				6.74
4790	V 1773	Culligan		Direct Admin - Water & Se	41500	04411	432	62				16.51
				Disbursement# 8614		Disbursement		Total				45.10
4801	V 3236	Chloe Davis		Justice System Involved C	41500	04025	413	62				206.98
				Disbursement# 8615		Disbursement		Total				206.98
4791	V 2219	eVizzit of Ia Psychiatry, JAIL		Crisis Evaluation	41500	04044	301	62				290.00
4791	V 2219	eVizzit of Ia Psychiatry, JAIL		Crisis Evaluation	41500	04044	301	62				290.00
4791	V 2219	eVizzit of Ia Psychiatry, JAIL		Crisis Evaluation	41500	04044	301	62				580.00
4791	V 2219	eVizzit of Ia Psychiatry, JAIL		Crisis Evaluation	41500	04044	301	62				3480.00
4791	V 2219	eVizzit of Ia Psychiatry, JAIL		Crisis Evaluation	41500	04044	301	62				3190.00
4791	V 2219	eVizzit of Ia Psychiatry, JAIL		Crisis Evaluation	41500	04044	301	62				3190.00
4791	V 2219	eVizzit of Ia Psychiatry, JAIL		Crisis Evaluation	41500	04044	301	62				1740.00
4791	V 2219	eVizzit of Ia Psychiatry, JAIL		Crisis Evaluation	41500	04044	301	62				1450.00
4791	V 2219	eVizzit of Ia Psychiatry, JAIL		Crisis Evaluation	41500	04044	301	62				4060.00
4791	V 2219	eVizzit of Ia Psychiatry, JAIL		Crisis Evaluation	41500	04044	301	62				2900.00
4791	V 2219	eVizzit of Ia Psychiatry, JAIL		Crisis Evaluation	41500	04044	301	62				3190.00
4791	V 2219	eVizzit of Ia Psychiatry, JAIL		Crisis Evaluation	41500	04044	301	62				2900.00
4791	V 2219	eVizzit of Ia Psychiatry, JAIL		Crisis Evaluation	41500	04044	301	62				2900.00
4791	V 2219	eVizzit of Ia Psychiatry, JAIL		Crisis Evaluation	41500	04044	301	62				1740.00
4791	V 2219	eVizzit of Ia Psychiatry, JAIL		Crisis Evaluation	41500	04044	301	62				2610.00
4791	V 2219	eVizzit of Ia Psychiatry, JAIL		Crisis Evaluation	41500	04044	301	62				3480.00
4791	V 2219	eVizzit of Ia Psychiatry, JAIL		Crisis Evaluation	41500	04044	301	62				3480.00
4791	V 2219	eVizzit of Ia Psychiatry, JAIL		Crisis Evaluation	41500	04044	301	62				3480.00
4791	V 2219	eVizzit of Ia Psychiatry, JAIL		Crisis Evaluation	41500	04044	301	62				2900.00
4791	V 2219	eVizzit of Ia Psychiatry, JAIL		Crisis Evaluation	41500	04044	301	62				1740.00
4791	V 2219	eVizzit of Ia Psychiatry, JAIL		Crisis Evaluation	41500	04044	301	62				2030.00
4791	V 2219	eVizzit of Ia Psychiatry, JAIL		Crisis Evaluation	41500	04044	301	62				3190.00
4791	V 2219	eVizzit of Ia Psychiatry, JAIL		Crisis Evaluation	41500	04044	301	62				2610.00

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4792 V	2326	FIA Friendship Club, Inc.		Psychotherapeutic Treatme	41500	04042	366	62				7103.00
4792 V	2326	FIA Friendship Club, Inc.		Psychotherapeutic Treatme	41500	04042	366	62				6776.16
4792 V	2326	FIA Friendship Club, Inc.		Psychotherapeutic Treatme	41500	04242	366	62				326.84
				Disbursement#	8618						Disbursement Total	14,206.00
4793 V	2436	Friendship Ark Inc.		Support Services - Suppor	41500	04332	329	62				5747.04
4793 V	2436	Friendship Ark Inc.		Day Habilitation	41500	04350	367	62				40.85
4793 V	2436	Friendship Ark Inc.		Day Habilitation	41500	04350	367	62				187.22
				Disbursement#	8619						Disbursement Total	5,975.11
4794 V	2654	Kent L. Geffe		Commitment - Legal Repres	41500	04074	393	62				65.00
4794 V	2654	Kent L. Geffe		Commitment - Legal Repres	41500	04074	393	62				169.00
4794 V	2654	Kent L. Geffe		Commitment - Legal Repres	41500	04074	393	62				162.50
4794 V	2654	Kent L. Geffe		Commitment - Legal Repres	41500	04074	393	62				123.50
4794 V	2654	Kent L. Geffe		Commitment - Legal Repres	41500	04274	393	62				143.00
				Disbursement#	8620						Disbursement Total	663.00
4795 V	2782	Jodi Hamilton		Services Management - Mil	41500	04022	413	62				72.15
4795 V	2782	Jodi Hamilton		Services Management - Mil	41500	04222	413	62				70.04
4795 V	2782	Jodi Hamilton		Services Management - Mil	41500	04322	413	62				70.03
				Disbursement#	8621						Disbursement Total	212.22
4802 V	3356	Heartland Business Systems LLC		Purchased Admin - Data Pr	41500	04412	421	62				1224.00
				Disbursement#	8622						Disbursement Total	1,224.00
4797 V	3019	Hillcrest Family Services		Comm Based Settings (6+ B	41500	04064	314	62				3141.90
				Disbursement#	8623						Disbursement Total	3,141.90
4799 V	3152	Humboldt County Sheriff		Commitment - Sheriff Tran	41500	04074	353	62				62.00
				Disbursement#	8624						Disbursement Total	62.00
4800 V	3235	IMU		Services Management - Tel	41500	04022	414	62				119.41
4800 V	3235	IMU		Crisis Care Coordination	41500	04023	414	62				17.05
4800 V	3235	IMU		Justice System Involved C	41500	04025	414	62				42.64
4800 V	3235	IMU		Direct Admin - Telecommun	41500	04411	414	62				102.32
				Disbursement#	8625						Disbursement Total	281.42
4803 V	3532	Integrated Telehealth Partners		Mental Health Services in	41500	04046	305	62				223.08
4803 V	3532	Integrated Telehealth Partners		Mental Health Services in	41500	04046	305	62				265.62
4803 V	3532	Integrated Telehealth Partners		Mental Health Services in	41500	04046	305	62				223.08
4803 V	3532	Integrated Telehealth Partners		Mental Health Services in	41500	04046	305	62				846.32
4803 V	3532	Integrated Telehealth Partners		Mental Health Services in	41500	04046	305	62				446.16
4803 V	3532	Integrated Telehealth Partners		Mental Health Services in	41500	04046	305	62				88.54
4803 V	3532	Integrated Telehealth Partners		Mental Health Services in	41500	04046	305	62				311.62
4803 V	3532	Integrated Telehealth Partners		Mental Health Services in	41500	04046	305	62				702.15
4803 V	3532	Integrated Telehealth Partners		Mental Health Services in	41500	04046	305	62				1528.47
4803 V	3532	Integrated Telehealth Partners		Mental Health Services in	41500	04046	305	62				537.33
4803 V	3532	Integrated Telehealth Partners		Mental Health Services in	41500	04046	305	62				288.99
4803 V	3532	Integrated Telehealth Partners		Mental Health Services in	41500	04046	305	62				248.34
4803 V	3532	Integrated Telehealth Partners		Mental Health Services in	41500	04046	305	62				577.98

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4803	V 3532	Integrated Telehealth Partners		Mental Health Services in	41500	04046	305	62				124.17	
4803	V 3532	Integrated Telehealth Partners		Mental Health Services in	41500	04046	305	62				288.99	
4803	V 3532	Integrated Telehealth Partners		Mental Health Services in	41500	04046	305	62				577.98	
4803	V 3532	Integrated Telehealth Partners		Mental Health Services in	41500	04046	305	62				124.17	
4803	V 3532	Integrated Telehealth Partners		Mental Health Services in	41500	04046	305	62				537.33	
4803	V 3532	Integrated Telehealth Partners		Mental Health Services in	41500	04046	305	62				413.16	
4803	V 3532	Integrated Telehealth Partners		Mental Health Services in	41500	04046	305	62				248.34	
4803	V 3532	Integrated Telehealth Partners		Access Center start-up/su	41500	04044	396	62				1000.00	
4803	V 3532	Integrated Telehealth Partners		Access Center start-up/su	41500	04044	396	62				1000.00	
4803	V 3532	Integrated Telehealth Partners		Access Center start-up/su	41500	04044	396	62				1000.00	
4803	V 3532	Integrated Telehealth Partners		Access Center start-up/su	41500	04044	396	62				1000.00	
4803	V 3532	Integrated Telehealth Partners		Access Center start-up/su	41500	04044	396	62				1000.00	
4803	V 3532	Integrated Telehealth Partners		Access Center start-up/su	41500	04044	396	62				1000.00	
											Disbursement# 8626	Disbursement Total	14,601.82
4785	V 1279	LifeWorks Community Services		Basic Needs - Rent Paymen	41500	04033	340	62				225.00	
4785	V 1279	LifeWorks Community Services		Day Habilitation	41500	04250	367	62				1288.31	
4785	V 1279	LifeWorks Community Services		Voc/Day - Individual Supp	41500	04250	368	62				779.57	
4785	V 1279	LifeWorks Community Services		Support Services - Suppor	41500	04332	329	62				166.33	
4785	V 1279	LifeWorks Community Services		Day Habilitation	41500	04350	367	62				265.00	
4785	V 1279	LifeWorks Community Services		Voc/Day - Individual Supp	41500	04350	368	62				390.33	
4785	V 1279	LifeWorks Community Services		Voc/Day - Group Supported	41500	04350	369	62				489.60	
4785	V 1279	LifeWorks Community Services		Day Habilitation	41500	04750	367	62				254.40	
											Disbursement# 8627	Disbursement Total	3,858.54
4805	V 4443	Marshall County		Commitment - Sheriff Tran	41500	04074	353	62				92.00	
4805	V 4443	Marshall County		Commitment - Sheriff Tran	41500	04074	353	62				31.00	
4805	V 4443	Marshall County		Commitment - Sheriff Tran	41500	04074	353	62				31.00	
4805	V 4443	Marshall County		Commitment - Sheriff Tran	41500	04074	353	62				31.00	
4805	V 4443	Marshall County		Commitment - Sheriff Tran	41500	04074	353	62				46.00	
4805	V 4443	Marshall County		Commitment - Sheriff Tran	41500	04074	353	62				118.00	
4805	V 4443	Marshall County		Commitment - Sheriff Tran	41500	04274	353	62				86.00	
4805	V 4443	Marshall County		Commitment - Sheriff Tran	41500	04274	353	62				31.00	
4805	V 4443	Marshall County		Commitment - Sheriff Tran	41500	04074	353	62				31.00	
											Disbursement# 8628	Disbursement Total	497.00
4806	V 4450	Marshalltown Water Works		Services Management - Wat	41500	04022	432	62				53.74	
4806	V 4450	Marshalltown Water Works		Crisis Care Coordination	41500	04023	432	62				7.68	
4806	V 4450	Marshalltown Water Works		Justice System Involved C	41500	04025	432	62				19.19	
4806	V 4450	Marshalltown Water Works		Direct Admin - Water & Se	41500	04411	432	62				46.05	
											Disbursement# 8629	Disbursement Total	126.66
4807	V 4500	Mary Greeley Medical Center		Sub Acute Services (6+ Be	41500	04064	309	62				2800.00	
4807	V 4500	Mary Greeley Medical Center		Sub Acute Services (6+ Be	41500	04064	309	62				3600.00	
4807	V 4500	Mary Greeley Medical Center		Sub Acute Services (6+ Be	41500	04064	309	62				800.00	
4807	V 4500	Mary Greeley Medical Center		Sub Acute Services (6+ Be	41500	04064	309	62				1600.00	
4807	V 4500	Mary Greeley Medical Center		Sub Acute Services (6+ Be	41500	04064	309	62				1200.00	
4807	V 4500	Mary Greeley Medical Center		Sub Acute Services (6+ Be	41500	04064	309	62				4000.00	
4807	V 4500	Mary Greeley Medical Center		Sub Acute Services (6+ Be	41500	04064	309	62				2800.00	
4807	V 4500	Mary Greeley Medical Center		Sub Acute Services (6+ Be	41500	04064	309	62				350.00	

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4807 V	4500	Mary Greeley Medical Center		Sub Acute Services (6+ Be	41500	04064	309	62				3500.00	
4807 V	4500	Mary Greeley Medical Center		Sub Acute Services (6+ Be	41500	04064	309	62				3200.00	
4807 V	4500	Mary Greeley Medical Center		Sub Acute Services (6+ Be	41500	04064	309	62				3500.00	
4807 V	4500	Mary Greeley Medical Center		Sub Acute Services (6+ Be	41500	04064	309	62				1400.00	
				Disbursement#	8630							Disbursement Total	28,750.00
4808 V	4508	Mason City Clinic		Commitment - Diagnostic E	41500	04074	300	62				60.00	
4808 V	4508	Mason City Clinic		Commitment - Diagnostic E	41500	04074	300	62				60.00	
4808 V	4508	Mason City Clinic		Commitment - Diagnostic E	41500	04074	300	62				180.00	
4808 V	4508	Mason City Clinic		Commitment - Diagnostic E	41500	04074	300	62				60.00	
4808 V	4508	Mason City Clinic		Commitment - Diagnostic E	41500	04074	300	62				180.00	
4808 V	4508	Mason City Clinic		Commitment - Diagnostic E	41500	04074	300	62				120.00	
				Disbursement#	8631							Disbursement Total	660.00
4810 V	4901	Medicap Pharmacy 8095		Prescription Medication (	41500	04046	306	62				4450.78
				Disbursement#	8632							Disbursement Total	4,450.78
4809 V	4805	Midwest Counseling		Psychotherapeutic Treatme	41500	04042	305	62				63.75	
4809 V	4805	Midwest Counseling		Psychotherapeutic Treatme	41500	04042	305	62				63.75	
4809 V	4805	Midwest Counseling		Psychotherapeutic Treatme	41500	04042	305	62				63.75	
4809 V	4805	Midwest Counseling		Psychotherapeutic Treatme	41500	04042	305	62				43.53	
				Disbursement#	8633							Disbursement Total	234.78
4811 V	4919	MIW Inc.		Voc/Day - Individual Supp	41500	04350	368	62				73.05	
				Disbursement#	8634							Disbursement Total	73.05
4812 V	5283	North Iowa Vocational Center		Crisis Services - System	41500	04044	379	62				19110.85	
				Disbursement#	8635							Disbursement Total	19,110.85
4796 V	2872	Optimae LifeServices, Inc.		Support Services - Suppor	41500	04032	329	62				16150.89	
4796 V	2872	Optimae LifeServices, Inc.		Comm Based Settings (6+ B	41500	04064	314	62				12157.50	
4796 V	2872	Optimae LifeServices, Inc.		Comm Based Settings (6+ B	41500	04064	329	62				21638.89	
4796 V	2872	Optimae LifeServices, Inc.		Support Services - Suppor	41500	04232	329	62				204.32	
4796 V	2872	Optimae LifeServices, Inc.		Support Services - Suppor	41500	04332	329	62				1723.95	
4796 V	2872	Optimae LifeServices, Inc.		Day Habilitation	41500	04350	367	62				231.19	
4796 V	2872	Optimae LifeServices, Inc.		Voc/Day - Individual Supp	41500	04350	368	62				97.50	
4796 V	2872	Optimae LifeServices, Inc.		Basic Needs - Rent Paymen	41500	04033	340	62				1460.10	
4796 V	2872	Optimae LifeServices, Inc.		Basic Needs - Rent Paymen	41500	04033	340	62				470.00	
4796 V	2872	Optimae LifeServices, Inc.		Basic Needs - Rent Paymen	41500	04033	340	62				470.00	
4796 V	2872	Optimae LifeServices, Inc.		Basic Needs - Rent Paymen	41500	04033	340	62				736.88	
4796 V	2872	Optimae LifeServices, Inc.		Basic Needs - Ongoing Ren	41500	04033	345	62				995.00	
4796 V	2872	Optimae LifeServices, Inc.		Basic Needs - Ongoing Ren	41500	04033	345	62				470.00	
4796 V	2872	Optimae LifeServices, Inc.		Basic Needs - Rent Paymen	41500	04033	340	62				2330.00	
				Disbursement#	8636							Disbursement Total	59,136.22
4813 V	5580	Peace Tree Community Living LL		Basic Needs - Ongoing Ren	41500	04033	345	62				580.64	
4813 V	5580	Peace Tree Community Living LL		Basic Needs - Ongoing Ren	41500	04033	345	62				250.00	
				Disbursement#	8637							Disbursement Total	830.64
4815 V	5815	Poweshiek Co Sheriff's Dept		Prescription Medication (41500	04046	306	62				13.08	

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4798 V	3084	Dylan Thomas		Commitment - Legal Repres	41500	04074	393	62				468.00
4798 V	3084	Dylan Thomas		Commitment - Legal Repres	41500	04074	393	62				416.00
4798 V	3084	Dylan Thomas		Commitment - Legal Repres	41500	04074	393	62				344.50
				Disbursement#	8643						Disbursement Total	1,228.50
4818 V	7421	Trilix Marketing Group		Public Education Services	41500	04005	373	62				400.00
				Disbursement#	8644						Disbursement Total	400.00
4804 V	4376	U.S. Bank Equipment Finance		Services Management - Off	41500	04022	636	62				80.25
4804 V	4376	U.S. Bank Equipment Finance		Crisis Care Coordination	41500	04023	636	62				13.39
4804 V	4376	U.S. Bank Equipment Finance		Justice System Involved C	41500	04025	636	62				28.66
4804 V	4376	U.S. Bank Equipment Finance		Direct Admin - Office Equ	41500	04411	636	62				68.79
				Disbursement#	8645						Disbursement Total	191.09
4779 V	700	UnityPoint Health		Psychotherapeutic Treatme	41500	04042	396	62				416.02
				Disbursement#	8646						Disbursement Total	416.02
4776 V	77	Verizon Wireless		Services Management - Tel	41500	04022	414	62				33.60
4776 V	77	Verizon Wireless		Crisis Care Coordination	41500	04023	414	62				5.62
4776 V	77	Verizon Wireless		Justice System Involved C	41500	04025	414	62				12.00
4776 V	77	Verizon Wireless		Direct Admin - Telecommun	41500	04411	414	62				28.80
				Disbursement#	8647						Disbursement Total	80.02
4780 V	745	Visual Edge IT, Inc		Services Management - Off	41500	04022	444	62				37.35
4780 V	745	Visual Edge IT, Inc		Crisis Care Coordination	41500	04023	444	62				4.26
4780 V	745	Visual Edge IT, Inc		Justice System Involved C	41500	04025	444	62				12.73
4780 V	745	Visual Edge IT, Inc		Direct Admin - Office Equ	41500	04411	444	62				30.56
				Disbursement#	8648						Disbursement Total	84.90
4819 V	7680	Warren County Sheriff		Prescription Medication (	41500	04046	306	62				230.06
				Disbursement#	8649						Disbursement Total	230.06
4777 V	350	Woolstock Mutal Telephone Assn		Services Management - Tel	41500	04022	414	62				23.10
4777 V	350	Woolstock Mutal Telephone Assn		Crisis Care Coordination	41500	04023	414	62				3.85
4777 V	350	Woolstock Mutal Telephone Assn		Justice System Involved C	41500	04025	414	62				8.25
4777 V	350	Woolstock Mutal Telephone Assn		Direct Admin - Telecommun	41500	04411	414	62				19.80
				Disbursement#	8650						Disbursement Total	55.00
4820 V	7870	Youth & Shelter Services, Inc		Crisis Services - System	41500	04044	379	62				20891.02
4820 V	7870	Youth & Shelter Services, Inc		Crisis Services - System	41500	04044	379	62				22331.78
4820 V	7870	Youth & Shelter Services, Inc		Crisis Services - System	41500	04044	379	62				20530.83
4820 V	7870	Youth & Shelter Services, Inc		Public Education Services	41500	04005	373	62				12120.00
4820 V	7870	Youth & Shelter Services, Inc		Public Education Services	41500	04005	373	62				4000.00
				Disbursement#	8651						Disbursement Total	79,873.63
					49	Total Disbursements						425,140.60
					0	Total ACH						.00
					0	Total EFT						.00
					49	Grand Total						425,140.60
						Credits/Refunds Included						30.06

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Totals by Fund

41500	Central Iowa Community Service	425,140.60
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Final Total	425,140.60
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5072 V	291	Access Systems Leasing		Services Management - Off	41500	04022	453	62				171.71
5072 V	291	Access Systems Leasing		Crisis Care Coordination	41500	04023	453	62				30.07
5072 V	291	Access Systems Leasing		Justice System Involved C	41500	04025	453	62				61.32
5072 V	291	Access Systems Leasing		Direct Admin - Office Equ	41500	04411	453	62				145.74
				Disbursement# 8652								408.84
5075 V	445	Arc of Marshall County		Psychotherapeutic Treatme	41500	04242	366	62				658.60
5075 V	445	Arc of Marshall County		Psychotherapeutic Treatme	41500	04342	366	62				9.82
5075 V	445	Arc of Marshall County		Psychotherapeutic Treatme	41500	04742	366	62				9.82
				Disbursement# 8653								678.24
5076 V	508	ARC of Story County		Psychotherapeutic Treatme	41500	04042	366	62				4248.95
				Disbursement# 8654								4,248.95
5078 V	588	Brittany Baker		Justice System Involved C	41500	04025	413	62				320.95
				Disbursement# 8655								320.95
5082 E	1141	Bryan J Barker		Commitment - Legal Repres	41500	04074	393	62				321.20
				Disbursement# 8656								321.20
5080 V	876	Boone County Auditor		Services Management - Ren	41500	04022	450	62				358.00
5080 V	876	Boone County Auditor		Crisis Care Coordination	41500	04023	450	62				51.13
5080 V	876	Boone County Auditor		Justice System Involved C	41500	04025	450	62				127.83
5080 V	876	Boone County Auditor		Direct Admin - Building (	41500	04411	450	62				306.79
5080 V	876	Boone County Auditor		Purchased Admin - Account	41500	04412	420	62				1346.33
				Disbursement# 8657								2,190.08
5081 V	928	Brick and Tile LLC		Services Management - Ren	41500	04022	450	62				891.03
5081 V	928	Brick and Tile LLC		Crisis Care Coordination	41500	04023	450	62				127.26
5081 V	928	Brick and Tile LLC		Justice System Involved C	41500	04025	450	62				318.15
5081 V	928	Brick and Tile LLC		Direct Admin - Building (	41500	04411	450	62				763.56
				Disbursement# 8658								2,100.00
5138 V	6863	Care Connections of No. Iowa		Mental Health Advocate -	41500	04075	395	62				1692.90
5138 V	6863	Care Connections of No. Iowa		Mental Health Advocate -	41500	04075	395	62				1425.60
5138 V	6863	Care Connections of No. Iowa		Mental Health Advocate -	41500	04075	395	62				1424.76
				Disbursement# 8659								4,543.26
5097 V	2097	Cedar Valley Ranch, Inc.		Comm Based Settings (6+ B	41500	04064	314	62				5978.97
				Disbursement# 8660								5,978.97
5085 V	1349	Central Iowa Detention		Transportation - General	41500	04031	354	62				532.10
5085 V	1349	Central Iowa Detention		Transportation - General	41500	04031	354	62				1737.15
5085 V	1349	Central Iowa Detention		Transportation - General	41500	04031	354	62				672.95
5085 V	1349	Central Iowa Detention		Transportation - General	41500	04031	354	62				1565.00
5085 V	1349	Central Iowa Detention		Transportation - General	41500	04031	354	62				3114.35
5085 V	1349	Central Iowa Detention		Transportation - General	41500	04031	354	62				1518.05
5085 V	1349	Central Iowa Detention		Transportation - General	41500	04031	354	62				923.35
5085 V	1349	Central Iowa Detention		Transportation - General	41500	04031	354	62				3208.25
5085 V	1349	Central Iowa Detention		Transportation - General	41500	04031	354	62				892.05

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5085 V	1349	Central Iowa Detention		Transportation - General	41500	04031	354	62				1549.35
5085 V	1349	Central Iowa Detention		Transportation - General	41500	04031	354	62				563.40
5085 V	1349	Central Iowa Detention		Transportation - General	41500	04031	354	62				704.25
5085 V	1349	Central Iowa Detention		Transportation - General	41500	04031	354	62				876.40
5085 V	1349	Central Iowa Detention		Transportation - General	41500	04031	354	62				281.70
5085 V	1349	Central Iowa Detention		Transportation - General	41500	04031	354	62				1690.20
5085 V	1349	Central Iowa Detention		Transportation - General	41500	04031	354	62				1690.20
5085 V	1349	Central Iowa Detention		Transportation - General	41500	04031	354	62				1142.45
5085 V	1349	Central Iowa Detention		Transportation - General	41500	04031	354	62				1205.05
5085 V	1349	Central Iowa Detention		Transportation - General	41500	04031	354	62				1518.05
5085 V	1349	Central Iowa Detention		Transportation - General	41500	04031	354	62				532.10
5085 V	1349	Central Iowa Detention		Transportation - General	41500	04031	354	62				688.60
5085 V	1349	Central Iowa Detention		Transportation - General	41500	04031	354	62				2331.85
5085 V	1349	Central Iowa Detention		Transportation - General	41500	04031	354	62				1267.65
5085 V	1349	Central Iowa Detention		Transportation - General	41500	04031	354	62				860.75
5085 V	1349	Central Iowa Detention		Transportation - General	41500	04031	354	62				2159.70
5085 V	1349	Central Iowa Detention		Transportation - General	41500	04031	354	62				3036.10
5085 V	1349	Central Iowa Detention		Transportation - General	41500	04031	354	62				954.65
5085 V	1349	Central Iowa Detention		Transportation - General	41500	04031	354	62				313.00
5085 V	1349	Central Iowa Detention		Transportation - General	41500	04031	354	62				1189.40
5085 V	1349	Central Iowa Detention		Transportation - General	41500	04031	354	62				579.05
5085 V	1349	Central Iowa Detention		Commitment - Sheriff Tran	41500	04074	353	62				250.40
5085 V	1349	Central Iowa Detention		Commitment - Sheriff Tran	41500	04074	353	62				438.20
5085 V	1349	Central Iowa Detention		Commitment - Sheriff Tran	41500	04074	353	62				1580.65
5085 V	1349	Central Iowa Detention		Commitment - Sheriff Tran	41500	04074	353	62				547.75
5085 V	1349	Central Iowa Detention		Commitment - Sheriff Tran	41500	04074	353	62				438.20
5085 V	1349	Central Iowa Detention		Commitment - Sheriff Tran	41500	04074	353	62				297.35
				Disbursement#	8661	Disbursement	Total					42,849.70
5085 V	1349	Central Iowa Detention		Commitment - Sheriff Tran	41500	04074	353	62				297.35
5085 V	1349	Central Iowa Detention		Commitment - Sheriff Tran	41500	04074	353	62				1283.30
5085 V	1349	Central Iowa Detention		Commitment - Sheriff Tran	41500	04074	353	62				798.15
5085 V	1349	Central Iowa Detention		Commitment - Sheriff Tran	41500	04074	353	62				579.05
5085 V	1349	Central Iowa Detention		Commitment - Sheriff Tran	41500	04074	353	62				187.80
5085 V	1349	Central Iowa Detention		Commitment - Sheriff Tran	41500	04074	353	62				250.40
5085 V	1349	Central Iowa Detention		Commitment - Sheriff Tran	41500	04074	353	62				704.25
5085 V	1349	Central Iowa Detention		Commitment - Sheriff Tran	41500	04074	353	62				187.80
5085 V	1349	Central Iowa Detention		Commitment - Sheriff Tran	41500	04074	353	62				688.60
5085 V	1349	Central Iowa Detention		Commitment - Sheriff Tran	41500	04074	353	62				579.05
5085 V	1349	Central Iowa Detention		Commitment - Sheriff Tran	41500	04074	353	62				313.00
5085 V	1349	Central Iowa Detention		Commitment - Sheriff Tran	41500	04074	353	62				250.40
5085 V	1349	Central Iowa Detention		Commitment - Sheriff Tran	41500	04074	353	62				751.20
5085 V	1349	Central Iowa Detention		Commitment - Sheriff Tran	41500	04074	353	62				1298.95
5085 V	1349	Central Iowa Detention		Commitment - Sheriff Tran	41500	04074	353	62				281.70
5085 V	1349	Central Iowa Detention		Commitment - Sheriff Tran	41500	04074	353	62				766.85
5085 V	1349	Central Iowa Detention		Commitment - Sheriff Tran	41500	04074	353	62				297.35
5085 V	1349	Central Iowa Detention		Commitment - Sheriff Tran	41500	04074	353	62				1580.65
5085 V	1349	Central Iowa Detention		Commitment - Sheriff Tran	41500	04074	353	62				359.95
5085 V	1349	Central Iowa Detention		Commitment - Sheriff Tran	41500	04074	353	62				453.85
5085 V	1349	Central Iowa Detention		Commitment - Sheriff Tran	41500	04074	353	62				438.20

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5085 V	1349	Central Iowa Detention		Commitment - Sheriff Tran	41500	04074	353	62				719.90
5085 V	1349	Central Iowa Detention		Commitment - Sheriff Tran	41500	04074	353	62				1345.90
				Disbursement#	8662	Disbursement	Total					14,413.65
5086 V	1361	CIR, Inc.		Psychotherapeutic Treatme	41500	04042	397	62				683.55
5086 V	1361	CIR, Inc.		Psychotherapeutic Treatme	41500	04042	366	62				8403.48
5086 V	1361	CIR, Inc.		Psychotherapeutic Treatme	41500	04042	366	62				8403.48
5086 V	1361	CIR, Inc.		Psychotherapeutic Treatme	41500	04042	366	62				8355.46
5086 V	1361	CIR, Inc.		Psychotherapeutic Treatme	41500	04242	366	62				48.02
5086 V	1361	CIR, Inc.		Support Services - Suppor	41500	04032	329	62				112.78
5086 V	1361	CIR, Inc.		Day Habilitation	41500	04050	367	62				571.75
5086 V	1361	CIR, Inc.		Support Services - Suppor	41500	04332	329	62				287.68
5086 V	1361	CIR, Inc.		Day Habilitation	41500	04350	367	62				1069.92
				Disbursement#	8663	Disbursement	Total					27,936.12
5088 V	1372	Central Services 2-5-12		Services Management - Ren	41500	04022	450	62				318.23
5088 V	1372	Central Services 2-5-12		Crisis Care Coordination	41500	04023	450	62				45.45
5088 V	1372	Central Services 2-5-12		Justice System Involved C	41500	04025	450	62				113.62
5088 V	1372	Central Services 2-5-12		Direct Admin - Building (	41500	04411	450	62				272.70
				Disbursement#	8664	Disbursement	Total					750.00
5087 V	1370	Cerro Gordo Co. Sheriff		Prescription Medication (	41500	04046	306	62				17.85-
5087 V	1370	Cerro Gordo Co. Sheriff		Prescription Medication (	41500	04046	306	62				1513.46
				Disbursement#	8665	Disbursement	Total					1,495.61
5091 V	1473	ChildServe Community Options		Support Services - Respit	41500	04232	325	62				571.14
				Disbursement#	8666	Disbursement	Total					571.14
5104 V	2663	Choices Therapy Services LLC		Mental Health Services in	41500	04046	305	62				466.83
5104 V	2663	Choices Therapy Services LLC		Mental Health Services in	41500	04046	305	62				498.12
5104 V	2663	Choices Therapy Services LLC		Mental Health Services in	41500	04046	305	62				466.83
5104 V	2663	Choices Therapy Services LLC		Mental Health Services in	41500	04046	305	62				570.85
				Disbursement#	8667	Disbursement	Total					2,002.63
5092 V	1501	Clements Law & Mediation		Commitment - Legal Repres	41500	04074	393	62				321.20
				Disbursement#	8668	Disbursement	Total					321.20
5093 V	1603	Community & Family Resource		Mental Health Court relat	41500	04046	425	62				7669.39
				Disbursement#	8669	Disbursement	Total					7,669.39
5071 V	276	Community Health Center of		Mental Health Services in	41500	04046	305	62				20.00
5071 V	276	Community Health Center of		Mental Health Services in	41500	04046	305	62				40.00
5071 V	276	Community Health Center of		Mental Health Services in	41500	04046	305	62				80.00
5071 V	276	Community Health Center of		Mental Health Services in	41500	04046	305	62				20.00
5071 V	276	Community Health Center of		Mental Health Services in	41500	04046	305	62				20.00
5071 V	276	Community Health Center of		Mental Health Services in	41500	04046	305	62				20.00
				Disbursement#	8670	Disbursement	Total					200.00
5094 V	1751	Jessica Crawford		Services Management - Mil	41500	04022	413	62				179.73
5094 V	1751	Jessica Crawford		Services Management - Mil	41500	04222	413	62				174.43

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5094	V 1751	Jessica Crawford		Services Management - Mil	41500	04322	413	62				174.43
				Disbursement# 8671								528.59
5095	V 1762	Crossroads Mental Hlth Ctr		Mental Health Services in	41500	04046	305	62				114.17
5095	V 1762	Crossroads Mental Hlth Ctr		Mental Health Services in	41500	04046	305	62				114.17
5095	V 1762	Crossroads Mental Hlth Ctr		Mental Health Services in	41500	04046	305	62				155.61
5095	V 1762	Crossroads Mental Hlth Ctr		Mental Health Services in	41500	04046	305	62				114.17
5095	V 1762	Crossroads Mental Hlth Ctr		Mental Health Services in	41500	04046	305	62				114.17
				Disbursement# 8672								612.29
5096	V 1773	Culligan		Services Management - Wat	41500	04022	432	62				15.28
5096	V 1773	Culligan		Crisis Care Coordination	41500	04023	432	62				2.56
5096	V 1773	Culligan		Justice System Involved C	41500	04025	432	62				5.46
5096	V 1773	Culligan		Direct Admin - Water & Se	41500	04411	432	62				13.10
5096	V 1773	Culligan		Services Management - Wat	41500	04022	432	62				24.58
5096	V 1773	Culligan		Crisis Care Coordination	41500	04023	432	62				3.51
5096	V 1773	Culligan		Justice System Involved C	41500	04025	432	62				8.77
5096	V 1773	Culligan		Direct Admin - Water & Se	41500	04411	432	62				21.06
				Disbursement# 8673								94.32
5137	V 6709	Duncan Heights, Inc.		Services Management - Tel	41500	04022	414	62				16.28
5137	V 6709	Duncan Heights, Inc.		Services Management - Ren	41500	04022	450	62				63.64
5137	V 6709	Duncan Heights, Inc.		Crisis Care Coordination	41500	04023	414	62				2.33
5137	V 6709	Duncan Heights, Inc.		Crisis Care Coordination	41500	04023	450	62				9.09
5137	V 6709	Duncan Heights, Inc.		Justice System Involved C	41500	04025	414	62				5.81
5137	V 6709	Duncan Heights, Inc.		Justice System Involved C	41500	04025	450	62				22.73
5137	V 6709	Duncan Heights, Inc.		Direct Admin - Telecommun	41500	04411	414	62				13.95
5137	V 6709	Duncan Heights, Inc.		Direct Admin - Building (	41500	04411	450	62				54.54
				Disbursement# 8674								188.37
5098	V 2219	eVizzit of Ia Psychiatry, JAIL		Crisis Evaluation	41500	04044	301	62				290.00
5098	V 2219	eVizzit of Ia Psychiatry, JAIL		Crisis Evaluation	41500	04044	301	62				3190.00
5098	V 2219	eVizzit of Ia Psychiatry, JAIL		Crisis Evaluation	41500	04044	301	62				2900.00
5098	V 2219	eVizzit of Ia Psychiatry, JAIL		Crisis Evaluation	41500	04044	301	62				2030.00
5098	V 2219	eVizzit of Ia Psychiatry, JAIL		Crisis Evaluation	41500	04044	301	62				3480.00
5098	V 2219	eVizzit of Ia Psychiatry, JAIL		Crisis Evaluation	41500	04044	301	62				2320.00
5098	V 2219	eVizzit of Ia Psychiatry, JAIL		Crisis Evaluation	41500	04044	301	62				4060.00
5098	V 2219	eVizzit of Ia Psychiatry, JAIL		Crisis Evaluation	41500	04044	301	62				1450.00
5098	V 2219	eVizzit of Ia Psychiatry, JAIL		Crisis Evaluation	41500	04044	301	62				1450.00
5098	V 2219	eVizzit of Ia Psychiatry, JAIL		Crisis Evaluation	41500	04044	301	62				1160.00
5098	V 2219	eVizzit of Ia Psychiatry, JAIL		Crisis Evaluation	41500	04044	301	62				1740.00
5098	V 2219	eVizzit of Ia Psychiatry, JAIL		Crisis Evaluation	41500	04044	301	62				2610.00
5098	V 2219	eVizzit of Ia Psychiatry, JAIL		Crisis Evaluation	41500	04044	301	62				4640.00
5098	V 2219	eVizzit of Ia Psychiatry, JAIL		Crisis Evaluation	41500	04044	301	62				4060.00
5098	V 2219	eVizzit of Ia Psychiatry, JAIL		Crisis Evaluation	41500	04044	301	62				2320.00
5098	V 2219	eVizzit of Ia Psychiatry, JAIL		Crisis Evaluation	41500	04044	301	62				1740.00
5098	V 2219	eVizzit of Ia Psychiatry, JAIL		Crisis Evaluation	41500	04044	301	62				1740.00
5098	V 2219	eVizzit of Ia Psychiatry, JAIL		Crisis Evaluation	41500	04044	301	62				2610.00
5098	V 2219	eVizzit of Ia Psychiatry, JAIL		Crisis Evaluation	41500	04044	301	62				3190.00
5098	V 2219	eVizzit of Ia Psychiatry, JAIL		Crisis Evaluation	41500	04044	301	62				2900.00

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5098 V	2219	eVizzit of Ia Psychiatry, JAIL		Crisis Evaluation	41500	04044	301	62				2610.00
5098 V	2219	eVizzit of Ia Psychiatry, JAIL		Crisis Evaluation	41500	04044	301	62				2320.00
5098 V	2219	eVizzit of Ia Psychiatry, JAIL		Crisis Evaluation	41500	04044	301	62				1160.00
5098 V	2219	eVizzit of Ia Psychiatry, JAIL		Crisis Evaluation	41500	04044	301	62				3480.00
5098 V	2219	eVizzit of Ia Psychiatry, JAIL		Crisis Evaluation	41500	04044	301	62				2900.00
5098 V	2219	eVizzit of Ia Psychiatry, JAIL		Crisis Evaluation	41500	04044	301	62				870.00
5098 V	2219	eVizzit of Ia Psychiatry, JAIL		Crisis Evaluation	41500	04044	301	62				2320.00
5098 V	2219	eVizzit of Ia Psychiatry, JAIL		Crisis Evaluation	41500	04044	301	62				2610.00
5098 V	2219	eVizzit of Ia Psychiatry, JAIL		Crisis Evaluation	41500	04044	301	62				2610.00
5098 V	2219	eVizzit of Ia Psychiatry, JAIL		Crisis Evaluation	41500	04044	301	62				1450.00
5098 V	2219	eVizzit of Ia Psychiatry, JAIL		Crisis Evaluation	41500	04044	301	62				870.00
5098 V	2219	eVizzit of Ia Psychiatry, JAIL		Crisis Evaluation	41500	04044	301	62				1450.00
5098 V	2219	eVizzit of Ia Psychiatry, JAIL		Crisis Stabilization Comm	41500	04044	312	62				900.00
5098 V	2219	eVizzit of Ia Psychiatry, JAIL		Crisis Evaluation	41500	04244	301	62				290.00
5098 V	2219	eVizzit of Ia Psychiatry, JAIL		Crisis Evaluation	41500	04244	301	62				290.00
					Disbursement#	8675	Disbursement	Total				76,010.00
5126 V	5696	Eyerly Ball CMHS		Mobile Response	41500	04044	307	62				1623.04
5126 V	5696	Eyerly Ball CMHS		Mobile Response	41500	04044	307	62				2434.56
5126 V	5696	Eyerly Ball CMHS		Mobile Response	41500	04044	307	62				1623.04
5126 V	5696	Eyerly Ball CMHS		Mobile Response	41500	04044	307	62				4057.60
5126 V	5696	Eyerly Ball CMHS		Mobile Response	41500	04044	307	62				6492.16
5126 V	5696	Eyerly Ball CMHS		Mobile Response	41500	04044	307	62				811.52
5126 V	5696	Eyerly Ball CMHS		Mobile Response	41500	04044	307	62				1623.04
5126 V	5696	Eyerly Ball CMHS		Mobile Response	41500	04044	307	62				1623.04
5126 V	5696	Eyerly Ball CMHS		Mobile Response	41500	04044	307	62				1623.04
5126 V	5696	Eyerly Ball CMHS		Mobile Response	41500	04044	307	62				1623.04
5126 V	5696	Eyerly Ball CMHS		Mobile Response	41500	04044	307	62				1623.04
5126 V	5696	Eyerly Ball CMHS		Mobile Response	41500	04044	307	62				3246.08
5126 V	5696	Eyerly Ball CMHS		Mobile Response	41500	04044	307	62				811.52
5126 V	5696	Eyerly Ball CMHS		Mobile Response	41500	04044	307	62				1623.04
5126 V	5696	Eyerly Ball CMHS		Mobile Response	41500	04044	307	62				2434.56
5126 V	5696	Eyerly Ball CMHS		Mobile Response	41500	04044	307	62				1623.04
5126 V	5696	Eyerly Ball CMHS		Mobile Response	41500	04044	307	62				1623.04
5126 V	5696	Eyerly Ball CMHS		Mobile Response	41500	04044	307	62				2434.56
5126 V	5696	Eyerly Ball CMHS		Mobile Response	41500	04044	307	62				1623.04
5126 V	5696	Eyerly Ball CMHS		Mobile Response	41500	04044	307	62				2434.56
5126 V	5696	Eyerly Ball CMHS		Mobile Response	41500	04044	307	62				1623.04
5126 V	5696	Eyerly Ball CMHS		Mobile Response	41500	04044	307	62				2434.56
5126 V	5696	Eyerly Ball CMHS		Mobile Response	41500	04044	307	62				1623.04
5126 V	5696	Eyerly Ball CMHS		Mobile Response	41500	04044	307	62				4057.60
5126 V	5696	Eyerly Ball CMHS		Mobile Response	41500	04044	307	62				2434.56
5126 V	5696	Eyerly Ball CMHS		Mobile Response	41500	04044	307	62				2434.56
5126 V	5696	Eyerly Ball CMHS		Mobile Response	41500	04044	307	62				1623.04
5126 V	5696	Eyerly Ball CMHS		Mobile Response	41500	04044	307	62				4057.60
5126 V	5696	Eyerly Ball CMHS		Mobile Response	41500	04044	307	62				2434.56
5126 V	5696	Eyerly Ball CMHS		Mobile Response	41500	04044	307	62				5680.64
5126 V	5696	Eyerly Ball CMHS		Mobile Response	41500	04044	307	62				4869.12
5126 V	5696	Eyerly Ball CMHS		Mobile Response	41500	04044	307	62				7303.68
5126 V	5696	Eyerly Ball CMHS		Mobile Response	41500	04044	307	62				4057.60
5126 V	5696	Eyerly Ball CMHS		Mobile Response	41500	04044	307	62				1623.04
5126 V	5696	Eyerly Ball CMHS		Mobile Response	41500	04044	307	62				1623.04
5126 V	5696	Eyerly Ball CMHS		Mobile Response	41500	04044	307	62				1623.04
5126 V	5696	Eyerly Ball CMHS		Mobile Response	41500	04044	307	62				2434.74
5126 V	5696	Eyerly Ball CMHS		Mobile Response	41500	04244	307	62				811.52
5126 V	5696	Eyerly Ball CMHS		Crisis Stabilization Comm	41500	04044	312	62				10452.58
5126 V	5696	Eyerly Ball CMHS		Crisis Stabilization Comm	41500	04044	312	62				2090.52
5126 V	5696	Eyerly Ball CMHS		Crisis Stabilization Comm	41500	04044	312	62				5226.30

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5126 V	5696	Eyerly Ball CMHS		Crisis Stabilization Comm	41500	04044	312	62				1045.26
5126 V	5696	Eyerly Ball CMHS		Crisis Evaluation	41500	04044	301	62				464.18
				Disbursement#	8676							97,184.94
5100 V	2438	Foundation 2, Inc.		Mobile Response	41500	04044	307	62				9295.00
				Disbursement#	8677							9,295.00
5099 V	2420	Franklin County Auditor		Services Management - Ren	41500	04022	450	62				394.60
5099 V	2420	Franklin County Auditor		Crisis Care Coordination	41500	04023	450	62				56.35
5099 V	2420	Franklin County Auditor		Justice System Involved C	41500	04025	450	62				140.90
5099 V	2420	Franklin County Auditor		Direct Admin - Building (	41500	04411	450	62				338.15
5099 V	2420	Franklin County Auditor		Services Management - Sal	41500	04022	100	62				93270.87
5099 V	2420	Franklin County Auditor		Services Management - Sal	41500	04222	100	62				7421.46
5099 V	2420	Franklin County Auditor		Services Management - Sal	41500	04322	100	62				7220.88
5099 V	2420	Franklin County Auditor		Services Management - Sal	41500	04722	100	62				601.74
5099 V	2420	Franklin County Auditor		Justice System Involved C	41500	04025	100	62				38067.04
5099 V	2420	Franklin County Auditor		Crisis Care Coordination	41500	04023	100	62				12247.83
5099 V	2420	Franklin County Auditor		Direct Admin - Salary Reg	41500	04411	100	62				94865.51
5099 V	2420	Franklin County Auditor		Purchased Admin - Account	41500	04412	420	62				4974.36
5099 V	2420	Franklin County Auditor		Purchased Admin - Data Pr	41500	04412	421	62				4739.79
				Disbursement#	8678							264,339.48
5101 V	2484	Garland & Rodriguez		Commitment - Legal Repres	41500	04074	393	62				210.80
				Disbursement#	8679							210.80
5103 V	2654	Kent L. Geffe		Commitment - Legal Repres	41500	04074	393	62				234.00
				Disbursement#	8680							234.00
5152 V	82851	Kelly Gerke		Direct Admin - Mileage &	41500	04411	413	62				131.33
				Disbursement#	8681							131.33
5102 V	2549	Gethmann Investment Corp.		Services Management - Ren	41500	04022	450	62				403.09
5102 V	2549	Gethmann Investment Corp.		Crisis Care Coordination	41500	04023	450	62				57.57
5102 V	2549	Gethmann Investment Corp.		Justice System Involved C	41500	04025	450	62				143.92
5102 V	2549	Gethmann Investment Corp.		Direct Admin - Building (	41500	04411	450	62				345.42
				Disbursement#	8682							950.00
5106 V	2725	Hamilton County Auditor		Services Management - Ren	41500	04022	450	62				233.37
5106 V	2725	Hamilton County Auditor		Crisis Care Coordination	41500	04023	450	62				33.33
5106 V	2725	Hamilton County Auditor		Justice System Involved C	41500	04025	450	62				83.32
5106 V	2725	Hamilton County Auditor		Direct Admin - Building (	41500	04411	450	62				199.98
5106 V	2725	Hamilton County Auditor		Purchased Admin - Account	41500	04412	420	62				1382.18
				Disbursement#	8683							1,932.18
5132 V	5962	Hardin County Auditor		Mental Health Advocate -	41500	04075	395	62				6149.53
				Disbursement#	8684							6,149.53
5107 V	2917	Heart of Ia Communications Co		Services Management - Tel	41500	04022	414	62				53.11
5107 V	2917	Heart of Ia Communications Co		Crisis Care Coordination	41500	04023	414	62				7.58
5107 V	2917	Heart of Ia Communications Co		Justice System Involved C	41500	04025	414	62				18.95

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5084 V	1279	LifeWorks Community Services		Day Habilitation	41500	04250	367	62				1519.88
5084 V	1279	LifeWorks Community Services		Voc/Day - Individual Supp	41500	04250	368	62				779.57
5084 V	1279	LifeWorks Community Services		Support Services - Suppor	41500	04332	329	62				158.32
5084 V	1279	LifeWorks Community Services		Day Habilitation	41500	04350	367	62				286.20
5084 V	1279	LifeWorks Community Services		Voc/Day - Group Supported	41500	04350	369	62				596.70
5084 V	1279	LifeWorks Community Services		Day Habilitation	41500	04750	367	62				445.20
5084 V	1279	LifeWorks Community Services		Basic Needs - Rent Paymen	41500	04033	340	62				225.00
				Disbursement# 8698							Disbursement Total	4,010.87
5090 E	1423	Jennifer Lockhart		Direct Admin - Mileage &	41500	04411	413	62				93.01
				Disbursement# 8699							Disbursement Total	93.01
5119 V	4400	Mainstream Living		Voc/Day - Group Supported	41500	04350	369	62				230.73
5119 V	4400	Mainstream Living		Day Habilitation	41500	04250	367	62				76.81
5119 V	4400	Mainstream Living		Day Habilitation	41500	04350	367	62				230.43
				Disbursement# 8700							Disbursement Total	537.97
5149 V	8100	Marco		Services Management - Off	41500	04022	444	62				96.67
5149 V	8100	Marco		Crisis Care Coordination	41500	04023	444	62				14.16
5149 V	8100	Marco		Justice System Involved C	41500	04025	444	62				34.74
5149 V	8100	Marco		Direct Admin - Office Equ	41500	04411	636	62				82.96
				Disbursement# 8701							Disbursement Total	228.53
5120 V	4443	Marshall County		Prescription Medication (	41500	04046	306	62				318.72
				Disbursement# 8702							Disbursement Total	318.72
5156 V	4443	Marshall County		Commitment - Sheriff Tran	41500	04074	353	62				91.00
5156 V	4443	Marshall County		Commitment - Sheriff Tran	41500	04074	353	62				31.00
				Disbursement# 8703							Disbursement Total	122.00
5108 V	3129	Liza Maxwell		Services Management - Mil	41500	04022	413	62				183.06
5108 V	3129	Liza Maxwell		Services Management - Tel	41500	04022	414	62				50.00
5108 V	3129	Liza Maxwell		Services Management - Mil	41500	04222	413	62				177.67
5108 V	3129	Liza Maxwell		Services Management - Mil	41500	04322	413	62				177.68
				Disbursement# 8704							Disbursement Total	588.41
5148 V	7953	Robin McKee		Services Management - Mil	41500	04022	413	62				193.30
5148 V	7953	Robin McKee		Services Management - Mil	41500	04222	413	62				187.62
5148 V	7953	Robin McKee		Services Management - Mil	41500	04322	413	62				187.62
				Disbursement# 8705							Disbursement Total	568.54
5118 V	4340	Tabatha McLain		Services Management - Mil	41500	04022	413	62				36.94
5118 V	4340	Tabatha McLain		Services Management - Mil	41500	04222	413	62				88.82
				Disbursement# 8706							Disbursement Total	125.76
5121 V	4748	The Mental Health Lab, PLLC		Mental Health Services in	41500	04046	305	62				1826.72
				Disbursement# 8707							Disbursement Total	1,826.72
5122 V	4766	Mid-Iowa Triumph Recovery Ctr		Psychotherapeutic Treatme	41500	04042	366	62				7194.00
				Disbursement# 8708							Disbursement Total	7,194.00

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5123 V	5250	North Iowa Juvenile Detention		Crisis Stabilization Resi	41500	04044	313	62				360.19
5123 V	5250	North Iowa Juvenile Detention		Commitment - Sheriff Tran	41500	04074	353	62				218.44
				Disbursement# 8709								578.63
5124 V	5283	North Iowa Vocational Center		Basic Needs - Rent Paymen	41500	04233	340	62				500.00
5124 V	5283	North Iowa Vocational Center		Support Services - Suppor	41500	04032	329	62				281.95
5124 V	5283	North Iowa Vocational Center		Voc/Day - Individual Supp	41500	04050	368	62				58.44
5124 V	5283	North Iowa Vocational Center		Voc/Day - Group Supported	41500	04050	369	62				1290.10
5124 V	5283	North Iowa Vocational Center		Comm Based Settings (6+ B	41500	04064	329	62				29745.16
5124 V	5283	North Iowa Vocational Center		Support Services - Suppor	41500	04232	329	62				5741.59
5124 V	5283	North Iowa Vocational Center		Day Habilitation	41500	04250	367	62				460.49
5124 V	5283	North Iowa Vocational Center		Voc/Day - Individual Supp	41500	04250	368	62				780.66
5124 V	5283	North Iowa Vocational Center		Voc/Day - Group Supported	41500	04250	369	62				321.30
5124 V	5283	North Iowa Vocational Center		Support Services - Suppor	41500	04332	329	62				33.84
5124 V	5283	North Iowa Vocational Center		Voc/Day - Prevocational S	41500	04350	362	62				270.00
5124 V	5283	North Iowa Vocational Center		Day Habilitation	41500	04350	367	62				166.46
5124 V	5283	North Iowa Vocational Center		Voc/Day - Individual Supp	41500	04350	368	62				1536.68
5124 V	5283	North Iowa Vocational Center		Voc/Day - Group Supported	41500	04350	369	62				544.68
				Disbursement# 8710								41,731.35
5125 V	5674	Pillar of Cedar Valley		Comm Based Settings (6+ B	41500	04064	317	62				8626.37
				Disbursement# 8711								8,626.37
5127 V	5815	Poweshiek Co Sheriff's Dept		Prescription Medication (	41500	04046	306	62				427.43
				Disbursement# 8712								427.43
5157 V	5815	Poweshiek Co Sheriff's Dept		Commitment - Sheriff Tran	41500	04074	353	62				66.48
5157 V	5815	Poweshiek Co Sheriff's Dept		Commitment - Sheriff Tran	41500	04074	353	62				60.48
				Disbursement# 8713								126.96
5128 V	5816	Poweshiek County Auditor		Services Management - Ren	41500	04022	450	62				254.58
5128 V	5816	Poweshiek County Auditor		Crisis Care Coordination	41500	04023	450	62				36.36
5128 V	5816	Poweshiek County Auditor		Justice System Involved C	41500	04025	450	62				90.90
5128 V	5816	Poweshiek County Auditor		Direct Admin - Building (	41500	04411	450	62				218.16
				Disbursement# 8714								600.00
5151 V	82831	Prairie Ridge Integrated		Psychotherapeutic Treatme	41500	04042	366	62				6831.00
				Disbursement# 8715								6,831.00
5129 V	5825	Premier Payee, Inc		Support Services - Repres	41500	04032	327	62				52.00
				Disbursement# 8716								52.00
5154 V	83117	The Pride Group		Comm Based Settings (6+ B	41500	04064	314	62				23345.95
				Disbursement# 8717								23,345.95
5130 V	5840	Progress Industries		Day Habilitation	41500	04250	367	62				768.10
5130 V	5840	Progress Industries		Voc/Day - Individual Supp	41500	04250	368	62				1560.23
5130 V	5840	Progress Industries		Support Services - Suppor	41500	04332	329	62				649.02
5130 V	5840	Progress Industries		Voc/Day - Individual Supp	41500	04350	368	62				780.66
5130 V	5840	Progress Industries		Support Services - Suppor	41500	04732	329	62				369.27

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Claim #	Vendor#	Payee Name	Invoice#	Description	Fund	Funct	Obj	Dpt	Prj	Sub	Line	Amount
5130 V	5840	Progress Industries		Day Habilitation	41500	04750	367	62				2227.49
				Disbursement# 8718		Disbursement		Total				6,354.77
5131 V	5910	Quill Corporation		Services Management - Sta	41500	04022	260	62				302.38
5131 V	5910	Quill Corporation		Crisis Care Coordination	41500	04023	260	62				50.41
5131 V	5910	Quill Corporation		Justice System Involved C	41500	04025	260	62				107.99
5131 V	5910	Quill Corporation		Direct Admin - Stationary	41500	04411	260	62				259.18
				Disbursement# 8719		Disbursement		Total				719.96
5133 V	6281	Router12 Networks LLC		Services Management - Tel	41500	04022	414	62				44.10
5133 V	6281	Router12 Networks LLC		Crisis Care Coordination	41500	04023	414	62				7.35
5133 V	6281	Router12 Networks LLC		Justice System Involved C	41500	04025	414	62				15.75
5133 V	6281	Router12 Networks LLC		Direct Admin - Telecommun	41500	04411	414	62				37.80
				Disbursement# 8720		Disbursement		Total				105.00
5073 V	322	Salvation Army		Support Services - Repres	41500	04032	327	62				624.00
				Disbursement# 8721		Disbursement		Total				624.00
5134 V	6455	Scott County Sheriff		Commitment - Sheriff Tran	41500	04074	353	62				48.40
				Disbursement# 8722		Disbursement		Total				48.40
5135 V	6579	Jen Sheehan		Direct Admin - Mileage &	41500	04411	413	62				818.75
				Disbursement# 8723		Disbursement		Total				818.75
5153 V	82938	The Shredder		Services Management - Cus	41500	04022	471	62				22.91
5153 V	82938	The Shredder		Crisis Care Coordination	41500	04023	471	62				3.28
5153 V	82938	The Shredder		Justice System Involved C	41500	04025	471	62				8.18
5153 V	82938	The Shredder		Direct Admin - Custodial	41500	04411	471	62				19.63
				Disbursement# 8724		Disbursement		Total				54.00
5136 V	6682	Lisa Soder		Services Management - Mil	41500	04022	413	62				119.87
				Disbursement# 8725		Disbursement		Total				119.87
5089 E	1414	Nicole D Sprecher		Services Management - Mil	41500	04022	413	62				1.31
5089 E	1414	Nicole D Sprecher		Services Management - Mil	41500	04222	413	62				1.31
				Disbursement# 8726		Disbursement		Total				2.62
5139 V	7025	Story County Auditor		Purchased Admin - Account	41500	04412	420	62				3973.02
5139 V	7025	Story County Auditor		Services Management - Ren	41500	04022	450	62				207.91
5139 V	7025	Story County Auditor		Crisis Care Coordination	41500	04023	450	62				29.69
5139 V	7025	Story County Auditor		Justice System Involved C	41500	04025	450	62				74.24
5139 V	7025	Story County Auditor		Direct Admin - Building (	41500	04411	450	62				178.16
				Disbursement# 8727		Disbursement		Total				4,463.02
5140 V	7125	Story County Treasurer		Prescription Medication (	41500	04046	306	62				6.38-
5140 V	7125	Story County Treasurer		Prescription Medication (	41500	04046	306	62				6.62-
5140 V	7125	Story County Treasurer		Prescription Medication (	41500	04046	306	62				201.84
				Disbursement# 8728		Disbursement		Total				188.84
5142 V	7498	U.S. Cellular		Services Management - Tel	41500	04022	414	62				2371.96

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Claim #	Vendor#	Payee Name	Invoice#	Description	Fund	Funct	Obj	Dpt	Prj	Sub	Line	Amount
				Disbursement#	8729	Disbursement	Total					2,371.96
5141	V 7495	UnityPoint Health		Psychotherapeutic Treatme	41500	04042	305	62				3328.00
				Disbursement#	8730	Disbursement	Total					3,328.00
5143	V 7541	Starla Varrelman		Crisis Care Coordination	41500	04023	422	62				73.36
				Disbursement#	8731	Disbursement	Total					73.36
5144	V 7601	VISA		Services Management - Sta	41500	04022	260	62				765.68
5144	V 7601	VISA		Services Management - Tel	41500	04022	414	62				43.68
5144	V 7601	VISA		Crisis Care Coordination	41500	04023	260	62				109.36
5144	V 7601	VISA		Crisis Care Coordination	41500	04023	414	62				6.24
5144	V 7601	VISA		Justice System Involved C	41500	04025	260	62				273.39
5144	V 7601	VISA		Justice System Involved C	41500	04025	414	62				15.60
5144	V 7601	VISA		Direct Admin - Stationary	41500	04411	260	62				656.15
5144	V 7601	VISA		Direct Admin - Informatio	41500	04411	262	62				1957.80
5144	V 7601	VISA		Direct Admin - Telecommun	41500	04411	414	62				37.43
5144	V 7601	VISA		Direct Admin - Educationa	41500	04411	422	62				98.12
				Disbursement#	8732	Disbursement	Total					3,963.45
5079	V 745	Visual Edge IT, Inc		Services Management - Off	41500	04022	444	62				13.70
5079	V 745	Visual Edge IT, Inc		Crisis Care Coordination	41500	04023	444	62				1.96
5079	V 745	Visual Edge IT, Inc		Justice System Involved C	41500	04025	444	62				4.89
5079	V 745	Visual Edge IT, Inc		Direct Admin - Office Equ	41500	04411	444	62				11.74
				Disbursement#	8733	Disbursement	Total					32.29
5146	V 7703	Warren County Justice Center		Services Management - Ren	41500	04022	450	62				526.55
5146	V 7703	Warren County Justice Center		Crisis Care Coordination	41500	04023	450	62				75.21
5146	V 7703	Warren County Justice Center		Justice System Involved C	41500	04025	450	62				188.00
5146	V 7703	Warren County Justice Center		Direct Admin - Building (	41500	04411	450	62				451.23
				Disbursement#	8734	Disbursement	Total					1,240.99
5145	V 7680	Warren County Sheriff		Commitment - Sheriff Tran	41500	04074	353	62				50.88
5145	V 7680	Warren County Sheriff		Commitment - Sheriff Tran	41500	04074	353	62				50.88
5145	V 7680	Warren County Sheriff		Commitment - Sheriff Tran	41500	04074	353	62				90.16
5145	V 7680	Warren County Sheriff		Commitment - Sheriff Tran	41500	04074	353	62				123.80
				Disbursement#	8735	Disbursement	Total					315.72
5077	E 573	Karla K Webb		Direct Admin - Stationary	41500	04411	260	62				146.39
5077	E 573	Karla K Webb		Direct Admin - Mileage &	41500	04411	413	62				201.09
5077	E 573	Karla K Webb		Direct Admin - Telecommun	41500	04411	414	62				50.00
5077	E 573	Karla K Webb		Direct Admin - Educationa	41500	04411	422	62				1080.29
				Disbursement#	8736	Disbursement	Total					1,477.77
5074	V 426	Jarica White		Services Management - Mil	41500	04022	413	62				46.89
5074	V 426	Jarica White		Services Management - Mil	41500	04222	413	62				40.42
5074	V 426	Jarica White		Services Management - Mil	41500	04322	413	62				40.42
				Disbursement#	8737	Disbursement	Total					127.73
5105	V 2688	Windstream Communications		Services Management - Tel	41500	04022	414	62				191.00

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				Disbursement#	8738							191.00
												Disbursement Total
5147	V	7840 Wright County Auditor		Services Management - Ren	41500	04022	450	62				254.58
5147	V	7840 Wright County Auditor		Crisis Care Coordination	41500	04023	450	62				36.36
5147	V	7840 Wright County Auditor		Justice System Involved C	41500	04025	450	62				90.90
5147	V	7840 Wright County Auditor		Direct Admin - Building (	41500	04411	450	62				218.16
				Disbursement#	8739							600.00
												Disbursement Total
												88 Total Disbursements
												712,334.10
												0 Total ACH
												.00
												0 Total EFT
												.00
												88 Grand Total
												712,334.10
												Credits/Refunds Included
												30.85

Totals by Fund		
41500	Central Iowa Community Service	712,334.10
	Final Total	712,334.10

End of report

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2023 Expenditure Report						
FY 2024	CICS MHDS Region	Monthly Expenditures	YTD Expenditures	FY24 Budget	Budget Remaining	% of Budget Used
Core Domains						
COA	Treatment					
42305	Mental health outpatient therapy	\$ 2,830	\$ 12,576	\$ 175,000	\$ 162,424	7%
42306	Medication prescribing & management	\$ 232	\$ 2,151	\$ 40,000	\$ 37,849	5%
43301	Assessment & evaluation	\$ -	\$ 2,900	\$ 20,000	\$ 17,100	15%
71319	Mental health inpatient therapy-MHI	\$ -	\$ 100,301	\$ 200,000	\$ 99,699	50%
73319	Mental health inpatient therapy	\$ -	\$ -	\$ 25,000	\$ 25,000	0%
	Crisis Services					
32322	Personal emergency response system	\$ -	\$ -	\$ 5,000	\$ 5,000	0%
44301	Crisis evaluation	\$ 93,580	\$ 442,059	\$ 700,000	\$ 257,941	63%
44302	23 hour crisis observation & holding	\$ -	\$ -	\$ 40,000	\$ 40,000	0%
44305	24 hour access to crisis response	\$ -	\$ -	\$ -	\$ -	-
44307	Mobile response	\$ 66,371	\$ 421,540	\$ 1,200,000	\$ 778,460	35%
44312	Crisis Stabilization community-based services	\$ 14,006	\$ 88,901	\$ 250,000	\$ 161,099	36%
44313	Crisis Stabilization residential services	\$ 8,645	\$ 135,167	\$ 100,000	\$ (35,167)	135%
44379	System building & sustainability - Crisis	\$ -	\$ 48,089	\$ 1,200,000	\$ 1,151,911	4%
44396	Access Centers: start-up / sustainability	\$ 5,250	\$ 52,550	\$ 1,000,000	\$ 947,450	5%
	Support for Community Living					
32320	Home health aide	\$ -	\$ -	\$ -	\$ -	-
32325	Respite	\$ 361	\$ 1,653	\$ 20,000	\$ 18,347	8%
32328	Home & vehicle modifications	\$ -	\$ -	\$ -	\$ -	-
32329	Supported community living	\$ 59,024	\$ 237,564	\$ 1,000,000	\$ 762,436	24%
42329	Intensive residential services	\$ -	\$ -	\$ 150,000	\$ 150,000	0%
	Support for Employment					
50362	Prevocational services	\$ 410	\$ 1,663	\$ 25,000	\$ 23,337	7%
50364	Job development	\$ -	\$ -	\$ -	\$ -	-
50367	Day habilitation	\$ 14,627	\$ 81,008	\$ 1,225,000	\$ 1,143,992	7%
50368	Supported employment	\$ 8,922	\$ 42,430	\$ 125,000	\$ 82,570	34%
50369	Group Supported employment-enclave	\$ 2,210	\$ 11,924	\$ 20,000	\$ 8,076	60%
50379	System building & sustainability - IPS & Vocational	\$ -	\$ -	\$ 75,000	\$ 75,000	0%
	Recovery Services					
45323	Family support	\$ 2,000	\$ 12,591	\$ 50,000	\$ 37,409	25%
45366	Peer support	\$ -	\$ 1,663	\$ 10,000	\$ 8,337	17%
	Service Coordination					
21375	Case management	\$ -	\$ -	\$ -	\$ -	-
24376	Health homes	\$ -	\$ -	\$ -	\$ -	-
	Sub-Acute Services					
63309	Subacute services-1-5 beds	\$ -	\$ -	\$ -	\$ -	-
64309	Subacute services-6 and over beds	\$ 33,300	\$ 107,650	\$ 300,000	\$ 192,350	36%
	Core Evidenced Based Treatment					
04422	Education & Training Services - provider competency	\$ 115	\$ 2,344	\$ 75,000	\$ 72,656	3%
32379	System building & sustainability - Supported housing	\$ -	\$ -	\$ 1,000,000	\$ 1,000,000	0%
32396	Supported housing	\$ -	\$ -	\$ 500,000	\$ 500,000	0%
42398	Assertive community treatment (ACT)	\$ 2,457	\$ 28,027	\$ 150,000	\$ 121,973	19%
45373	Family psychoeducation	\$ -	\$ -	\$ 10,000	\$ 10,000	0%
45379	System building & sustainability - FPE & Recovery Svcs	\$ -	\$ -	\$ 65,000	\$ 65,000	0%
	Core Domains Total	\$ 314,338	\$ 1,834,752	\$ 9,755,000	\$ 7,920,248	19%
Mandated Services						
46319	Oakdale	\$ -	\$ -	\$ 50,000	\$ 50,000	0%
72319	State resource centers	\$ -	\$ -	\$ -	\$ -	-
74XXX	Commitment related (except 301)	\$ 19,945	\$ 168,821	\$ 1,000,000	\$ 831,179	17%
75XXX	Mental health advocate	\$ 8,956	\$ 120,857	\$ 250,000	\$ 129,143	48%
	Mandated Services Total	\$ 28,902	\$ 289,678	\$ 1,300,000	\$ 1,010,322	22%
Additional Core Domains						
	Justice system-involved services					
25xxx	Coordination services	\$ 41,893	\$ 285,238	\$ 652,815	\$ 367,577	44%
25378	Contracted Coordination Services	\$ -	\$ -	\$ 100,000	\$ 100,000	0%
44346	24 hour crisis line**	\$ -	\$ -	\$ -	\$ -	-
44366	Warm line**	\$ -	\$ -	\$ -	\$ -	-
46305	Mental health services in jails	\$ 4,925	\$ 70,206	\$ 250,000	\$ 179,794	28%
46399	Justice system-involved services-other	\$ -	\$ 1,678	\$ -	\$ (1,678)	-
46422	Crisis prevention training	\$ -	\$ 161,629	\$ 300,000	\$ 138,371	54%
46425	Mental health court related costs	\$ -	\$ -	\$ 250,000	\$ 250,000	0%
74301	Civil commitment prescreening evaluation	\$ -	\$ -	\$ -	\$ -	-
	Additional Core Evidenced based treatment					
42366	Peer Wellness/Wellness and Recovery Centers	\$ 58,990	\$ 377,242	\$ 850,000	\$ 472,758	44%
42379	System building & sustainability - Non crisis	\$ 6,640	\$ 117,675	\$ 700,000	\$ 582,325	17%
42397	Psychiatric rehabilitation (IPR)	\$ 1,230	\$ 10,755	\$ 27,000	\$ 16,245	40%
	Additional Core Domains Total	\$ 113,680	\$ 1,024,423	\$ 3,129,815	\$ 2,105,392	33%
Other Informational Services						
03371	Information & referral	\$ -	\$ -	\$ 50,000	\$ 50,000	0%

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2023 Expenditure Report						
FY 2024	CICS MHDS Region	Monthly Expenditures	YTD Expenditures	FY24 Budget	Budget Remaining	% of Budget Used
04372	Planning and/or Consultation (client related)		\$ -	\$ -	\$ -	
04377	Provider Incentive Payment		\$ -	\$ -	\$ -	
04399	Consultation Other		\$ -	\$ -	\$ -	
04429	Planning and Management Consultants (non-client related)	\$ -	\$ -	\$ 50,000	\$ 50,000	0%
05373	Public education	\$ 14,807	\$ 85,151	\$ 400,000	\$ 314,849	21%
	Other Informational Services Total	\$ 14,807	\$ 85,151	\$ 500,000	\$ 414,849	17%
Essential Community Living Support Services						
06399	Academic services		\$ -	\$ -	\$ -	
22XXX	Services management	\$ 123,709	\$ 676,995	\$ 1,850,000	\$ 1,173,005	37%
22378	Contracted Services Management		\$ -	\$ -	\$ -	
23376	Crisis care coordination	\$ 13,432	\$ 65,797	\$ 185,000	\$ 119,203	36%
23378	Contracted crisis care coordination	\$ -	\$ -	\$ -	\$ -	
23399	Crisis care coordination other		\$ -	\$ -	\$ -	
24399	Health home other		\$ -	\$ -	\$ -	
31XXX	Transportation	\$ 36,344	\$ 193,967	\$ 1,000,000	\$ 806,033	19%
32321	Chore services		\$ -	\$ -	\$ -	
32326	Guardian/conservator	\$ -	\$ -	\$ 5,000	\$ 5,000	0%
32327	Representative payee	\$ 676	\$ 3,401	\$ 20,000	\$ 16,599	17%
32335	CDAC		\$ -	\$ -	\$ -	
32399	Other support		\$ -	\$ -	\$ -	
33330	Mobile meals		\$ -	\$ -	\$ -	
33340	Rent payments (time limited)	\$ 7,331	\$ 37,586	\$ 200,000	\$ 162,414	19%
33345	Ongoing rent subsidy	\$ 3,001	\$ 8,141	\$ -	\$ (8,141)	
33399	Other basic needs	\$ 1,638	\$ 6,936	\$ 80,000	\$ 73,064	9%
41305	Physiological outpatient treatment	\$ -	\$ -	\$ 5,000	\$ 5,000	0%
41306	Prescription meds	\$ 82	\$ 1,001	\$ 15,000	\$ 13,999	7%
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	\$ 416	\$ 1,841	\$ 10,000	\$ 8,159	18%
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	\$ 5,181	\$ 32,444	\$ 50,000	\$ 17,556	65%
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		\$ -	\$ -	\$ -	
	Essential Comm Living Support Services Total	\$ 191,809	\$ 1,028,109	\$ 3,420,000	\$ 2,391,891	30%
Other Congregate Services						
50360	Work services (work activity/sheltered work)	\$ -	\$ -	\$ -	\$ -	
64XXX	RCF 6 and over beds (64314, 64315 & 64316)	\$ 53,957	\$ 260,783	\$ 500,000	\$ 239,217	52%
64XXX	ICF 6 and over beds (64317 & 64318)	\$ 8,626	\$ 42,575	\$ 200,000	\$ 157,425	21%
64329	SCL 6 and over beds	\$ 74,297	\$ 235,205	\$ 150,000	\$ (85,205)	157%
64399	Other 6 and over beds	\$ -	\$ -	\$ -	\$ -	
	Other Congregate Services Total	\$ 136,880	\$ 538,563	\$ 850,000	\$ 311,437	63%
Administration						
11XXX	Direct Administration	\$ 104,409	\$ 649,909	\$ 2,000,000	\$ 1,350,091	32%
12XXX	Purchased Administration	\$ 15,083	\$ 230,069	\$ 400,000	\$ 169,931	58%
	Administration Total	\$ 119,492	\$ 879,978	\$ 2,400,000	\$ 1,520,022	37%
	Regional Totals	\$ 919,909.06	\$ 5,680,652.91	\$ 21,354,815	\$ 15,674,162	27%

42%

22422 & 11422	Education & Training Expenditures	\$ 4,323	\$ 89,983
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December 2023 Expenditure Report

FY 2024	CICS MHDS Region	Monthly Expenditures	YTD Expenditures	FY24 Budget	Budget Remaining	% of Budget Used
Core Domains						
COA	Treatment					
42305	Mental health outpatient therapy	\$ 19,722	\$ 32,298	\$ 175,000	\$ 142,702	18%
42306	Medication prescribing & management	\$ 204	\$ 2,355	\$ 40,000	\$ 37,645	6%
43301	Assessment & evaluation	\$ 156	\$ 3,056	\$ 20,000	\$ 16,944	15%
71319	Mental health inpatient therapy-MHI	\$ 81,507	\$ 181,808	\$ 200,000	\$ 18,192	91%
73319	Mental health inpatient therapy	\$ -	\$ -	\$ 25,000	\$ 25,000	0%
	Crisis Services					
32322	Personal emergency response system	\$ -	\$ -	\$ 5,000	\$ 5,000	0%
44301	Crisis evaluation	\$ 103,336	\$ 545,395	\$ 700,000	\$ 154,605	78%
44302	23 hour crisis observation & holding	\$ -	\$ -	\$ 40,000	\$ 40,000	0%
44305	24 hour access to crisis response	\$ -	\$ -	\$ -	\$ -	-
44307	Mobile response	\$ 9,295	\$ 430,835	\$ 1,200,000	\$ 769,165	36%
44312	Crisis Stabilization community-based services	\$ 900	\$ 89,801	\$ 250,000	\$ 160,199	36%
44313	Crisis Stabilization residential services	\$ 720	\$ 135,888	\$ 100,000	\$ (35,888)	136%
44379	System building & sustainability - Crisis	\$ 1,945	\$ 50,034	\$ 1,200,000	\$ 1,149,966	4%
44396	Access Centers: start-up / sustainability	\$ 8,750	\$ 61,300	\$ 1,000,000	\$ 938,700	6%
	Support for Community Living					
32320	Home health aide	\$ -	\$ -	\$ -	\$ -	-
32325	Respite	\$ 531	\$ 2,184	\$ 20,000	\$ 17,816	11%
32328	Home & vehicle modifications		\$ -		\$ -	-
32329	Supported community living	\$ 39,512	\$ 277,077	\$ 1,000,000	\$ 722,923	28%
42329	Intensive residential services	\$ 55,373	\$ 55,373	\$ 150,000	\$ 94,627	37%
	Support for Employment					
50362	Prevocational services	\$ 421	\$ 2,084	\$ 25,000	\$ 22,916	8%
50364	Job development		\$ -	\$ -	\$ -	-
50367	Day habilitation	\$ 5,962	\$ 86,970	\$ 1,225,000	\$ 1,138,030	7%
50368	Supported employment	\$ 6,481	\$ 48,911	\$ 125,000	\$ 76,089	39%
50369	Group Supported employment-enclave	\$ 2,582	\$ 14,506	\$ 20,000	\$ 5,494	73%
50379	System building & sustainability - IPS & Vocational	\$ -	\$ -	\$ 75,000	\$ 75,000	0%
	Recovery Services					
45323	Family support	\$ 2,000	\$ 14,591	\$ 50,000	\$ 35,409	29%
45366	Peer support	\$ -	\$ 1,663	\$ 10,000	\$ 8,337	17%
	Service Coordination					
21375	Case management		\$ -	\$ -	\$ -	-
24376	Health homes		\$ -	\$ -	\$ -	-
	Sub-Acute Services					
63309	Subacute services-1-5 beds		\$ -	\$ -	\$ -	-
64309	Subacute services-6 and over beds	\$ -	\$ 107,650	\$ 300,000	\$ 192,350	36%
	Core Evidenced Based Treatment					
04422	Education & Training Services - provider competency	\$ -	\$ 2,344	\$ 75,000	\$ 72,656	3%
32379	System building & sustainability - Supported housing	\$ -	\$ -	\$ 1,000,000	\$ 1,000,000	0%
32396	Supported housing	\$ 3,456	\$ 3,456	\$ 500,000	\$ 496,544	1%
42398	Assertive community treatment (ACT)	\$ 4,355	\$ 32,381	\$ 150,000	\$ 117,619	22%
45373	Family psychoeducation	\$ -	\$ -	\$ 10,000	\$ 10,000	0%
45379	System building & sustainability - FPE & Recovery Svcs	\$ -	\$ -	\$ 65,000	\$ 65,000	0%
	Core Domains Total	\$ 347,209	\$ 2,181,961	\$ 9,755,000	\$ 7,573,039	22%
Mandated Services						
46319	Oakdale	\$ -	\$ -	\$ 50,000	\$ 50,000	0%
72319	State resource centers		\$ -	\$ -	\$ -	-
74XXX	Commitment related (except 301)	\$ 10,905	\$ 179,726	\$ 1,000,000	\$ 820,274	18%
75XXX	Mental health advocate	\$ 35,436	\$ 156,293	\$ 250,000	\$ 93,707	63%
	Mandated Services Total	\$ 46,341	\$ 336,019	\$ 1,300,000	\$ 963,981	26%
Additional Core Domains						
	Justice system-involved services					
25xxx	Coordination services	\$ 53,014	\$ 338,252	\$ 652,815	\$ 314,563	52%
25378	Contracted Coordination Services	\$ -	\$ -	\$ 100,000	\$ 100,000	0%
44346	24 hour crisis line**	\$ -	\$ -	\$ -	\$ -	-
44366	Warm line**	\$ -	\$ -	\$ -	\$ -	-
46305	Mental health services in jails	\$ 15,944	\$ 86,151	\$ 250,000	\$ 163,849	34%
46399	Justice system-involved services-other	\$ -	\$ 1,678	\$ -	\$ (1,678)	-
46422	Crisis prevention training	\$ 30,000	\$ 191,629	\$ 300,000	\$ 108,371	64%
46425	Mental health court related costs	\$ -	\$ -	\$ 250,000	\$ 250,000	0%
74301	Civil commitment prescreening evaluation	\$ -	\$ -	\$ -	\$ -	-
	Additional Core Evidenced based treatment					
42366	Peer Wellness/Wellness and Recovery Centers	\$ 85,653	\$ 462,895	\$ 850,000	\$ 387,105	54%
42379	System building & sustainability - Non crisis	\$ 74,029	\$ 191,703	\$ 700,000	\$ 508,297	27%
42397	Psychiatric rehabilitation (IPR)	\$ 1,185	\$ 11,939	\$ 27,000	\$ 15,061	44%
	Additional Core Domains Total	\$ 259,825	\$ 1,284,248	\$ 3,129,815	\$ 1,845,567	41%
Other Informational Services						
03371	Information & referral	\$ -	\$ -	\$ 50,000	\$ 50,000	0%

December 2023 Expenditure Report

FY 2024	CICS MHDS Region	Monthly Expenditures	YTD Expenditures	FY24 Budget	Budget Remaining	% of Budget Used
04372	Planning and/or Consultation (client related)		\$ -	\$ -	\$ -	
04377	Provider Incentive Payment		\$ -	\$ -	\$ -	
04399	Consultation Other		\$ -	\$ -	\$ -	
04429	Planning and Management Consultants (non-client related)	\$ -	\$ -	\$ 50,000	\$ 50,000	0%
05373	Public education	\$ 6,400	\$ 91,551	\$ 400,000	\$ 308,449	23%
	Other Informational Services Total	\$ 6,400	\$ 91,551	\$ 500,000	\$ 408,449	18%
Essential Community Living Support Services						
06399	Academic services		\$ -	\$ -	\$ -	
22XXX	Services management	\$ 135,233	\$ 812,228	\$ 1,850,000	\$ 1,037,772	44%
22378	Contracted Services Management		\$ -	\$ -	\$ -	
23376	Crisis care coordination	\$ 14,340	\$ 80,137	\$ 185,000	\$ 104,863	43%
23378	Contracted crisis care coordination	\$ -	\$ -	\$ -	\$ -	
23399	Crisis care coordination other		\$ -	\$ -	\$ -	
24399	Health home other		\$ -	\$ -	\$ -	
31XXX	Transportation	\$ 2,863	\$ 196,830	\$ 1,000,000	\$ 803,170	20%
32321	Chore services		\$ -	\$ -	\$ -	
32326	Guardian/conservator	\$ -	\$ -	\$ 5,000	\$ 5,000	0%
32327	Representative payee	\$ 728	\$ 4,129	\$ 20,000	\$ 15,871	21%
32335	CDAC		\$ -	\$ -	\$ -	
32399	Other support		\$ -	\$ -	\$ -	
33330	Mobile meals		\$ -	\$ -	\$ -	
33340	Rent payments (time limited)	\$ 4,016	\$ 41,602	\$ 200,000	\$ 158,398	21%
33345	Ongoing rent subsidy	\$ 830	\$ 8,971	\$ -	\$ (8,971)	
33399	Other basic needs	\$ 1,077	\$ 8,013	\$ 80,000	\$ 71,987	10%
41305	Physiological outpatient treatment	\$ -	\$ -	\$ 5,000	\$ 5,000	0%
41306	Prescription meds	\$ 194	\$ 1,195	\$ 15,000	\$ 13,805	8%
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	\$ 142	\$ 1,982	\$ 10,000	\$ 8,018	20%
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	\$ 9,147	\$ 41,591	\$ 50,000	\$ 8,409	83%
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		\$ -	\$ -	\$ -	
	Essential Comm Living Support Services Total	\$ 168,569	\$ 1,196,677	\$ 3,420,000	\$ 2,223,323	35%
Other Congregate Services						
50360	Work services (work activity/sheltered work)	\$ -	\$ -	\$ -	\$ -	
64XXX	RCF 6 and over beds (64314, 64315 & 64316)	\$ 42,597	\$ 303,380	\$ 500,000	\$ 196,620	61%
64XXX	ICF 6 and over beds (64317 & 64318)	\$ 8,348	\$ 50,923	\$ 200,000	\$ 149,077	25%
64329	SCL 6 and over beds	\$ 25,564	\$ 260,769	\$ 150,000	\$ (110,769)	174%
64399	Other 6 and over beds	\$ -	\$ -	\$ -	\$ -	
	Other Congregate Services Total	\$ 76,509	\$ 615,072	\$ 850,000	\$ 234,928	72%
Administration						
11XXX	Direct Administration	\$ 120,317	\$ 770,226	\$ 2,000,000	\$ 1,229,774	39%
12XXX	Purchased Administration	\$ 16,538	\$ 246,607	\$ 400,000	\$ 153,393	62%
	Administration Total	\$ 136,855	\$ 1,016,832	\$ 2,400,000	\$ 1,383,168	42%
	Regional Totals	\$ 1,041,707.76	\$ 6,722,360.67	\$ 21,354,815	\$ 14,632,454	31%

42%

22422 & 11422	Education & Training Expenditures	\$ 8,552	\$ 98,535
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Additional information regarding December 2023 Expenditure Report

71319 – Mental Health inpatient therapy – MHI: We are currently at 91% of the budget which is an indicator we have had more individuals going inpatient at the state mental health institutes rather than private hospitals with behavioral health units.

44301 – Crisis Evaluation: An unexpected cost in this line item has been for crisis evaluations at Access Centers in other regions for CICS residents. Additionally, we fund crisis appointments at our local providers, as well as the assessments completed at the local Emergency Departments, in this line item.

44313 – Crisis Stabilization Residential Services: This will continue to be over budget as we had accrual payments that were made in July.

50369 – Group Supported Employment-enclave: We have had more individuals accessing this service this year than we have historically and more than we anticipated. However, it is overall a relatively small amount in the overall budget. Since this is a community-based employment service, it may be seeing a resurgence following COVID.

75XXX – Mental Health Advocate: We are seeing an increase in mental health advocate expenses over previous years. There does not appear to be one area that is seeing the increase but an overall increase throughout the Region. As a reminder, the counties are responsible for employing the Mental Health Advocates and the Region reimburses the counties for expenses incurred.

46422 – Crisis Prevention Training: The majority of this line item was a payment at the beginning of the fiscal year, which is why the percentage of budget used remains high.

46306 – Psychiatric medications in jail: This line item is for mental health medications that individuals utilize while they are in our local county jails. This fiscal year, we've seen counties seek reimbursement more than previous years, which is why this line item is running higher.

64329 – SCL 6 and Over beds: The additional expenditures on this line item are due to individuals with higher needs, therefore, a higher rate, living in this setting. We pay Medicaid tiered rates for individuals living in an RCF with more than 6 beds.

FY25 Funds Available

End FY23 Fund Balance	\$ 5,181,319	Certified Fund Balance plus Approved Encumbrance
FY24 Revenue	<u>\$ 18,195,520.00</u>	\$40 per capita plus \$350,000 other revenue
FY24 Total Funds Available	\$ 23,376,839.00	
FY24 Expenditures Needed to get under 5%	\$ 22,300,000.00	
Ending FY24 Fund Balance	\$ 1,076,839.00	5% Fund Balance Max \$ 1,115,000.00
FY25 Revenues	<u>\$ 18,997,708.00</u>	\$42 per capita plus \$250,000 other revenue
FY25 Total Funds Available	\$ 20,074,547.00	
99% of FY25 funds available to budget	\$ 19,873,801.53	

FY24 Budget	\$ 21,354,815
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Salary Information for FY25 Budget

	FY24	1%	2%	3%	4%	5%
4411 Admin Total:	\$ 772,696.96	\$ 780,423.93	\$ 788,150.90	\$ 795,877.87	\$ 803,604.84	\$ 811,331.81
4023 Crisis Total:	\$ 105,809.60	\$ 106,867.70	\$ 107,925.79	\$ 108,983.89	\$ 110,041.98	\$ 111,100.08
4025 Justice-Involved Services Total:	\$ 385,819.20	\$ 389,677.39	\$ 393,535.58	\$ 397,393.78	\$ 401,251.97	\$ 405,110.16
4022 Service Management Total:	\$ 928,457.76	\$ 937,742.34	\$ 947,026.92	\$ 956,311.49	\$ 965,596.07	\$ 974,880.65
Total	\$ 2,192,783.52	\$ 2,214,711.36	\$ 2,236,639.19	\$ 2,258,567.03	\$ 2,280,494.86	\$ 2,302,422.70
Increase from FY24		\$ 21,927.84	\$ 43,855.67	\$ 65,783.51	\$ 87,711.34	\$ 109,639.18



CICS

Supporting Individuals. Strengthening Communities.

Executive Summary

Introduction: Community and Family Resources (CFR) has been a free-standing comprehensive substance use treatment provider dedicated to serving families since 1968. In 2011, CFR also became accredited as a mental health service provider by the Division of Mental Health and Disability Services under the Iowa Department of Human Services. Today, CFR serves 14 counties across Iowa: Boone, Calhoun, Cedar, Hamilton, Humboldt, Iowa, Johnson, Pocahontas, Polk, Story, Warren, Washington, Webster, and Wright Counties. Additional specialized prevention services are also included in Franklin, Hardin, Jefferson, Keokuk, Kossuth, and Louisa Counties.

Proposed Project: CFR is requesting funding to purchase the building they are currently in from Hamilton County. Hamilton County has agreed to a purchase price of \$900,000. This was voted on and approved at a Hamilton County Board of Supervisor meeting earlier this month. Included in the funding request to CICS is additional dollars for some minor updates in terms of carpet, paint, and signage. Currently CFR has outpatient services, and prevention services housed in this building. CFR has expansion plans for this building that will include recovery-based housing, peer support, and an increase in outpatient services for behavioral health services.

Recommendation: CICS Planning and Development staff are recommending the approval of this project. The building would help CFR continue to build on developing access to services for behavioral health needs. While CICS cannot help fund recovery-based housing, there has been discussion on funds becoming available through legislation this session that focuses on recovery-based and sober living. CFR would potentially be able to use these dollars for recovery-based housing projects. The purchase of the building would assist them with this project and help demonstrate collaboration between CICS and a full spectrum of behavioral health provider.

Project Contacts: Michelle De La Riva, Executive Director, CFR

Total Project Cost	\$1,082,002
CICS contribution	\$1,082,002
Start Date	2/1/2024
End Date	6/30/2024



500 FAIR MEADOW DR, WEBSTER CITY

Deed: HAMILTON COUNTY

Map Area: C - WC EXEMPT

Checks/Tags: E

Contract:

Route: 405-050-360

Lister/Date: ZLL, 03/24/2015

CID#:

Tax Dist: 490 - Webster City Corp

Review/Date: BL, 10/20/2015

DBA: HAMILTON COUNTY MENTAL HEALTH SERVICES

Plat Page:

Entry Status: Inspected

MLS:

Subdiv: C & I -- WC SOUTH

URBAN / COMMERCIAL

Legal: Section: 000; Twp: 000; Rng: 000; Block: ; Lot: ; Deeded Acres: 2.000

ALEXANDER'S 6TH ADD LT 3 N 214.67' EXC E60' & LT 2 N 122.17' OF E 184.5' & ALEXANDER'S 5TH ADD LT 6

Land

Land Basis	Front	Rear	Side 1	Side 2	R. Lot	SF	Acres	Depth/Unit	EFF/Type	Qual./Land						
Acre X Rate						43,560.00	1.000			C-7.00						
Subtotal						43,560.00	1.000									
Acre X Rate						43,560.00	1.000			C-4.50						
Subtotal						43,560.00	1.000									
Grand Total						87,120.00	2.000									

Street

Utilities

Zoning

Land Use

Acre X Rate	Paved	City	-- NONE --	Non Applicable
Acre X Rate	Paved	City	-- NONE --	Non Applicable

Sales

Building Permits

Values

Date	\$ Amount	NUTC	Recording	Date	Number	Tag	\$ Amount	Reason	Type	Appraised	B of R	St. Equalized	Pr Yr: 2022
12/29/2015	\$750,000	D2	2016-0008						Land		\$0	\$0	
07/14/2003	\$200,000	D50	032801						LandC	\$120,000	\$0	\$0	\$120,000
									Dwlg		\$0	\$0	
									Impr	\$1,488,840	\$0	\$0	\$1,136,730
									Total	\$1,608,840	\$0	\$0	\$1,256,730

Precomputed Structure	
Occ. Code	604
Occ. Descr.	Metal Office
Year Built	2004
EFF Age/Yr	19/ 2004
Condition	NML
Description	B1-1S MTL/STL
Style	Metal - Steel
Width	112
Grade	3+10
Base	15,050
Basement	0
Decorative Front	Yes
GBA	15050

Verticals			
Ftg & Fdtn	Reinforced Concrete	8"	
Exterior wall	Mtl/ Stl/ Insul (=>100' Wide)	15	ive Block - 8" (Ground Face) 6
Interior wall	Drywall or Equiv.	0	
Pilasters			
Wall facing	: Veneer w/o Wd Stud Bckup	Average	
Windows	Comm. Steel Sash	1	
Fronts/Doors	Incl. w / Base	Average	

Horizontals			
Basement			
Roof	etal/ Stl/ Insul (=>100' Wide)		
Ceiling	nded Blk-Drop Edge(Tegular)	1	
Struct. Floor	R'Concrete	1	
Floor Cover	Carpet	1	Quarry Tile 1
Partitions	Office	1	
Framing	Steel - Average	1	
HVAC	Combination FHA - AC	1	
Electrical	Office	1	
Sprinkler	Exposed Wet	1	

Plumbing		
	B	Ext
Toilet Room	7	
Urinal - Wall	1	
Water Closet	3	
3-Fixture Bathroom	1	
Lavatory	2	
Sink-Kitchen	7	
Stainless Stl Sinks-(Lounge)	1	

Adjustments		
Sprinkler - exposed w/	15,050	AVG
Mezzanine - finished(r	1,250	AVG
Heat - none	1,250	AVG

PDF+PIN: 017+40882612230006

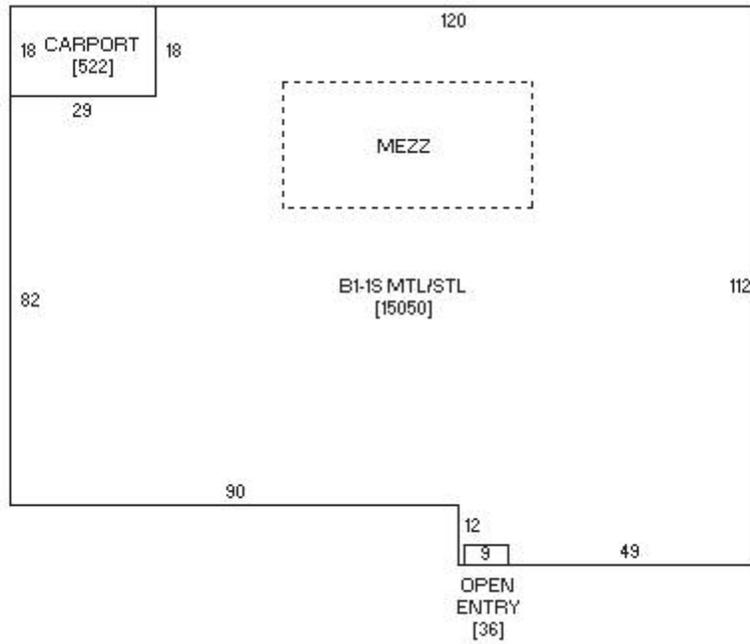
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	Adj	Mezzanine - finished(no a/c) - AVG	1,250					
	Adj	Heat - none - AVG	1,250					
1 of 5	Ex	Porch (Commercial) 36 SF, Porch (commercial), Average Pricing	1		2004			
2 of 5	Ex	Porch (Commercial) 522 SF, Porch (commercial), Average Pricing	1		2004			
3 of 5	Ex	Bank - Vault Record - Concrete, 323 SF	1		2004			
4 of 5	Ex	Bank - Vault Record - Concrete, 378 SF	1		2004			
5 of 5	Ex	Bank - Vault Record - Concrete, 810 SF	1		2004			

PDF+PIN: 017+40882612230006

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Prior Year	Comment	Value Type	Location	Class	Land Value	Dwelling Value	Improvement Value	M & E Value	Total Value
2022		Appr	URBAN	Comm	\$120,000	\$0	\$1,136,730	\$0	\$1,256,730
2021		Appr	URBAN	Comm	\$120,000	\$0	\$1,136,730	\$0	\$1,256,730
2020	2020 Manual Conversion 12/31/2020	Appr	URBAN	Comm	\$120,000	\$0	\$1,060,620	\$0	\$1,180,620
2020		Appr	URBAN	Comm	\$120,000	\$0	\$1,060,620	\$0	\$1,180,620
2019		Appr	URBAN	Comm	\$120,000	\$0	\$1,060,620	\$0	\$1,180,620
2018		Appr	URBAN	Comm	\$120,000	\$0	\$1,060,620	\$0	\$1,180,620
2017		Appr	URBAN	Comm	\$120,000	\$0	\$1,060,620	\$0	\$1,180,620
2016		Appr	URBAN	Comm	\$120,000	\$0	\$1,060,620	\$0	\$1,180,620
2015		Appr	URBAN	Comm	\$90,000	\$0	\$997,210	\$0	\$1,087,210
2014		Appr	URBAN	Comm	\$90,000	\$0	\$997,210	\$0	\$1,087,210



Sketch 1 of 1





Photo 4 of 8 06/22/2011



Photo 5 of 8 06/25/2016



Photo 6 of 8 03/24/2015

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Photo 7 of 8 06/03/2022



Photo 8 of 8 03/04/2022

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CICS

Supporting Individuals. Strengthening Communities.

Executive Summary

Introduction: Easterseals Iowa provides services for those with mental health and disability needs across the life span. They have previously referred children to other providers for Multi-Systemic Therapy (MST) but have been unable to do so recently because of extensive waitlists for the service. Multisystemic Therapy (MST) is an evidence-based intervention for youth at risk of severe system consequences due to serious externalizing, anti-social, and/or delinquent behaviors (e.g., criminal activity, substance use) and their families. Youth and families receive treatment within the systems they are embedded in, such as their homes, schools, and communities, via licensed Multisystemic Therapy providers, which consist of a team (or teams) of 2-4 therapists and a supervisor. MST teams are on call 24/7 to provide treatment when and where it is needed—within any combination of these systems—and are dedicated to improving youth and family functioning.

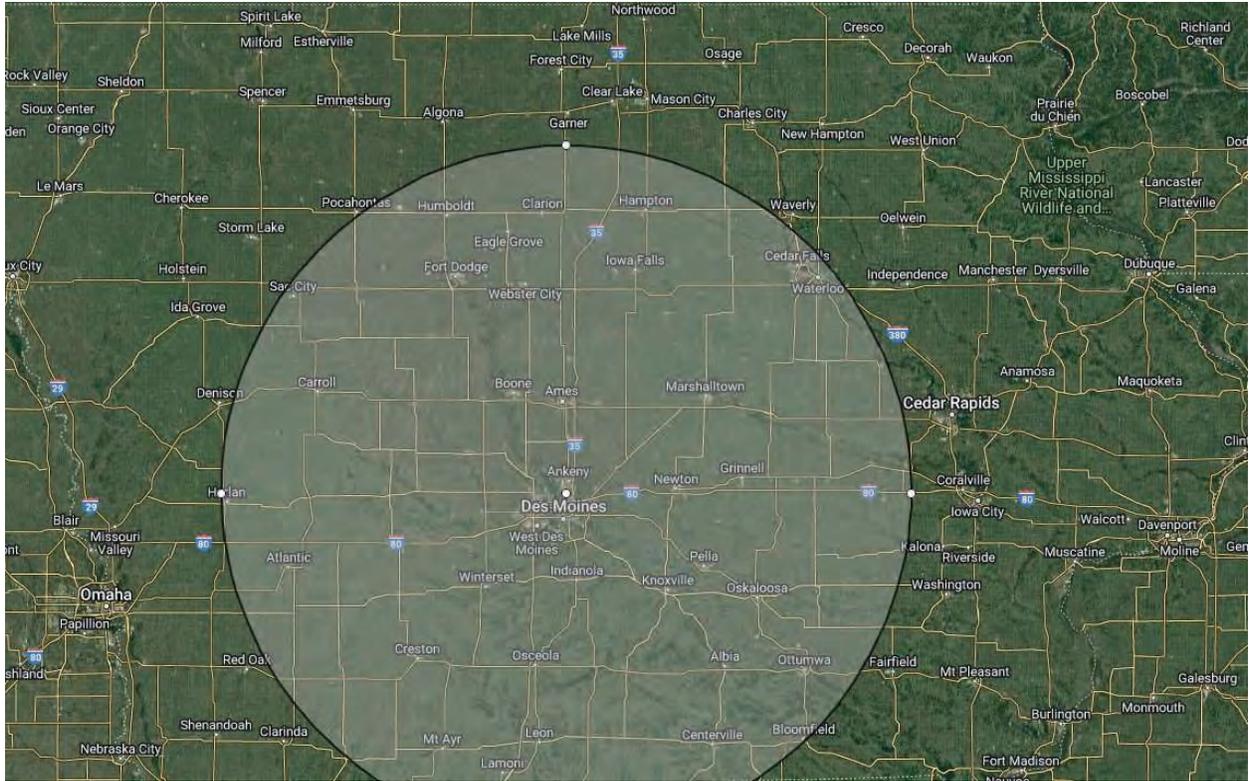
Proposed Project: The proposal from Easterseals is for the startup costs to develop a MST program within Easterseals. This service typically lasts three to six months with some exceptions. Services include assessment and treatment by approved providers who are nationally accredited and/or trained. They are requesting funds for the startup cost of staff wages, training, and accreditation from MSTs to provide MST to fidelity. Easterseals will be unable to use staff in combined roles for this program and must have the staff dedicated specifically to MST. Their plan is to start with a supervisor, director, and two therapists. MST can be provided within a 90-minute radius of Easterseals. The attached map demonstrates the 90-minute radius covers a large portion of the CICS region. Services include individual and family therapy, peer assessment and intervention, social supports enhancement, parent skills training, prosocial activity management, educational/vocational support, alcohol/drug interventions, and 24/7 on-call clinicians. In the first full year of service provision a team of 4 can serve up to 60 families per year, impacting 200 to 500 people per year. Services are provided by Iowa licensed mental health professionals. Easterseals will be able to bill Medicaid for Medicaid eligible individuals for the service itself and will work with regions to bill for children that are not Medicaid eligible. Sustainability funding in FY25 is anticipated to come from Polk County as noted in their letter of support.

Recommendation: It is important to note that Easterseals is in Des Moines and will also be serving individuals outside of CICS region. The project would support both CICS residents and residents of other regions. The CICS leadership did identify as a priority to increase access to outpatient services this fiscal year. This would help meet our core service requirement of outpatient services. It also increases access to outpatient services for children in our region. We are recommending to not fund \$5000 in the proposed budget due to it being directly related to SUD services and treatment.

Project Contacts: Tony Raymer, Director, Brain Health, Easterseals Iowa

Total Project Cost	\$165,720.25
CICS contribution	\$137,535.25
Capacity Increase	In the first full year of service provision a team of 4 can serve up to 60 families per year, impacting 200 to 500 people per year.
Start Date	2/1/24
End Date	6/30/24
Population Affected	See map for coverage area of CICS region that falls with 90-minute radius
Prioritization Tool score	205







December 19, 2023

Central Iowa Community Services
Attn: Russell Wood
126 S. Kellogg Ave., Suite 001
Ames, Iowa 50010

Dear Mr. Wood:

The Polk County Mental Health and Disability Services (MHDS) Region would like to partner with the CICS Region to develop and implement a Multisystemic Therapy (MST) program. MST is an evidenced-based intensive family and community-based treatment for youth.

We are partnering with EasterSeals which is on the north side of Polk County. This service can be provided within a 90-minute radius of the office which makes it ideal for the CICS Region to also utilize this program which is not available currently in either of our Regions.

MST is a covered service by Medicaid but requires fee for service for region funded clients, startup funding and sustainability from the Regions. We are asking if the CICS Region would cover startup and the Polk Region will pay for sustainability. Each Region would be responsible for their own fee for service.

I appreciate the partnership our Regions have developed for our community members.

Sincerely,

A handwritten signature in black ink, appearing to read "Annie Uetz". The signature is fluid and cursive, with a long horizontal stroke at the end.

Annie Uetz, CEO
Polk County MHDS Region



INFORMATIONAL LETTER NO. 245 I-MC-FFS

DATE: May 1, 2023

TO: Iowa Medicaid Behavioral Health Services Providers

APPLIES TO: Managed Care (MC), Fee-for-Service (FFS)

FROM: Iowa Department of Health and Human Services (HHS), Iowa Medicaid

RE: Multi-Systemic Therapy (MST) and Functional Family Therapy (FFT)

EFFECTIVE: March 1, 2023

A state plan amendment has been submitted to establish coverage for MST and FFT.

MST is an evidence-based intensive treatment process that focuses on diagnosed behavioral health disorders and environmental systems (family, school, peer groups, culture, neighborhood, and community) that contribute to or influence youth involvement, or potential involvement, in the juvenile justice system. The therapeutic modality reinforces positive behaviors, reduces negative behaviors, uses family strengths to promote positive coping activities, and helps the family increase accountability and improve problem solving. This service typically lasts three to six months with some exceptions. Services include assessment and treatment by approved providers who are nationally accredited and/or trained.

FFT is an evidence-based family therapy that provides clinical assessment and treatment for youths and their families to improve communication, problem solving, and conflict management to reduce problematic behavior. It is a short-term treatment strategy that is built on a foundation of respect of individuals, families, and cultures. This service typically lasts three to six months with some exceptions. Services include assessment and treatment by approved providers who are nationally accredited and/or trained.

Provider Qualifications

Providers must be enrolled as provider type 62 – behavioral health service provider; type 21 – community mental health centers; and type 29 – psychologist, to bill for these services.

Providers must maintain active certification of MST and FFT teams via one of the following recognized national certification entities:

- [FFT Partners](#)¹
- [FFT, LLC](#)²
- [MST Services](#)³

Providers are responsible for training, credentialing, and participation in regular fidelity reviews. Verification of team certification at the time of service will occur as part of the prior authorization review.

Billing Guidance

To bill this service, providers must be enrolled with Iowa Medicaid. When billing for services provided to members enrolled with a managed care organization (MCO), providers must also be contracted with the MCO. A prior authorization will be required for this service. Claims should be billed per youth(s) receiving services.

Service	Service Code	Unit	Modifier	Description	Rate Effective 03/01/23
MST	H2033	15 minutes	N/A	N/A	\$46.37
FFT	90846 – family therapy without youth present	hourly	HK	HP, HO, AF, SA	\$164.98
FFT	90847 – family therapy with youth present	hourly	HK	HP, HO, AF, SA	\$164.98

¹ <https://functionalfamilytherapy.com/>

² <https://www.fftllc.com/>

³ <https://www.mstservices.com/>

Modifier	Modifier Description
HP	doctoral level (board-certified behavior analyst)
HO	master's degree level (board-certified behavior analyst)
AF	specialty physician
SA	advanced registered nurse practitioner (ARNP)

If you have questions, please contact Iowa Medicaid Provider Services or the appropriate MCO:

Iowa Medicaid Provider Services for FFS members:

- Provider services: 1-800-338-7909
- Provider email: imeproviderservices@dhs.state.ia.us

Amerigroup Iowa, Inc.:

- Provider services: 1-800-454-3730
- Provider email: iowamedicaid@amerigroup.com
- Website: <https://providers.amerigroup.com/ia>

Iowa Total Care:

- Provider services: 1-833-404-1061
- Provider email: Providers may send email using their account on the ITC website.
- Website: <https://www.iowatotalcare.com>

Provider Project Funding Request



CICS
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THIS APPLICATION IS A PUBLIC DOCUMENT AND AS SUCH CAN BE REPRODUCED AND DISTRIBUTED FOR THE PUBLIC.

Provider Name: Easterseals Iowa Tax ID: 42-0707100

Provider Address: 401 NE 66th Avenue Request Date: _____
Des Moines, IA 50313

Name of person submitting request: Tony Raymer, LISW, RPT-S Title: Director, Brain Health

Phone: 515-309-2368 Email: traymer@eastersealsia.org

Project Type: New Service Service Expansion Capital Expense
 Training & Education Outside Expertise Recruitment & Retention

1. Identify the population groups that will be covered under this project from the population groups that CICS is allowed to fund: Mental Health/Brain Health Intellectual Disability Developmental Disability Brain Injury

2. Which ages will this project serve? Children ages 12 to 17 and their families/caregivers

3. Do other entities provide this service in any of the areas proposed for coverage? Yes No

4. Does this service require accreditation or licensure? Yes No
If yes, provide proof of licensure/accreditation or application status for licensure/accreditation.

5. Do you have comprehensive general liability insurance of not less than \$1,000,000 per occurrence and \$2,000,000 aggregate? Yes No
If yes, provide copy of proof of insurance. If no, proof of insurance may need to be obtained in order for CICS to contract for services.

6. Has your agency experienced an adverse action affecting your ability to implement programs or services? Yes No

7. Are you currently tracking outcomes for other programs? Yes No

8. What is your plan to track outcomes for this project?
MST Services Inc. requires outcomes tracking, costs for implementation of which and participation in data collection systems are included in this proposal and requests for ongoing sustainability funding.

9. Do you have a quality improvement practice? Yes No

10. Will this project use an evidence-based practice or promising practices? Yes No

11. If you answered yes to question 10, which practice will be utilized? Multisystemic Therapy
12. If your project is successful, is there potential for growth? What is your plan for accommodating that growth?
The current project is to fund a team of up to 4 therapists, if future funding is available the program could grow to a second team of 4 therapists with one supervisor. It is the hope of Easterseals Iowa that if the program proves successful to grow to a second team focused on youth with Intellectual Disability or a team focused on youth with Autism Spectrum Disorder.
13. Identify the line item this project would be covered under as it relates to the CICS Annual Service and Budget Plan. The CICS Annual services and budget plan can be found at <https://www.cicsmhds.org/resources/cics-forms-and-documents/>
05373 Prevention or alternatively Core Evidenced Based Tx

Checklist of items to include:

- Agency balance sheets for the last 3 years
- Proof of comprehensive general liability insurance
- Proof of accreditation and licensure to provide services, if applicable
- Logic Model
- Detailed Project Budget
- Capital Project Budget, if applicable
- Documentation of existing partnership for any projects that include a collaborating partner

Project Name	Item or Service Funding is Being Requested For	Total Cost	Provider Funding Amount	Regional Funding Requested	Project Start Date	Project End Date
Multisystemic Therapy	Start up costs for MST	\$142,535.25	\$165,720.25	\$142,535.25	2/1/2024	6/30/2024

You may be contacted by CICS to discuss this request. CICS will notify you of the decision on funding in writing with stipulations for approval if any, or reasons for denial if applicable.

CICS Use Only

Approved Denied

In CSN? Yes No CSN ID# _____

Decision summary:

Signature _____ Date _____



CICS

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Executive Summary

Introduction: Elevate launched as a CCBHC in 2020. They began providing services to Black Hawk County and the surrounding area. They now are providing mobile crisis in 20 counties, community-based crisis stabilization in 20 counties, youth diversion services in 8 counties, embedded liaison with Waterloo Police Department, IRSH, and Provider Prevention and Support Services Program (PPSS) in all 99 counties. Elevate works with other MHDS regions for core mandated services and are looking to expand their services into CICS. They opened an IRSH site in Waterloo in the fall of 2023. This site has been formally designated by County Social Services region and HHS. IAC definition of IRSH states: “*Intensive residential service homes*” or “*intensive residential services*” 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.” The purpose of intensive residential services is to serve adults with the most intensive severe and persistent mental illness conditions who have functional impairments and may also have multi-occurring conditions. Intensive residential services provide intensive 24-hour supervision, behavioral health services, and other supportive services in a community-based residential setting.

Proposed Project:

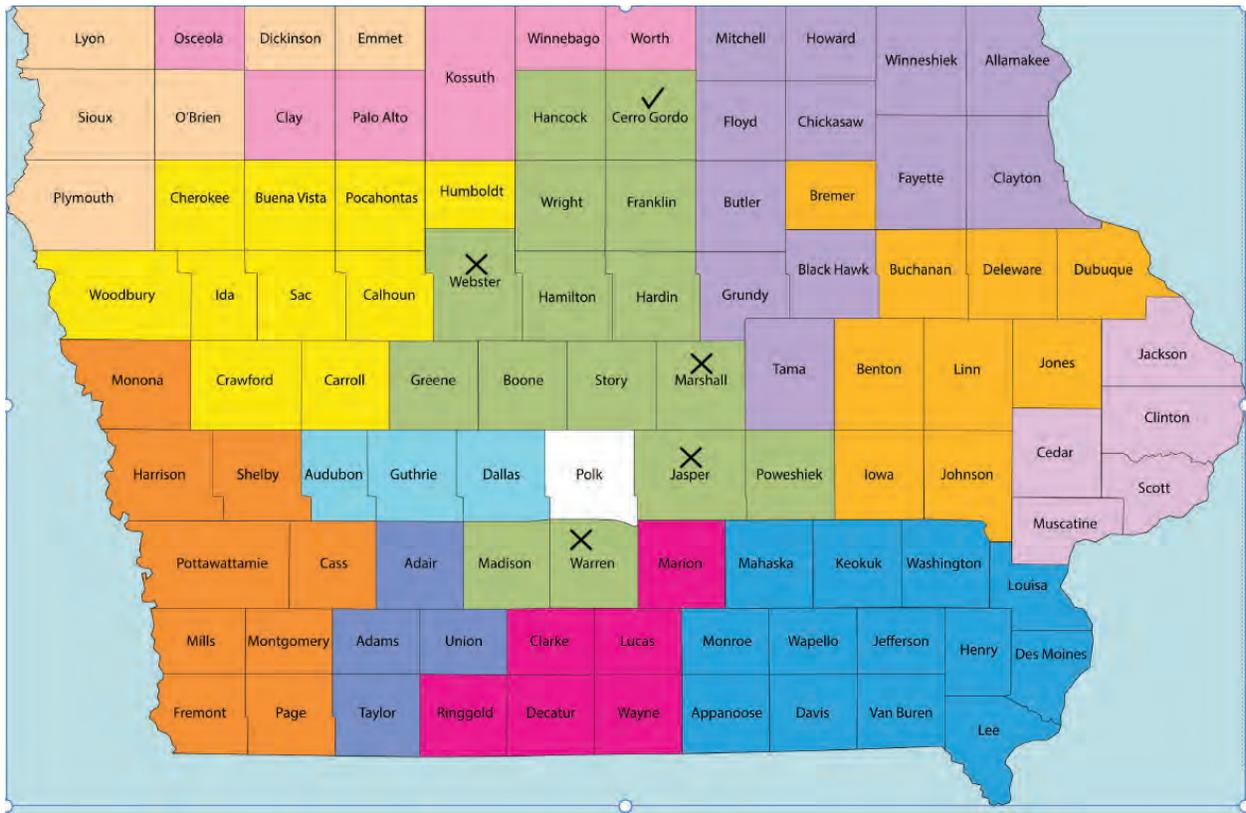
Elevate is submitting proposals for four separate IRSH sites within CICS region. Those locations are Fort Dodge, Marshalltown, Indianola, and Newton. The communities chosen were chosen based on communities that have expressed a need to increase services in their area or a location within the region where we have not developed a lot of new services. Elevate is requesting funding for the capital and start-up for the project. The proposed budget identifies they will be able to break even for services with an average census of 3.5 clients per day. CICS would develop the contract like the one with 43 North Iowa for IRSH. We would give them a percentage of the funds up front as startup funds. The whole project would be funded based on drawdown once the work is completed. Since Elevate recently went through the designation process with HHS for their site in Waterloo, we would be able to benefit from utilizing some of the documentation for these designations as well. We anticipate this would speed up the process of designation and approval from HHS. Elevate will use PRK builders for all four sites. They specialize in medical model homes and have expertise in providing safe inclusive communal living. Each home will be a four-bedroom home with an option of a fifth bedroom if needed. The homes are set up to cater to individuals being supported by direct support professionals but also in a way that they assume the look of other newly built homes in communities. Homes built in this manner give us flexibility to who they serve too. If in the future the need arises to serve other populations in those homes, it should be set up to do so.

Recommendation: Planning and development is recommending the funding of all four sites. Access standards from HHS states regions are to work collaboratively to develop a minimum of 120 IRSH beds located throughout the state, and for an individual to be able to access IRSH within 120 minutes of their residence. These sites help increase that capacity by 16 beds (33 beds to 49 beds in the state). The geographical location also helps strategically place the beds throughout the region and state.

Total Project Cost	Fort Dodge: 993,000 Marshalltown:943,000 Indianola: 993,000 Newton: 993,000
CICS contribution	Fort Dodge: 993,000 Marshalltown:943,000 Indianola: 993,000 Newton: 993,000
Capacity Increase	Region: 4 IRSH beds to 16 beds State: 33 IRSH beds to 49 beds
Start Date	2/1/24
End Date	8/31/24
Population Affected	100% of CICS region



Prioritization Tool score	200
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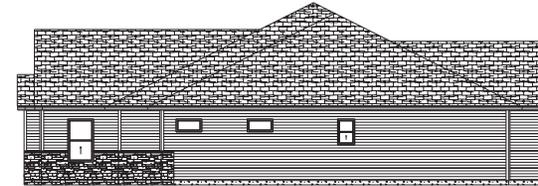




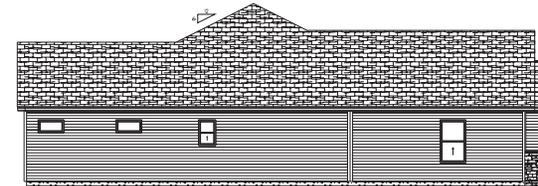
FRONT ELEVATION



REAR ELEVATION



RIGHT ELEVATION



LEFT ELEVATION

M-PLAN - REV. 4.0

DRAWN BY: BAH

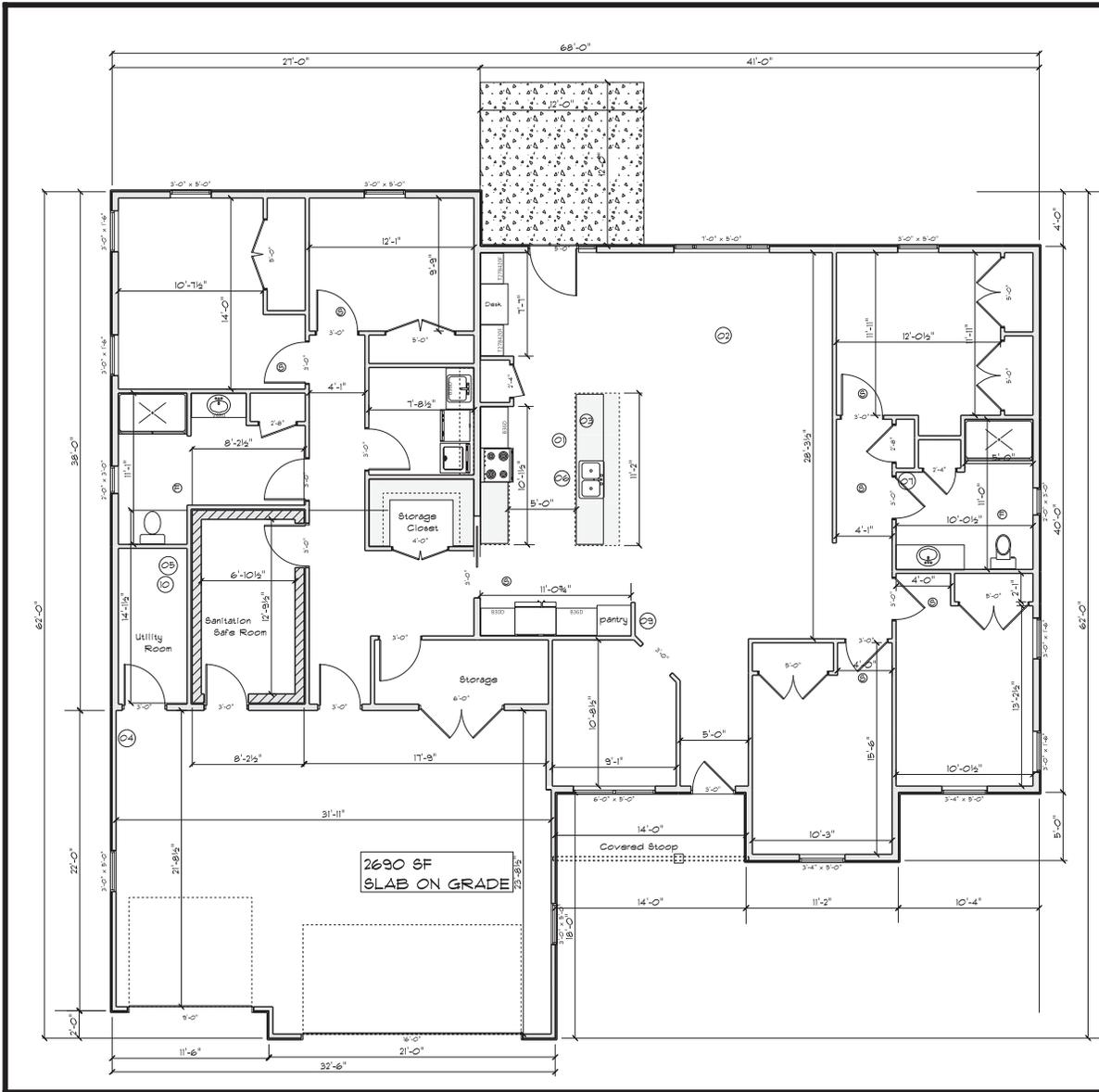
REVISION: 4.0

DATE: 05.24.2023

2690

PRK WILLIAMS BUILDING GROUP

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- Notes:
- 20 amp dedicated circuit in each bedroom for Medical bed/equipment.
 - LVP Plank Floor throughout
 - 8" block wall - solid cores in Sanitation/Storm shelter
 - Roll-up accessible bathroom vanities - center sink.
 - Locking doors on all bedrooms and med closet
 - Floor drains near the center of each bathroom.
 - 20 amp circuit in storage closet for future refrigerator.
 - Showers to have roll-in styis bases.
 - Add blocking for Grab bars and Assist handles near showers and toilet areas.
 - All exterior door thresholds to be low profile (accessible).
 - Zero Entry - All doors

- ① Touchless Faucets
- ② Solid Surface Floors
- ③ Granite Countertops
- ④ Central Vacuum system
- ⑤ Air Purification (Ionizer)
- ⑥ Water Filter (RO)
- ⑦ Touchless Light Switches
- ⑧ Antimicrobial door hardware
- ⑨ Air Quality Monitor
- ⑩ Whole House Humidifier
- ⑪ Low VOC products
- ⑫ Smoke / CO Detector
- ⑬ Exhaust Fan

PRK WILLIAMS BUILDING GROUP

M-PLAN - REV. 4.0

DRAWN BY: BAH

REVISION: 4.0

DATE: 05.24.2023

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IRSH Budget Template

(January 1, 2024 to December 31, 2024)

Position	Rate	FTE	Work Hrs	Hol Hrs	PTO Hrs	Total Hrs	Annual Wage	Ins (39¢/mo)	SOCER (6.2%)	MEDER (1.45%)	FUI (.60%)	UNEIA (1%)	Work Comp (2.5%)	Ret (3%)	Total
IRSH Director	\$ 31.25	1	1896	64	120	2080	\$ 65,000.00	\$ 4,752.00	\$ 4,030.00	\$ 942.50	\$ 390.00	\$ 650.00	\$ 1,625.00	\$ 1,950.00	\$ 79,340
Supervisors	\$ 23.00	2	1896	64	120	2080	\$ 95,680.00	\$ 9,504.00	\$ 5,932.16	\$ 1,387.36	\$ 574.08	\$ 956.80	\$ 2,392.00	\$ 2,870.40	\$ 119,297
Coordinator	\$ 21.00	9.5	1896	64	120	2080	\$ 414,960.00	\$ 45,144.00	\$ 25,727.52	\$ 6,016.92	\$ 2,489.76	\$ 4,149.60	\$ 10,374.00	\$ 12,448.80	\$ 521,311
RN	\$ 35.00	0.1	1896	64	120	2080	\$ 7,280.00	\$ 475.20	\$ 451.36	\$ 105.56	\$ 43.68	\$ 72.80	\$ 182.00	\$ 218.40	\$ 8,829
MOD	\$ 100.00		52				\$ 5,200.00								\$ 5,200
Total															\$733,976

Capital Budget	Fort Dodge	Indianola	Marshalltown
Consturction	\$ 700,000	\$ 700,000	\$ 650,000
Lot	\$ 40,000	\$ 40,000	\$ 40,000
Furniture	\$ 50,000	\$ 50,000	\$ 50,000
	\$ 790,000	\$ 790,000	\$ 740,000
Start-up	\$ 183,000	\$ 183,000	\$ 183,000
Project Development	\$ 20,000	\$ 20,000	\$ 20,000
	\$ 203,000	\$ 203,000	\$ 203,000
Total	\$ 993,000	\$ 993,000	\$ 943,000

Phone	\$ 100.00	12	Mo	\$1,200
Mileage	\$ 1,000.00	12	Mo	\$12,000
EMR	\$ 120.00	12	Mo	\$1,440
IT Hardware	\$ 1,500.00	4	Each	\$6,000
Marketing	\$ 200.00	12	Mo	\$2,400
				\$23,040
				Total Direct
				\$757,016
				Indirect
				\$227,105
				Total Budget
				\$984,121



CICS

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Executive Summary

Introduction: Optimae LifeServices provides a continuum of care to 1,581 individuals receiving Home and Community Based Services across 40 counties in Iowa. This continuum ranges from Nursing Facility, Residential Care Facility, Site Home, Community, Home Health, Behavioral Health and Rehabilitation services. Providing services in this way allows Optimae to uniquely assist individuals through their recovery journey. The largest of these programs is the site home program and is in the highest demand for individuals wanting to live in their communities. CICS and Optimae have worked closely together over the years as CICS staff worked on decreasing the number of individuals we have in care facilities and placing them in community-based sites. Optimae would like to continue to expand on their services provided and open an IRSH site within CICS region. Specifically, they are looking at the Ames area. IAC definition of IRSH states: “*Intensive residential service homes*” or “*intensive residential services*” 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.” The purpose of intensive residential services is to serve adults with the most intensive severe and persistent mental illness conditions who have functional impairments and may also have multi-occurring conditions. Intensive residential services provide intensive 24-hour supervision, behavioral health services, and other supportive services in a community-based residential setting.

Proposed Project:

Optimae LifeServices will develop an Intensive Residential Service Program with its first initiative being to open a 4-bed IRSH site. Clients will be accepted into the program according to the requirements of No Reject, No Eject per Iowa Code. Services will be provided 24 hours a day, 365 days a year and the services and support goals will be determined on an individualized basis. Optimae is looking at purchasing an existing home in an integrated community neighborhood for the site. Since IRSH is a new service for Optimae, we have begun working on a timeline on the development of the service as well as the acquisition of staff and property.

Implementation Plan

January 2024

- Hire the IRSH Director – begin training

February 2024

- Hire the IRSH Manager – begin training
- Hire Intensive Residential Support Professional – begin training
- Begin look at homes within the community to purchase and will meet the needs of the customers we will be serving
- Begin weekly planning meetings with CICS representatives, MCO representatives, DHS representatives, Optimae Behavioral Health clinical support person, Eyerly Ball/Unity Point as needed, and other stakeholders as needed
- Begin scheduling meetings with entities and providers in the community who will be supporting these individual’s success including but not limited to law enforcement, local hospitals and outpatient clinics, representatives from the mental health court, access center, crisis stabilization centers, etc.

March 2024

- Continue the Hiring Process
- Close on a home in the community
- Continue Planning Meetings
- Continue outreach initiatives with community entities and providers we will partner with for this program and the customers to be successful
- Establish the Referral Process

April 2024

- Start accepting referrals to the program
- Purchase needs for the home (i.e., furniture, cleaning supplies, appliances as needed, bedroom furniture as needed, cooking utensils and cook ware, other items as needed)
- Start and finish any home remodeling needs if applicable
- Continue planning meetings

May 2024

- Tour of the home for all interested parties
- Start moving in residents and possibly stagger this throughout the month and into the first part of June if needed

Recommendation: Planning and development is recommending the funding of this site. Access standards from HHS states regions are to work collaboratively to develop a minimum of 120 IRSH beds located throughout the state, and for an individual to be able to access IRSH within 120 minutes of their residence. This site would increase the capacity of beds for the region and the state by four beds. As we are beginning Mental Health Court in Story County, IRSH would also be a benefit to individuals that would benefit from this level of service as part of their alternative to jail or prison placements.

Total Project Cost	420,000
CICS contribution	420,000



Capacity Increase	Increase by 4 IRSH beds to help meet the access standard of 120 beds statewide (33 beds statewide at the end of 2023)
Start Date	2/1/24
End Date	6/30/24
Population Affected	100% of CICS region
Prioritization Tool score	200



Intensive Residential Services Proposal

Optimae LifeServices

“At your side, On your side”

Eligibility

Optimae LifeServices offers comprehensive customer driven services, which encourages choice, empowerment, and community integration. Through employee ownership and fiscal responsibility, Optimae seeks to be a recognized leader in healthcare and human services, providing meaningful support and successful outcomes.

To date, Optimae LifeServices provides a continuum of care to 1,581 individuals receiving Home and Community Based Services across 40 counties in Iowa. This continuum ranges from Nursing Facility, Residential Care Facility, Site Home, Community, Home Health, Behavioral Health and Rehab services. Providing services in this way allows Optimae to uniquely assist individuals through their recovery journey. The largest of these programs is our site home program and is in the highest demand for individuals wanting to live in their communities. Even within the site home program we have varying levels of support so we can individualize the amount of services needed.

To meet the unique needs of each community Optimae partners with we have divided our company into six different regions. This allows us to specialize our services and meet the needs of the individuals in that community whether it be a rural or urban community. Due to this specialization we have identified needs in several of our regions and communities that could highly benefit from intensive mental health services. Optimae LifeServices is submitting a proposal to Central Iowa Community Services (CICS) to be approved for start up monies to open an intensive residential service home in Ames, IA.

Optimae LifeServices is enrolled with Iowa Medicaid Enterprise, is certified by the Department of Inspection and Appeals to provide residential care, is CARF accredited. Our CARF accreditation allow us to provide Job Development, Supportive Employment, and Community Integration services. Optimae has certifications of accreditation with Chapter 77 & 24.

Within the annual plan with CICS and DHS, Optimae LifeServices will develop an Intensives Residential Service Program with its first initiative being to open a 4-bed intensive residential service home. Customers will be accepted into the program according to the requirements of No Reject, No Eject per Iowa Code. Intensive care will be provided 24 hours a day, 365 days a year and the services and support goals will be determined on an extremely individualized basis.

As mentioned above, Optimae LifeServices meets all Iowa Provider requirement's and is enrolled with Iowa Medicaid Enterprise and recognized as an approved provider of HCBS services including habilitation waiver and support community living. Optimae Lifeservices agrees to provide the following:

1. Staffing 24hrs a day, 7 days a week, 365 days a year
2. Maintain a minimum staffing ratio of one staff to every two and one-half residents. Staffing ratios shall be responsive to the needs of the customers served at any given time.
3. Optimae will ensure all staff members have the following minimum qualifications (a) two years of experience working with individuals with mental illness and multi-occurring conditions, (b) a high school diploma
4. Optimae will ensure that within the first year of employment, staff members will complete 48 hours of training in the mental health and multi-occurring conditions. During each consecutive year of employment, staff members shall complete 24 hours of training in mental health and multi-occurring conditions. Staff training shall include, but is not limited to (a) Applied Behavior

Analysis, (b) Autism Spectrum Disorder, (c) Brain injury, (d) Crisis Management and De-Escalation, (e) Motivation Interviewing, (d) Psychiatric Medications, (e) substance use disorders and treatment, (f) Other mental health diagnoses and conditions present in this population being served.

5. Optimae will provide coordination with the individuals clinical mental health and physical health treatment team members and other services and supports
6. Optimae will provide clinical oversight by a mental health professional. The mental health professional shall review and consult on all behavioral health service provided to the customer and any other plans developed for the customer. This may include but is not limited to customer service plan goals, behavior modification plans, crisis plans, safety plans, etc.
7. Optimae currently has a cooperative agreement with Eyerly Ball/Unity Point, an outpatient mental health provider, to ensure timely access to outpatient mental health services including but not limited to ACT and substance abuse treatment.
8. Optimae currently has its own behavioral health outpatient clinic and will have an identified clinician attend all weekly clinical rounds to review how each customer is doing and determine if any modification in service plans, treatment plans, or staffing need to occur.
9. The home will be located in a neighborhood setting to maximize community integration and natural supports.

The IRSH home operated by Optimae LifeServices will serve adults with the most intensive severe and persistent mental illness conditions who have functional impairments and may also have multi-occurring conditions.

Staffing

Optimae LifeServices agrees to meet the staffing requirements for being an Intensive Residential Service Home:

1. Staffing 24 hours a day, 7 days a week, 365 days a year for eligible customers
2. Maintain a staffing ration of one staff to every two and one-half residents with opportunities for lower ratios when needed
3. Staff will have at least two years of experience and a high school diploma
4. Staff members will complete 48 hours of training in mental health with multi-occurring conditions in one year
5. Ongoing training will consist of 24 hours per year

Staffing Roles

The IRSH Program will include the following staff roles: Intensive Residential Service Home Director, Intensive Residential Service Home Manager, and Intensive Residential Support Professionals.

We posted for the IRSH Director the first week of the New Year.

The IRSH Director will play a key role in the development of this program and the daily oversight of the provision of quality services and supports to customers living in the IRSH Home. He/She/They will facilitate the person-centered planning process, oversee the referral process, facilitate clinical rounds and initiate case consultation discussions after incidents that present any safety concerns for the customer or other involved in the provision of services, monitor and track employee training, hire employees for the IRSH Program, and collaborate with the behavioral health, home health, and occupational therapy departments.

The **IRSH Director** has an overall responsibility for the management/coordination and implementation of services in the residential IRSH home. All of the following duties are essential unless otherwise noted:

- Develop and monitor a budget, meet determined financial goals by prudent fiscal management of expenses and revenues, and monitor billing practices.
- Establish a system to ensure that services are meeting consumer needs and desires in accordance with Optimae LifeServices mission and principles.
- Organize and monitor a system for the timely admission or discharge of consumers including the removal of internal barriers to the process.
- Implement personnel policies and procedures in a manner consistent with Optimae LifeServices manuals and handbooks.
- Ensure services meet and exceed all regulatory credentialing and accrediting standards including adequate records for consumers and finances. Solicit and review quality assurance feedback from consumers, staff, and funders including data about consumer outcomes. Design, measure, and evaluate the improvements needed and accomplishments recognized.
- Considerable knowledge of the principles, practices, methods, and equipment of IRSH home needs when applicable.
- Coordinate supervisory staff to establish a system and process that creates a valued and motivated workforce that recognizes and utilizes team building principles.
- Establish and assure a system for recruiting, training, evaluating, and developing staff. Coaching team members by training staff to provide and document individualized, ethical, and appropriate services which enhance the consumer's sense of autonomy, dignity, self-esteem and efficacy.
- Attend and at times help in the creation of competency-based trainings within the areas of autism spectrum disorders, brain injury diagnosis, crisis management and de-escalation, mental health diagnoses, motivational interviewing and substance use disorders.
- Must complete 48 hours of competency-based training in mental health and multi-occurring conditions within the first year of employment.
- Must complete 24 hours of competency-based training in mental health and multi-occurring conditions every year thereafter.
- Develop and implement a marketing plan including new referrals for all services.
- Implement a plan for successful community and funder relations.
- Ensure that Optimae LifeServices property and equipment are managed in a cost-effective method.
- Assist with resident transports for scheduled appointments and outings when applicable.
- Provide services when necessary to ensure that consumer's needs are met.
- Provide on-call support by carrying a cell phone when service needs dictate.

The IRSH Manager plays a critical role in ensuring service stability for the program through the effective execution of daily operations of the IRSH Home. He/She/They will be responsible for coordinating staffing patterns, leads on-site training of new staff, participate on an on-call rotation with the IRSH Director, ensures our customers daily needs are being met. The IRSH Manager will also ensure that all policies and procedures are being followed and met.

The **IRSH Manager** has an overall responsibility for the management/coordination and implementation of services in the residential IRSH home. All of the following duties are essential unless otherwise noted:

- Ensure that the programs budget is being spent in alignment with its needs and that we are meeting our predetermined financial goals by working with the IRSH director on implementing these goals and processes.
- Ensure that services are meeting consumer needs within the home and the communities in which the customers are being served in accordance with Optimae LifeServices mission and principles.
- Ensure services meet and exceed all regulatory credentialing and accrediting standards including the completion of adequate records and documentation for the customers we serve.
- Considerable knowledge of the principles, practices, methods, and equipment of IRSH home needs when applicable.
- Create a valued and motivated workforce that recognizes and utilizes team building principles.
- Provide leadership and guidance to team members working in the home by training staff to provide and document individualized, ethical, and appropriate services which enhance the consumer's sense of autonomy, dignity, self-esteem and efficacy.
- Must complete 48 hours of competency-based training in mental health and multi-occurring conditions within the first year of employment.
- Must complete 24 hours of competency-based training in mental health and multi-occurring conditions every year thereafter.
- Ensure that Optimae LifeServices property and equipment are managed in a cost-effective method.
- Assist with resident transports for scheduled appointments and outings when applicable.
- Provide services when necessary to ensure that consumer's needs are met.
- Provide on-call support by carrying a cell phone when service needs dictate.

The Intensive Residential Support Professional is a critical provider of quality supports to the customers living in the intensive residential service home. He/She/they is responsible for helping customers learn and practice skills to help them prepare to live as independently as able and in the least restrictive environment within their communities of choice. These team members are responsible for implementing the individual service plans, facilitating natural supports, and ensuring that individuals have the support they need to meet their goals.

The **Intensive Residential Support Professional** is overall responsible for the provision of services and supports and ensuring that the customer's needs are being met.

- Support customers in achieving personal goals of their own choice
- Follow the service plan and use it as a guide to deliver services
- Recognize and document goal progress and relevant personal interventions in an objective, clear and brief manner
- Legal ability to drive (including obtaining insurance) and use of your personal vehicle may be an integral aspect of service delivery
- Support and develop living, social, and learning environments where customers can interact and build relationships of their choosing
- Support customers as they identify and build natural supports for their needs
- Advocate for our customers while promoting role recovery/discovery to others
- Set up timely appointments and meetings and attend them as scheduled
- Know the available local community resources and reinforce their use
- Understand and maintain privacy and demonstrate respect
- Address emergencies as they arise and use appropriate crisis intervention as needed
- As needed, support our customers with their personal hygiene and health needs in a respectful and dignified manner; this may occasionally include cleaning up urine, feces, or vomit from people or property
- Demonstrate good role modeling for people we serve
- Be non-authoritarian when providing services and working with peers and collaterals
- Be active in individual and team problem solving
- Pro-actively use supervisor and other staff as a support and as a resource for information

- Act in a professional manner (respectful, tactful, and objective) without personal attacks on others
- Be flexible as customer needs, emotions and schedules change; this may include working evenings, weekends, and holidays
- Meet multiple demands simultaneously and efficiently with little supervision
- Consistently finish assigned tasks within designated time frames
- Complete and turn in daily contact notes, time sheets, and expense claims on time
- Complete reports and all required paperwork within designated times
- Attend regular coaching sessions to develop skills, participate in annual evaluations, and attend scheduled mandatory meetings
- Complete orientation and training as required, in a timely manner, based on accredited regulation and/or Iowa Statute.
- Responsible for deep cleaning and sanitizing of the physical home each shift.
- May be responsible for food preparation of each meal and daily snacks as needed.
- Provide support to customers to complete ADL's include hygiene and bathing as needed.
- Complete a department approved med aid course and passed a department approved med aide examination administered by a nurse.
- Knowledge of basic first aid

Staffing Qualifications

The **Intensive Residential Service Home Director** will have

EDUCATION & WORK EXPERIENCE

- Must have a Bachelor's degree or at least 10 years of related experience in the field as a director.
- Must have at least 5 years of experience in the Human Service or related field.
- Must have considerable knowledge and training in the following areas:
 - Crisis Prevention and Intervention
 - C3 De-escalation
 - Mental Health First Aide
 - Positive Behavioral Supports
 - Trauma Informed Care
 - Motivational Interviewing
 - Mental Health Diagnoses, Symptomology and Treatment
- Must have the following knowledge, skills, and abilities:
 - Willingness to learn the requirements of eligibility for admitting consumers to service settings.
 - Ability to develop, implement, and achieve financial goals.
 - Considerable knowledge of nursing, social case work theory, or psychiatric rehabilitation practices, and their application to people using services.
 - Knowledge of techniques, methods, and procedures used in acquiring information with reference to service delivery and meeting regulatory requirements.
 - Good knowledge of sanitary principles and practices.
 - Ability to interview applicants for employment.
 - Ability to establish and maintain positive working relationships with consumers, their families and friends, staff, funders, collaterals, regulatory agency representatives, and the general public.
 - Ability to communicate well in English, both verbally and in writing.
 - Ability to plan, organize, and supervise the work of staff.

The **Intensive Residential Service Home Manager** will have

EDUCATION & WORK EXPERIENCE

- Must have an Associate's degree or at least 7 years of related experience in the field as a Manager.
- Must have at least 3 years of experience in the Human Service or related field.
- Must have the following knowledge, skills, and abilities:
 - Knowledge of techniques, methods, and procedures used in acquiring information with reference to service delivery and meeting regulatory requirements.
 - Good knowledge of sanitary principles and practices.
 - Ability to interview applicants for employment.
 - Ability to establish and maintain positive working relationships with consumers, their families and friends, staff, funders, collaterals, regulatory agency representatives, and the general public.
 - Ability to communicate well in English, both verbally and in writing.
 - Ability to plan, organize, and supervise the work of staff.
- Knowledge and training in the following areas is preferred:
 - Crisis Prevention and Intervention
 - C3 De-escalation
 - Mental Health First Aide
 - Positive Behavioral Supports
 - Trauma Informed Care
 - Motivational Interviewing
 - Mental Health Diagnoses, Symptomology and Treatment

The **Intensive Residential Support Professional** will have

EDUCATION & WORK EXPERIENCE

- High school diploma or GED Preferred.
- Must have at least 2 years of experience in the Human Service or related field.
- Knowledge and training in the following areas is preferred:
 - Crisis Prevention and Intervention
 - C3 De-escalation
 - Mental Health First Aide
 - Positive Behavioral Supports
 - Trauma Informed Care
 - Motivational Interviewing
 - Mental Health Diagnoses, Symptomology and Treatment
- Medication Management Certification Required (In house training available upon hire)

Community Partnerships and Integrated Service Delivery Model

Optimae has been providing service in the Ames community since May of 2015. During this time, we have formed long-term partnership with the following organizations: Iowa Vocational Rehabilitation Services, Central Iowa Community Services, Eyerly Ball/Unity Point outpatient clinic, etc. We know how important it is for all Optimae staff to have good working relationships with other area providers to ensure our customer's needs are met and to increase the success of all customers to live as independently as possible in the communities of their choice and have meaningful lives. Collaborations and the coordination of services amongst all of is imperative for the provision of quality services, and at times, continuity of care.

Optimae embraces the importance of an integrated service delivery model which is holistic in nature. This does not only include the integration of Optimae services with the services and supports from other entities and providers in the surrounding communities, but also the integration of internal service divisions including Optimae Behavioral Health Service, Optimae Home Health Services, and Optimae Occupational/Rehabilitation services.

Intensive Residential Service Home Operations

Intensive Residential services provide 24-hours supervision, behavioral health services, home health services (if eligible), occupational/rehabilitation services (if eligible), and other supportive services in a community based residential setting. We believe that with skilled, experienced, and highly trained staff members in conjunction with intensive psychiatric support we will see a reduction in inpatient hospitalizations, frequent emergency room visits, involvement from law enforcement, and decrease in incidents that could lead to incarceration. Overtime these customers will increase their participation in community activities, seek and obtain employment, increase peer supports, and live meaningful lives.

For these intensive residential service homes to be successful, we identified the need for it to be a stand-alone program. The infrastructure of this program will include an IRSH Director, an IRSH Manager per home, and 6 FTE and 2.4 PTE Intensive Residential Support Professionals (ratio of 2 staff to 2 customers at all times). At this time, the IRSH Director will report directly to the Regional Director and/or the Chief Operating Officer. There could be more FTE and less PTE depending on the schedule preferences of the Intensive Residential Support Professional at hiring. Finally, as this program grows and more IRSH Home are open for operation we will bring on an IRSH Coordinator at that time who will work directly under the IRSH Director.

The Schedule could look like the one depicted below. The IRSH Director and the IRSH Manager are always available to step in as needed, including the provision of services, especially when complex situations may require a higher staffing ratio. Additionally, we will have all Intensive Residential Support Professionals participate in an on-call rotation with the IRSH Director and Manager as backup on-call supports.

We will plan to cross train other staff that work in our Residential Care Facilities and in some of more challenging community based residential sites, so that these staff members are highly trained to provide back-up to the Intensive Residential Support Professionals. All staff that may provide back-up supports

will have the same training requirements in regards to the initial 48-hour training curriculum and then an additional 24 hours of training after the first year of employment.

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
IRSH DSP 12:00am-8:00am 12:00am-8:00am						
IRSH DSP 8:00am-4:00pm 8:00am-4:00pm	IRSH Site Manager	IRSH DSP 8:00am-4:00pm 8:00am-4:00pm				
	IRSH DSP 8:00am-4:00pm 8:00am-4:00pm					
IRSH DSP 4:00pm-12:00pm 4:00pm-12:00pm						IRSH DSP 4:00pm-12:00pm 4:00pm-12:00pm
	IRSH DSP 4:00pm-12:00pm 4:00pm-12:00pm					

Training Plan and Training Policy

Optimae LifeServices has a Knowledge Acquisition Team (KAT) that is comprised of a Knowledge Acquisition Director and Central Iowa as their own Knowledge Acquisition Specialist. The KAT team is a trusted resource that supports Optimae employees in building competencies by offering dynamic education and personal development. Always changing and adapting, the KAT team creates training containing effective tools to provide successful person-centered services.

The KAT team supports education needs of direct support professionals by continually adding our internal education offerings. There is currently over 24 hours of initial orientation training, and support professional have access to over 23 hours of internal continuing education. The KAT team will be adding over 12 hours of new continuing education training each year. In addition to this, the KAT team has trainers certified in de-escalation training such as C3 and CPI. We also hold NADSP Competency trainings for supervisors and will be holding them for direct support professionals in 2024.

Attached is an overview of Optimae LifeServices Training Policy that goes over the specific trainings our employees must have within their first year of employment. There are a lot of key trainings that will be a priority for our IRSH Team members.

Optimae Lifeservices has a Behavioral Health Outpatient Clinic who employees' clinicians that can be readily available to offer staff trainings on specific Mental Health Diagnoses and Multi-Occurring Conditions along with assisting the team in developing behavior intervention support plans. Additionally, we are actively hiring a Licensed Board-Certified Behavior Analysis to further support this program.

The State recently communicated their decision to partner with Trualta-IL to provide a universal learning system that will be accessible to Iowa Providers. It has been mentioned that one of the goals will be to identify needed training for staff working in IRSH homes and have these available in the Trualta-IL system for easy access and to assist in the completion of the initial 48hrs of training and the ongoing yearly 24hr training requirement. This will be a resource Optimae will utilize in the training initiatives for our IRSH team members.

Optimae has developed relationships with partners at I-TABS, specifically Susan Smith, who has been accessible to participate in case consultations pending her schedule and/or assist with trainings and behavioral intervention support plans. Optimae plan to continue to work with Susan and other I-TAB team members.

Optimae is still learning and gathering information from other providers regarding specific training they have found beneficial for their IRSH team members and once these are identified Optimae will use proposed training funds to access these which may include the need for staff traveling and an associated training cost. This may include but is not limited to Trauma Informed Care through Midwest Trauma Services Network, have a few key staff go through the training to become Certified Drug and Alcohol Counselors, and Certified Crisis Prevention and Intervention Specialists.

Implementation Plan

January 2024

- Hire the IRSH Director – begin training

February 2024

- Hire the IRSH Manager – begin training
- Hire Intensive Residential Support Professional – begin training
- Begin look at homes within the community to purchase and will meet the needs of the customers we will be serving
- Begin weekly planning meetings with CICS representatives, MCO representatives, DHS representatives, Optima Behavioral Health clinical support person, Eyerly Ball/Unity Point as needed, and other stakeholders as needed
- Begin scheduling meetings with entities and providers in the community who will be supporting these individual's success including but not limited to law enforcement, local hospitals and out patient clinics, representatives from the mental health court, access center, crisis stabilization centers, etc.

March 2024

- Continue the Hiring Process
- Close on a home in the community
- Continue Planning Meetings
- Continue outreach initiatives with community entities and providers we will partner with for this program and the customers to be successful
- Establish the Referral Process

April 2024

- Start accepting referrals to the program
- Purchase needs for the home (i.e., furniture, cleaning supplies, appliances as needed, bedroom furniture as needed, cooking utensils and cook ware, other items as needed)
- Start and finish any home remodeling needs if applicable
- Continue planning meetings

May 2024

- Tour of the home for all interested parties
- Start moving in residents and possibly stagger this throughout the month and into the first part of June if needed

Upon meeting the requirements for eligibility, a customer's need for this level of support will be determined on an individual basis using person-centered planning with the goal to live independently in the community of their choice in the least restrictive environment.

These customers will be educated on opportunities for employment, job development, and other community activities such as community integration and pre-vocational services. The customers will be encouraged to participate in these opportunities as it provides them a valued role personally and in the community in which they live.

Outcomes

Optimae LifeServices agrees to work with the Region to contribute to the outcome measurement efforts. This will include assisting with the identification of key data to be collected, collection timelines, and evaluation measures and/or reports.

Optimae will submit a report and review of the program activities to the Region at least on an annual basis within 45 days of the end of the contract, however we do think a review of this program should occur more frequently and would propose on a quarterly basis as well as the annual report.

Budget/Budget narrative Attached

Provider Agrees that the Projected Cost Report shall be compared to the Actual Cost Report that shall be submitted within 45 days of the end of the contract and the contract shall be cost settled (purchase of a home, technology needs, site vehicle, training costs, two months of wages for the IRSH Team members as we are hiring, training, and preparing to open the house which we would prefer to have all team members on board two months in advance of the home openings, initial home supplies and miscellaneous needs).



CICS

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Contracts Signed by CEO

FY24 3 Year

43 North Iowa

Intensive Residential Service

Intensive Residential Service Remodel Startup Costs (end Date 3/31/24)

Intensive Residential Service Startup Service Costs (end Date 12/31/24)

FY24 Amendment

Berryhill

Care Coordination

MH Outpatient Therapy Trvl Costs-Hamilton & Wright

Planning & Management (non-client related)

FY24 Rate Adjustment

Together We Can, Inc.

Peer Support

Project Authorization Request



CICS

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Provider: Rural Policy Partners Project Due Date: 10/31/2024

Address: 14202 Goodman Dr.

Urbandale, IA 50323

Please identify the project being requested in the boxes below.

Project Name:

Community Living Supports

Project Status:

Initial Project Request

Unit Type	Unit Rate	Start Date	End Date
Monthly	\$4,250.00	02/01/2024	10/31/2024
Total Cost:			\$38,250.00

**Please attach the project proposal to this form.
Provide additional information below:**

CICS Use Only

Decision: Approved Denied

Amount: _____

Other Stipulations:

COA Code: _____

CICS Signature

Date



January 18, 2024

Russell Wood
Chief Executive Officer
Central Iowa Community Services (CICS)
125 S. Kellogg Avenue
Ames, IA 50010

Mr. Wood,

Rural Policy Partners is pleased to present our proposal for strategic planning and provider engagement focused on best practices in developing coordinated and collaborative care systems. Our proposal outlines the specific support and guidance we will provide to the region, including the systematic, hands-on approach we will employ to help you achieve your goals. We propose a 9-month timeline, with a finalized memorandum of understanding (MOU) presented to you and the engaged provider stakeholders by October 2024.

We are confident in our ability to assist the region and engage stakeholders in making informed decisions regarding collaborative, coordinated, client-focused practices that serve individuals in care across the residential/community living continuum of care.

We look forward to future correspondence. Please feel free to reach out with any questions or concerns you may have.

Thank you for your consideration,

Jason Haglund, MS, CADC
Owner/Sr. Consultant
Jason@RuralPolicyPartners.com
515-450-3004

Scope of Project

We have formulated a project scope outlining objectives and deliverables to be accomplished within a nine-months time frame.

Project Objectives:

1. Facilitate meaningful and engaging dialogue among identified community residential/community living providers around best practices, cooperative care, and client-driven outcome measurement. Leveraging the framework developed for the virtual and networked access center model, we will assist providers in recognizing opportunities for client care improvement, particularly during transitions.
2. Evaluate existing clinical pathways, care models, structures, and policy/rules that impede active local provider collaboration and the transition of clients to appropriately matched levels of care that promote recovery.
3. Develop, with input from each provider partner, a memo of understanding (MOU) demonstrating commitment to ongoing collaborative care, cooperative communication, and the adoption of shared clinical pathway(s) by each participating provider organization. One measurable outcome of successful collaborative care includes reducing unnecessary interactions with law enforcement, emergency department visits, and patient hospitalizations.
4. Provide recommendations regarding the interest from participating providers in the development of programs and/or levels of care that may address gaps or enhance services for individuals facing mental health or substance use challenges.

Any additional challenges not covered above may be added in consultation with the CEO during the planning and goal-setting process.

Deliverables:

1. Facilitate stakeholder provider planning sessions (eight total in-person large group meetings) with a representative group of stakeholders from pre-selected organizations (March-October).
2. Conduct on-site focus groups with key provider stakeholder staff, including agency leadership teams, staff, and clinicians (ten new provider specific onboarding meetings) to gather input.
3. Maintain regular communication with CICS leadership, including monthly email updates and an option for monthly planning meetings to review upcoming agendas and prepare for planning sessions.
4. Identify a set of foundational measures to track coordination and the implementation of client-driven care across the care continuum.
5. Demonstrate a collaborative framework through a signed MOU from each provider, indicating a commitment to further collaboration, enhancing coordination, accessibility, and support for clients during transition through varying levels of care.

Approach:

We will leverage our knowledge of systems, codes, and rules to facilitate learning aimed at improving the quality of care to meet the behavioral healthcare needs of rural lowans. A series of in-person focus groups will be conducted to gain insights into how care is currently coordinated in a collaborative manner. The process will involve activities designed to build trust among providers throughout the region. We will visit each provider facility location to comprehend the unique contributions of each. Using this knowledge, we will present opportunities to transform care by implementing meaningful organizational-level changes that prioritize clients and establish a framework for seamless transitions between providers, as well as coordination across different levels of care, including ancillary services.

Timeline:

February

- Within two weeks of contracting, an in-person meeting with key CICS leadership staff occurs to review deliverables and establish meeting schedules.
- Schedule and invite providers to the March planning session/kickoff meeting.
- Schedule on-site meetings at each predetermined stakeholder organization with key leadership and clinical staff.

March

- Complete on-site meetings at each predetermined stakeholder organization with key leadership and clinical staff.
- Set and share the final schedule for all provider planning meetings.
- Facilitate provider planning session introduction and kickoff meeting (location TBD).

April-September

- Facilitate monthly provider stakeholder meetings. Send email reminders and gather RSVPs.

October

- Facilitate final provider stakeholder meeting.
- Review with group progress to date, MOU development, and next steps for collaborative care implementation.

TOTAL COMPREHENSIVE FEE AND COMPENSATION STRUCTURE

Rural Policy Partners has scoped the project thoughtfully, and we are prepared to offer the proposed professional services at the firm, fixed price of \$38,250.

The scope of service is nine months, to begin upon contract execution expected February 1, 2024. Rural Policy Partners will invoice at a monthly rate of \$4,250. Payment is due within 30 days of receipt of invoices. Travel, travel time, meeting meals and related expenses are included in this proposal. Meeting space will be provided by and facilitated by the region.

Cost Proposal Assumptions

- Both parties must approve all changes in the scope of work. Any changes of scope may result in a decrease or increase to the total contract amount.
- Consultant plans for in person interactions, stakeholder meetings, and travel when appropriate and possible. Should health and safety conditions, or any other unexpected events which endangers the health and safety of the team occur, those interactions and meetings may be provided via video or alternative communication means at the sole discretion of the Consultant.
- Research forms, surveys, and other tools are the intellectual property of Rural Policy Partners. A written notice approved by both parties is required for data or forms to be shared beyond the scope of this project.

Name of Firm: Rural Policy Partners, LLC
Street/ Mailing Address: 14202 Goodman Dr
City: Urbandale State: Iowa Zip: 50323

Jason Haglund

Jason Haglund (Jan 18, 2024 16:51 CST)

Jason Haglund, Owner/Sr. Consultant



CICS

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Proposal for Agency Collaboration

Objective: Facilitate seamless collaboration among agencies providing community living support for adults. Establish an environment of cooperation and effective communication, enabling agencies to align efforts with client-driven goals. Additionally, identify opportunities to enhance services and remove barriers hindering clients' recovery. Develop a group that provides clinical pathways to move clients between providers that enhance the ability to move clients between providers when client needs change while avoiding unnecessary interactions with law enforcement, emergency department visits, and inpatient hospitalization. Foster greater understanding of the needs and expectations of CICS in their role as an administrative entity.

Meeting Structure:

1. **Frequency:** Monthly meetings to ensure consistent communication and collaboration.
2. **Financial Incentive:** Agencies receive \$1,000 per meeting for participation and planning efforts and a one time payment of \$2,500 for completing an on site meeting with facilitators.

Meeting Agenda:

1. **Client-Centric Focus:** Emphasize strategies to improve client outcomes.
2. **Coordinated Planning:** Identify areas for collaboration to enhance overall client support for adult services.
3. **Problem-Solving Sessions:** Address challenges through brainstorming.
4. **Resource Sharing:** Share best practices, resources, and information.
5. **Progress Review:**
6. **System Collaboration:** Discuss seamless integration with the existing access center network for enhanced referral processes.

Benefits:

1. **Improved Service Delivery:** Holistic collaboration to enhance overall service quality.
2. **Enhanced Communication:** Foster inter-agency communication to better meet the needs of individuals served.
3. **Efficient Problem Resolution:** Collective brainstorming for quicker solutions to client-specific or system issues and resource optimization within current confidentiality requirements.

Implementation Timeline:

- **February:** Coordinate and plan the inaugural meeting.
- **From March onward:** Hold regular monthly meetings.

Conclusion: Establishing a collaborative framework with financial incentives aims to create an environment conducive for mental health and disability services agencies to better meet the needs of individuals and understand the requirements of federal, state, and local MHDS administrative entities. This initiative focuses on improving services and outcomes for clients as required by funders, with an emphasis on the development of methods to track and measure outcomes. The collaboration with the access center network enhances coordination, accessibility, and overall support throughout clients' recovery journeys.

Total Provider Incentive Amount Requested:

\$35,000 for on-site meetings.

\$112,000 for monthly meetings

Total: \$147,000

Tentative Provider List

43 North Iowa
 Access
 Capstone
 Christian Opportunity Center
 CIRSI
 Duncan Heights
 Eyerly Ball
 Imagine The Possibilities
 Lifeworks
 LSI
 One Vision
 Optimae
 Progress Industries
 Spring Harbor





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**Central Iowa Community Services
Provider and Program Participation Agreement Amendment No. 1**

1. This amendment is entered into this 1st day of January 2024 by and between Central Iowa Community Services (CICS) and NAMI, CI_(Provider), original parties to the agreement dated First day of July 2023.

2. In consideration of the mutual covenants herein made, the agreement is amended as follows: Attachment A is removed and replaced in its entirety with the following attachment A:

**NAMI, CI
ATTACHMENT A Effective 1/1/24
SERVICE DEFINITIONS AND RATES
FISCAL YEAR 2024**

Chart of Account	Service Description	Unit of Service	Rate
05373	Public Education and Awareness July 1, 2023 – June 30, 2024	Monthly	\$2,000.00
42366	Wellness Center (Drop In Center) July 1, 2023 – June 30, 2024	Monthly	\$8,403.00 Maximum for contract period \$100,836.00
45323	Family and Consumer Education / Support July 1, 2023 – June 30, 2024	Monthly	\$2,000.00



NAMI, CI
ATTACHMENT A Effective 1/1/24
SERVICE DEFINITIONS AND RATES
FISCAL YEAR 2024

OTHER TERMS:

Medicaid/MCO floor rate may be honored if higher than the CICS Contracted Rate. Please send documentation of the Medicaid/MCO rate to the Operations Officer for consideration of the rate adjustment. If the rate adjustment is approved by CICS this will be executed through a written document with the CICS CEO and the Provider with the effective date as the month following the receipt of the rate documentation. A CICS contract amendment will not be required in these situations.

For applicable services, Provider will meet Iowa Code or Administrative Code requirements.

Provider will ensure provider information is available in 211 and updated annually.

*For Wellness Center (Drop In Center) services at the time of monthly billing submission, provider will submit daily attendance log documentation and participant names for the month billed. Provider is encouraged to participate in quarterly meetings with other providers of similar services.

Funding for COA 42366: Wellness Center (Drop In Center) is for July 1, 2023 through June 30, 2024.

Provider and CICS agree to the deliverables as outlined in the attached Logic Model Objectives. Non-support group/non-class activities shall not be considered project deliverables. NAMI CI shall submit the attached tracking sheet with monthly billing. NAMI CI and CICS shall both identify at least one staff member to meet monthly to review progress on objectives, status of wellness center, and program delivery.

3. All other terms and conditions of the Agreement identified in the caption hereof shall remain in full force and effect except as specifically modified by this amendment. If there is conflict between this amendment and the agreement, the terms of this amendment will prevail.

This Agreement Amendment has been executed by the parties hereto, through their duly authorized officials.

Central Iowa Community Services:

NAMI CI.:

By: _____

By: _____

Print Name: _____

Print Name:

Print Title: _____

Print Title: _____

Date: _____

Date: _____



NAMI CI Logic Model

NAMI identifies that 1 in 5 individuals suffer from a brain health condition. 66% of those individuals are not receiving services, which translates into 154,000 Iowans as of 2021. Our plan of action is to get NAMI Connection Support Groups, NAMI Family Support Groups, NAMI Peer-to-Peer, and NAMI Family-to-Family classes to these individuals. These signature programs are evidence-based programs (for example NAMI Family-to-Family has demonstrated improvements in coping skills, problem-solving skills, and feelings of empowerment). Our services are free, and 29% of Iowans who did not receive mental health care skipped it because of the cost. Other barriers are lack of awareness about available services, stigma, and the cost of childcare.

Our objective is to achieve wellness and recovery through education and support. We will accomplish this by offering and maintaining NAMI Connection Support Groups, NAMI Family Support Groups, NAMI Peer-to-Peer, and NAMI Family-to-Family classes in our catchment.

Objective 1: Maintain a hybrid support group at La Luz Centro Cultural in Hampton in Franklin County

1. Offered monthly continuous.
2. New facilitator being trained on Jan 20th.
3. Second facilitator being identified by September 2024 (actual training subject to NAMI Iowa training schedule)
4. Success measured by survey outcomes.

Objective 2: Maintain a hybrid support group at The Roundhouse in Webster City in Hamilton County

1. First session was Dec 2023; offered monthly continuous.
2. Success measured by survey outcomes.

Objective 3: Establish and maintain a hybrid support group at the Catholic Church in Eldora in Hardin County. Complete NAMI Family-to-Family class at Friendship Club in Hardin County in Jan/Feb.

1. Meet with Deacon Rob Claypool at Catholic Church by Jan 30th.
 - a. Establish date and time for group by Jan 30th.
2. Create flyer / marketing by Feb 5th.
3. Begin group by Feb 28th.
4. Success measured by survey outcomes.

Objective 4: Maintain a hybrid support group at the Fort Dodge Library in Webster County by June 2024

1. Offered monthly; continuous.
2. New facilitator being trained on Jan 20th.

3. Success measured by survey outcomes.

Objective 5: Maintain a hybrid support group at The Rose Center in Boone in Boone

1. Offered monthly; continuous.
2. Success measured by survey outcomes.

Objective 6: Maintain existing hybrid support groups in Story County. Offer hybrid NAMI Peer-to-Peer classes in Ames by May 2024.

1. Offered every Thursday, every other Tuesday, and monthly; continuous.
2. Success measured by survey outcomes.

Objective 7: Maintain a hybrid support group at Together We Can in Marshalltown in Marshall County. Offer hybrid NAMI Peer-to-Peer classes in Marshalltown in April 2024.

1. Offered twice a month; continuous.
2. Success measured by survey outcomes.

Objective 8: Maintain a hybrid support group at Connections drop-in center in Newton in Jasper County.

1. Offered twice a month; continuous.
2. Current mentors trained as facilitators in NAMI Iowa's June 2024 training.
3. Success measured by survey outcomes.

Non-Meeting Activities

1. Identify and attend at least one human services / community services meeting in each of our counties in our catchment.
2. Distribute flyers advertising groups / class in mental health organizations, human services organizations, businesses that have community boards.
3. Seeking out opportunities for tabling events and places to present NAMI 101s.

Need

NAMI identifies that 1 in 5 individuals suffer from a brain health condition. 66% of those individuals are not receiving services. In 2021, 42% of Iowans reported to have symptoms of anxiety or depression and 129,000 Iowans reported having thoughts of suicide. There are approximately 300,000 people living in our counties, of which 240,000 are at least 18. The needs in the community are quicker access to mental health care, shorter wait times, and lower cost options. Our current capacity to offer services is NAMI Central Iowa has 18 trained facilitators and 5 trained teachers (collectively termed leaders) to utilize to offer support groups and classes. This pool of leaders, coupled with hybrid support groups and classes, will address these needs, and remove the barriers created by the needs.

Inputs

The Senior Program Director (fulltime) will lead this project under the direction of the CEO (fulltime). We also have a regional coordinator (fulltime) that will be utilized in Webster, Wright, Hamilton, Hardin, and Franklin counties. The senior program director and regional coordinator will be largely responsible for marketing, engaging stakeholders, finding participants, and recruiting future leaders. We have 18 trained leaders that will deliver the programs in our catchment area. Other external funding includes City of Ames and United Way of Story County.

Activities

Specific locations for support groups and classes have been identified and are listed in the objective for each county.

Resources needed for implementation are funds for stipends (\$25 per leader for support groups, \$250 per leader for an 8-week class) and mileage to pay leaders. All materials needed (data forms, surveys, worksheets, and course materials) will be printed and provided by NAMI Central Iowa.

NAMI Family-to-Family and NAMI Peer-to-Peer are each offered over 8 week two hours classes. NAMI support groups are offered at varied intervals (Story County has multiple weekly support groups. Franklin, Hardin, Marshall, Jasper will offer support groups every other week at the locations specified). Webster, Wright, Greene, and Boone will be offered monthly. However, by making them hybrid participants can attend support groups as often as they desire.

Outputs

Our services will increase support and education, along with resources. The service areas will be the 10 counties we currently serve. There are approximately 300,000 people living in our counties, of which 240,000 are at least 18. These adults will be eligible to receive our services and are our target audiences. Services will be delivered in areas identified in the objectives. The locations chosen were selected due to the proximity where people already gather are hopefully more likely to engage in services.

Outcomes

Increased awareness, offered knowledge, improved skills, change in how brain health conditions are viewed. Offers skills to change behaviors, conversation, and educate the power of words and how lived experience is a powerful tool to assist others on their wellness journey. Data forms, surveys, scorecards are ways NAMI CI measures outcomes. Likert scale surveys will be given to participants of support groups quarterly and for classes at the conclusion of the class) will address the following outcomes (sample of survey questions):

Support Groups:

1. Gives me practical information to help me deal with my problems or challenges.
2. Gives me a better understanding of the resources available in my community.

3. Has helped me make decisions about my own recovery.
4. Has produced positive changes in my recovery.
5. Has improved my decision making in regard to my mental health.
6. I have gained insight from shared experiences.

Classes:

Because of the NAMI Family-to-Family program I just attended I am better able to:

1. Recognize the signs and symptoms of mental health conditions.
2. Understand the type of services people with mental health conditions need.
3. Manage the stresses and negative impact that bias and discrimination against people with mental health conditions may cause.
4. Access the care and support services that I or my family member need.
5. This program was helpful for me.

Impact

Through education, support, and advocacy the long-range goal is to see lower completed suicides, individuals seeking treatment. Our classes/groups will provide a foundation in supporting families and educating them on how to communicate effectively and this could strengthen families long term.



Project Title:	Support, Educate, Advocate
Agency:	NAMI Central Iowa
<i>Attribute expenses and funding sources according to timeline. Materials or work purchased outside of this timeline is not eligible for reimbursement.</i>	
<i>Include funding from all other sources, including in-kind. Add columns as necessary for multiple funding sources.</i>	

Budgeted Expenses	Expense Narrative	Jan-24	Feb-24	Mar-24	Apr-24	May-24	Jun-24	Total	Anticipated Funding Source 1	Source 1 Anticipated Funding Amount	Anticipated Funding Source 2	Source 2 Anticipated Funding Amount	Anticipated Funding Source 3	Source 3 Anticipated Funding Amount	Total Revenues		
Stipends	Incentive to attract facilitators	\$1,408.33	\$ 1,408.33	\$ 1,408.33	\$ 1,408.33	\$ 1,408.33	\$ 1,408.33	\$ 8,449.98	ASSET	\$ 16,300.00	CICS	\$ 24,000.00	grants and donations				
Mileage	Reimburment	\$ 825.00	\$ 825.00	\$ 825.00	\$ 825.00	\$ 825.00	\$ 825.00	\$ 4,950.00									
Materials	Required business expense	\$ 492.83	\$ 492.83	\$ 492.83	\$ 492.83	\$ 492.83	\$ 492.83	\$ 2,956.98									
Training	Required business expense	\$ 540.00	\$ 540.00	\$ 540.00	\$ 540.00	\$ 540.00	\$ 540.00	\$ 3,240.00									
Advertising	Required business expense	\$ 416.67	\$ 416.67	\$ 416.67	\$ 416.67	\$ 416.67	\$ 416.67	\$ 2,500.02									
Rent	This expense is specific to programming. NAMI CI pays for two separate buidlngs. This number does not reflectt the WC. The amount paid in rent is the same for both buidlngs each year. This amount reflects just the admin office where we operate out of for programming.	\$2,100.00	\$ 2,100.00	\$ 2,100.00	\$ 2,100.00	\$ 2,100.00	\$ 2,100.00	\$ 12,600.00									
Repairs/Maintenance	Required business expense	\$ 41.56	\$ 41.56	\$ 41.56	\$ 41.56	\$ 41.56	\$ 41.56	\$ 249.36									
Fundraising Expense	Increases community Awareness	\$ 650.00	\$ 650.00	\$ 650.00	\$ 650.00	\$ 650.00	\$ 650.00	\$ 3,900.00									
Due/ Subscriptions	These expenses are allocated for Chambers we join, groups we join that require dues, these said items help support us in our goal to reach folks in our catchman area. This will vary throught out the year.Our hope is to also use this platform to increase attendace in hybrid/ Virtual and in person groups.	\$ 83.33	\$ 83.33	\$ 83.33	\$ 83.33	\$ 83.33	\$ 83.33	\$ 499.98									
Misc	unexpected expense	\$ 12.50	\$ 12.50	\$ 12.50	\$ 12.50	\$ 12.50	\$ 12.50	\$ 75.00									
Audit	Required business expense per contract agreement with funders	\$ 500.00	\$ 500.00	\$ 500.00	\$ 500.00	\$ 500.00	\$ 500.00	\$ 3,000.00									
SALARY/WAGES																	
CEO	90 % of this postion focuses on programming	\$6,145.83	\$ 6,145.83	\$ 6,145.83	\$ 6,145.83	\$ 6,145.83	\$ 6,145.83	\$ 36,874.98									
Admin Assistant	This position is currently responsible for 20% of programming focus. This person handles all programming billing, assists in marketing of programs, attends meetings surrouding programming, she supervises the admin assitant who manages programming. (this is one person)	\$3,382.66	\$ 3,382.66	\$ 3,382.66	\$ 3,382.66	\$ 3,382.66	\$ 3,382.66	\$ 20,295.96									
Program Director	100 % of this position focuses on programming n our region	\$4,583.33	\$ 4,583.33	\$ 4,583.33	\$ 4,583.33	\$ 4,583.33	\$ 4,583.33	\$ 27,499.98									
Regional Coordinator	100 % of this position focuses on programming in our region	\$4,032.00	\$ 4,032.00	\$ 4,032.00	\$ 4,032.00	\$ 4,032.00	\$ 4,032.00	\$ 24,192.00									
Account payable/Rec/WC Director	20 % focuses on programing.This position is currently responsible for 20% of programming focus. This person handles all programming billing, assists in marketing of programs, attends meetings surrouding programming, she supervises the admin assitant who manages programming. (this is one person)	\$3,515.83	\$ 3,515.83	\$ 3,515.83	\$ 3,515.83	\$ 3,515.83	\$ 3,515.83	\$ 21,094.98									
\$0.00																	
Total Program Budget:									\$ 172,379.22	Anticipated Revenues:	ASSET	\$16,000.00	CICS:	\$24,000.00	Other Grants and Donations:	Not Stated	Total Known Revenues: \$40,000

Month:

Boone: Maintain a hybrid support group at The Rose Center in Boone in Boone			
SUPPORT GROUPS	Group or Class Location	Number of Participants not including Facilitators	Dates
CLASSES			
Surveys			
Franklin: Maintain Monthly Group at La Luz			
SUPPORT GROUP	Group or Class Location	Number of Participants not including Facilitators	Dates
CLASSES			
Surveys			
Greene: No Objective Associated			
SUPPORT GROUPS	Group or Class Location	Number of Participants not including Facilitators	Dates
CLASSES			
Surveys			
Hamilton: Maintain a monthly hybrid support group at The Roundhouse in Webster City			
SUPPORT GROUPS	Group or Class Location	Number of Participants not including Facilitators	Dates
CLASSES			
Surveys			
Hardin: Establish and maintain a hybrid support group at the Catholic Church in Eldora. Complete Family to Family class at Friendship Club in Jan/Feb			
SUPPORT GROUPS	Group or Class Location	Number of Participants not including Facilitators	Dates
CLASSES			
Surveys			
Jasper: Maintain a hybrid support group at Connections drop-in center in Newton in Jasper County.			

SUPPORT GROUPS	Group or Class Location	Number of Participants not including Facilitators	Dates
CLASSES			
Surveys			
Marshall: Maintain a hybrid support group at Together We Can in Marshalltown in Marshall County. Offer hybrid NAMI Peer-to-Peer classes in Marshalltown in April 2024.			
SUPPORT GROUPS	Group or Class Location	Number of Participants not including Facilitators	Dates
CLASSES			
Surveys			
Story : Maintain existing hybrid support groups in Story County. Offer hybrid NAMI Peer-to-Peer classes in Ames by May 2024.			
SUPPORT GROUPS	Group or Class Location	Number of Participants not including Facilitators	Dates
CLASSES			
Surveys			
Webster: Maintain a hybrid support group at the Fort Dodge Library in Webster County			
SUPPORT GROUPS	Group or Class Location	Number of Participants not including Facilitators	Dates
CLASSES			
Surveys			

Wright: No Objective Identified			
SUPPORT GROUPS	Group or Class Location	Number of Participants not including Facilitators	Dates
CLASSES			
Surveys			

Central Iowa Community Services Provider and Program Participation Agreement

THIS PROVIDER AND PROGRAM PARTICIPATION AGREEMENT (“Agreement”), entered into this 1st day of January, 2024, is by and between Central Iowa Community Services (“CICS”) and The Bridge Home (“**Provider**”).”).

RECITALS:

A. CICS is a governmental entity organized under Chapter 28E of the Code of Iowa, governed by its Governing Board. Mental health and disability services are funded and administered by CICS within the scope and according to the criteria of the Regional Management Plan. CICS desires to contract with Provider to provide Covered Services for the benefit of CICS Individuals.

B. Provider is licensed, certified and/or accredited under the laws of the State of Iowa to provide mental health, intellectual disabilities, and/or developmental disability services and desires to contract with CICS to provide Covered Services for the benefit of CICS Individuals.

C. An effective service delivery environment should be based on individualized, person centered, strengths-based practices which are trauma informed, co-occurring capable, and culturally competent.

In consideration of the premises and promises contained herein, it is mutually agreed by and between CICS and Provider as follows:

SECTION 1 **Definitions**

Administrative Team: Community Service Directors of Region member counties.

CICS Governing Board: The board of CICS responsible for governing CICS.

CICS Individual: A person who is eligible and authorized to receive funding as defined in the Regional Management Plan as approved by the Director of the Department of Human Services, State of Iowa.

Co-payment: The amount that may be charged to CICS Individual at the time services are rendered.

Covered Services: Services enumerated in the Regional Management Plan, as approved by the Director of the Department of Human Services, State of Iowa.

HIPAA: Collectively, the Health Insurance Portability and Accountability Act of 1996, the Health Information Technology for Economic and Clinical Health Act, and all implementing regulations.

Individual Authorization: An Individual Authorization is a standard form, signed by an individual, to allow disclosure of the individual's Protected Health Information. The form must comply with HIPAA and all other applicable federal and state laws. The individual may revoke the Individual Authorization at any time in accordance with its terms.

Protected Health Information: Individually identifiable health information that is transmitted by or maintained in electronic media, or transmitted by or maintained in any other form or medium.

Region: The inter-governmental entity created under Chapter 28E of the Code of Iowa and Section 331.390 of the Code of Iowa that includes member counties of CICS.

Regional Management Plan: CICS' plan, developed pursuant to Iowa Code Section 331.393, for providing an array of cost-effective individualized services and supports that assist CICS Individuals in the Region to be as independent, productive, and integrated into the community as possible, within the constraints of the services fund.

SECTION 2

Duties of Provider

Section 2.1 Provision of Covered Services. Provider shall provide Covered Services to each CICS Individual who is authorized by the Administrative Team or Administrative Team designee ("Designee") to receive such services to the extent designated in Attachment A, Service Definitions and Rates. Such services shall be rendered in compliance with applicable laws and regulations and the Regional Management Plan. Provider shall provide Covered Services in a manner that: (a) documents the services provided, in conformance with applicable federal, state and local laws and regulations and the Regional Management Plan, and (b) protects the confidentiality of the CICS Individual's medical records, including, without limitation, any Protected Health Information. Provider may decline providing services to a CICS Individual provided that Provider communicates this decision to Administrative Team or Designee within twenty-four (24) hours of declining such services.

Section 2.2 Compliance with the Regional Management Plan. Provider and its staff shall be bound by and provide Covered Services in compliance with the Regional Management Plan. Failure to comply with the Regional Management Plan may result in sanctions including, without limitation, the loss of reimbursement and/or termination of the Agreement. If Provider does not agree with the sanction, Provider may appeal such action to the CICS Governing Board. The decision of the CICS Governing Board shall be final and conclusive and non-appealable.

Section 2.3 Authorization and Notification Requirements. All Covered Services provided to CICS Individuals by Provider must be authorized by CICS prior to or at the time of rendering services or in accordance with the Regional Management Plan. The Regional Management Plan shall not diminish Provider's obligation to render Covered Services consistent with the applicable standard of care. Provider shall be required to obtain from each CICS Individual an Individual Authorization that allows Provider to disclose any information about the Individual to CICS.

Section 2.4 Access to Books and Records. Unless otherwise required by applicable statutes or regulation, Provider shall allow CICS access to books, records, or cost reports as needed to establish rates or for purposes of appeals, utilization, grievance, claims payment review, individual medical records review, or financial audits, during the term of this Agreement and seven (7) years following its termination. Provider shall obtain any necessary Individual Authorization to allow CICS to exercise its rights under this Agreement.

Section 2.5 Licenses. At all times, Provider and the providers it employs or contracts with to provide services to CICS Individuals shall have all necessary licenses and certifications to perform the Covered Services.

Section 2.6 Major Incident Reporting. To the extent Provider is otherwise required to comply with Iowa Administrative Code ("IAC") Chapter 77, Provider shall promptly notify CICS in writing when a "major incident" as defined in IAC 441-77 involves a CICS Individual and the major incident would otherwise be required to be reported if the CICS Individual were receiving a Medicaid funded service. Provider may use the CICS Major Incident Report Form or Iowa Medicaid Critical Incident Report form for purposes of the notification.

SECTION 3

Service Delivery and Assessment

Section 3.1 Service Delivery. The Region encourages the use of Evidence Based Practices, Research Based Practices and Promising Practices in service delivery.

Section 3.2 Service Assessment. The Region is charged with the responsibility of collecting Outcome measurement information. Provider is required to follow the reporting requirements for any outcome measures listed in Attachment A. If the Region implements additional measures, this contract will be amended to reflect said changes.

Section 3.3 Incentives. Provider may qualify for incentive payments if it meets reporting and outcome participation requirements established by CICS.

SECTION 4

Claims Submission and Payment

Section 4.1 Claims Submission. Provider agrees to submit all claims for Covered Services within sixty (60) days of service provision and in accordance with the Regional Management Plan.

Section 4.2 Claims Payment. In accordance with the Regional Management Plan, CICS will pay claims for Covered Services within sixty (60) days of receipt of required documentation unless foreseen circumstances exist; no billings received more than sixty (60) days after the close of the fiscal year in which the service was provided shall be considered for payment by CICS unless there is a statutory requirement to pay such service. The fiscal year for CICS is July 1 – June 30.

Section 4.3 Compensation to Provider. Provider agrees to accept payment from CICS for Covered Services provided to CICS Individuals under this Agreement as payment in full, less any Co-payment or other amount that is due from CICS Individuals for such services. Provider shall not negotiate and/or accept lower rates or more favorable terms than those provided for in this Agreement from any other Region or county. Rates of compensation for Covered Services are set forth in Attachment A, Service Definitions and Rates.

SECTION 5

Relationship Between the Parties

Section 5.1 Relationship Between CICS and Provider. The relationship between CICS and Provider is solely that of independent contractors and nothing in this Agreement shall be construed or deemed to create any other relationship including one of employment, agency, or joint venture. Provider shall maintain social security, workers' compensation and all other employee benefits covering Provider's employees as required by law.

SECTION 6

Liability Insurance

Section 6.1 Provider Hold Harmless and Indemnification. Provider shall defend, hold harmless and indemnify CICS against any and all claims, liability, damages, judgments, and expenses, including, without limitation, reasonable attorney fees and costs, asserted against, imposed or incurred by CICS that arise out of acts or omissions of Provider or Provider's employees, agents or representatives in the discharge of Provider's responsibilities under this Agreement.

Section 6.2 Provider Liability Insurance. Provider agrees to carry comprehensive general liability insurance (claims-made with appropriate tail coverage or occurrence-based), at its own expense, in an amount of not less than \$1,000,000 per occurrence and \$2,000,000 aggregate. If Provider employs professionally licensed individuals, Provider also agrees to carry professional liability insurance (claims-made with appropriate tail coverage or occurrence-based), at its own expense, in an amount of not less than \$1,000,000 per occurrence. Both types of coverages shall cover any claims with respect to Covered Services that may arise out of an incident occurring

during the term of this Agreement as well as any claims in connection with the performance of Provider's responsibilities under this Agreement. Provider shall furnish to CICS on an annual basis proof of each required insurance, which proof will include the name of the carrier(s), effective dates of each coverage and coverage amounts.

SECTION 7

Laws and Regulations

Section 7.1 Laws and Regulations. Provider represents, covenants, and warrants that it is, and during the term of this Agreement will continue to be, operating in full compliance with all applicable federal and state laws.

Section 7.2 Compliance with Civil Rights Laws. Provider agrees not to discriminate or differentiate in the treatment of any individual based on age, race, creed, color, sex, sexual orientation, gender identity, national origin, religion, or disability. Provider agrees to ensure mental health and disability services are rendered to CICS Individuals in the same manner, and in accordance with the same standards and with the same availability, as offered to any other individual receiving services from Provider.

Section 7.3 Equal Opportunity Employer. CICS counties are equal employment opportunity employers. CICS supports a policy which prohibits discrimination against any employee or applicant for employment on the basis of age, race, sex, creed, color, sex, sexual orientation, gender identity, national origin, religion, or disability, or any other classification protected by law or ordinance. Provider agrees that it is in full compliance with this policy.

Section 7.4 Confidentiality of Records. CICS and Provider agree to maintain the confidentiality of all information regarding Covered Services provided to CICS Individuals under this Agreement in accordance with any applicable laws and regulations, including, without limitation, HIPAA. Provider acknowledges that in receiving, storing, processing, or otherwise dealing with information from CICS about CICS Individuals, it is fully bound by federal and state laws and regulations, including, without limitation, HIPAA, governing the confidentiality of medical records, mental health and disability services records, and Protected Health Information.

SECTION 8

Term and Termination

Section 8.1 Term. The term of this Agreement shall be for a period of one (1) year commencing on the date first above written, or until the end of the current fiscal year, whichever occurs first.

Section 8.2 Termination Without Cause. Either party may terminate this Agreement without cause upon sixty (60) days prior written notice of termination to the other party.

Section 8.3 Termination With Cause by CICS. CICS shall have the right to terminate this Agreement immediately by giving written notice to Provider upon the occurrence of any of the following events: (a) restriction, suspension or revocation of Provider's license, certification or accreditation or the license of any provider employed by or contracted with Provider to perform services under this Agreement; (b) Provider's loss of any liability insurance required under this Agreement; or (c) bankruptcy filing by the Provider.

Section 8.4 Termination by Provider. Provider may terminate this Agreement pursuant to Section 9.2 or 9.3; provided that Provider notifies CICS within thirty (30) days of the effective date of such amendment of its disagreement with such amendment.

Section 8.5 Termination for Breach. Either party shall have the right to terminate this Agreement for material breach of this Agreement by the other party that is not cured within thirty (30) days after written notice to the other party is provided.

Section 8.6 Information to CICS Individuals. Provider acknowledges the right of CICS to inform CICS Individuals of Provider's termination of this Agreement and agrees to cooperate with CICS in deciding on the form of such notification.

Section 8.7 Continuation of Services After Termination. Upon request by CICS for up to sixty (60) days upon termination notification, Provider shall continue to render Covered Services in accordance with this Agreement until CICS has transferred CICS Individuals to another provider or until such CICS Individual(s) are discharged.

Section 8.8 Notices to CICS. Any notice, request, demand, waiver, consent, approval or other communication to CICS which is required or permitted herein shall be in writing and shall be deemed given only if delivered personally, or sent by registered mail or certified mail, or by express mail courier service, postage prepaid, as follows:

CICS Operations Officer
126 S. Kellogg Ave., Ste. 001
Ames, IA 50010

Section 8.9 Notices to Provider. Any notice, request, demand, waiver, consent, approval or other communication to Provider which is required or permitted herein shall be in writing and shall be deemed given only if delivered personally, or sent by registered mail or certified mail, or by express mail courier service, postage prepaid, as follows:

The Bridge Home
Attention: Jodi Stumbo

225 S Kellogg Ave
Ames, IA 50010

SECTION 9

Amendments

Section 9.1 Amendment. Subject to Sections 9.1 and 9.2, this Agreement may be amended at any time only by the mutual written agreement of the parties.

Section 9.2 Regulatory Amendment. CICS may amend this Agreement to comply with applicable statutes and regulations and shall give written notice to Provider of such amendment and its effective date. Such amendment will not require sixty (60) days advance written notice. If the Provider does not agree with the amendment, Provider may terminate this Agreement as provided in Section 8.4.

Section 9.3 Regional Management Plan Amendment. CICS may also amend this Agreement to comply with changes in the Regional Management Plan and shall give written notice to Provider of such amendment and its effective date. Such amendment will not require sixty (60) days advance written notice. If Provider does not agree with the Amendment, Provider may terminate this Agreement as provided in Section 8.4.

SECTION 10

Other Terms and Conditions

Section 10.1 Non-Exclusivity. This Agreement does not confer upon the Provider any exclusive right to provide services to CICS Individuals in Provider's geographical area. CICS reserves the right to contract with other providers. The parties agree that Provider may continue to contract with other organizations.

Section 10.2 Assignment. Provider may not assign any of its rights and responsibilities under this Agreement to any person or entity without the prior written approval of CICS. Any assignment not in accordance with this Section 10.2 shall be null and void.

Section 10.3 Subcontracting. Provider may not subcontract any of its rights and responsibilities under this Agreement to any person or entity without prior notification to CICS. Mutual agreement must be obtained between Provider, CICS, and any subcontractor.

Section 10.4 Entire Agreement and Amendments. This Agreement and its attachments constitute the entire agreement between CICS and Provider, and supersedes or replaces any prior agreements between CICS and Provider relating to its subject matter. This Agreement may be amended only pursuant to a written document executed by both parties.

Section 10.5 Rights of Provider and CICS. Provider agrees that CICS may use Provider’s name, address, telephone number, description of Provider, and Provider’s care and specialty services in any promotional activities. Otherwise, Provider and CICS shall not use each other’s name, symbol or service mark without prior written approval of the other party.

Section 10.6 Invalidity. If any term, provision or condition of this Agreement shall be determined invalid by a court of law, such invalidity shall in no way affect the validity of any other term, provision or condition of this Agreement, and the remainder of the Agreement shall survive in full force and effect unless to do so would substantially impair the rights and obligations of the parties to this Agreement.

Section 10.7 No Waiver. The waiver by either party of a breach or violation of any provisions of this Agreement shall not operate as or be construed to be a waiver of any subsequent breach.

Section 10.8 Execution. This Agreement has been executed by the parties hereto, through their duly authorized officials.

Section 10.9 Governing Law. This Agreement shall be governed by and construed in accordance with the laws of the State of Iowa (but without regard to provisions thereof relating to conflicts of laws).

Section 10.10 No Third Party Beneficiaries. Nothing express or implied in this Agreement is intended to confer, nor shall anything herein made confer, upon any person other than the parties to this Agreement and their respective successors or assigns of the parties, any rights, remedies, obligations or liabilities whatsoever.

Section 10.11 Survival. Sections 2.4, 6.1, 6.2, 7.4 8.6, 8.7 8.8, 8.9, and Section 10 shall survive any termination of this Agreement.

Section 10.12 Waiver of Jury Trial. EACH PARTY HEREBY UNCONDITIONALLY WAIVES ANY RIGHT TO A JURY TRIAL WITH RESPECT TO AND IN ANY ACTION, PROCEEDING, CLAIM, COUNTERCLAIM, DEMAND OR OTHER MATTER WHATSOEVER ARISING OUT OF THIS AGREEMENT.

Central Iowa Community Services:

The Bridge Home:

By: _____

By: _____

Print Name: _____

Print Name: _____

Print Title: _____

Print Title: _____

Date: _____

Date: _____

**ATTACHMENT A
SERVICE DEFINITIONS AND RATES
The Bridge Home:**

Chart of Account	Service Description	Unit of Service	Rate
32345	Basic Needs (Ongoing Rent Subsidy) *	Draw Down	Billed monthly per client not to exceed \$12,500.00 up to a \$75,000.00 program cap
32379	System Building & Sustainability (Permanent Supportive Housing) **	Draw Down	\$26,700.00
32396	Community Support Program (Supported Housing) ***	Monthly	\$7,226.16 Monthly up to a \$43,357.00 cap
32399	Basic Needs (Other)	Draw Down	\$5000.00 program cap

OTHER TERMS:

Medicaid/MCO floor rate may be honored if higher than the CICS Contracted Rate. Please send documentation of the Medicaid/MCO rate to the Operations Officer for consideration of the rate adjustment. If the rate adjustment is approved by CICS this will be executed through a written document with the CICS CEO and the Provider with the effective date as the month following the receipt of the rate documentation. A CICS contract amendment will not be required in these situations.

For applicable services, Provider will meet Iowa Code or Administrative Code requirements.

Provider will ensure provider information is available in 211 and updated annually.

The Permanent Supportive Housing shall be funded through COA 32345 Basic Needs (ongoing Rent Subsidy), 32379 System Building and Sustainability (Permanent Supportive Housing), 32396 Community Support Program (Supported Housing), and 32399 Basic Needs (Other). Measures and measurement processes including but not limited to those outlined in this agreement shall be used by The Bridge Home to demonstrate that the following deliverables are met by The Bridge Home through their delivery of the CICS Permanent Supportive Housing Program:

Deliverables:

- The Permanent Supportive Housing program shall be delivered by The Bridge Home in accordance with the SAMHSA program model
- 14 households will be placed in suitable permanent housing by June 1, 2024.
- 80% of households will retain housing for a minimum of 13 months post-placement. Successful housing retention includes clients who transition between dwellings leased in their name.

- Personalized service plans will be developed and implemented for each client within two weeks of enrollment in the program.
- 100% of clients who express an interest in recovery services will be referred to a provider, with assistance as needed.
- The Bridge Home Staff shall complete housing skills training for 90% of clients in the first month of client enrollment.
- 70% of clients will be actively engaged in community activities.
- Documentation of staff training sessions and topics covered shall be shared monthly with CICS.
- Documentation of collaborative discussion and partnerships established with other stakeholders shall be shared monthly with CICS.
- The Bridge Home shall share quarterly progress reports on client outcomes with CICS.
- The Bridge Home shall share monthly comprehensive program reports to highlight achievements and areas for improvement.

***Basic Needs (Ongoing Rent Subsidy):**

Guidelines: For clients admitted to the Permanent Supportive Housing Program, rent, utilities, and deposits will be paid by The Bridge Home and reimbursed by CICS until another source of payment is secured. Participants in the Permanent Supportive Housing Program must live in housing that is eligible for payment through HUD and apply for all rental reimbursement programs to which they are eligible.

Reimbursement Process and Requirements: On a monthly basis, The Bridge Home will submit billing to designated CICS staff for payment of rent, utilities, and deposits for the prior month. Complete billing shall include client name, CSN number, dates of the month the apartment was occupied, and rent amount. Utility and deposit amounts will be included as necessary. The designated form shall be utilized for billing purposes. In order for a client to receive rent, utility or deposits, they must have prior approval from CICS.

Measures:

- Timeliness of rent, utilities, and deposit payments.
- Housing stability of participants (e.g., length of stay, eviction rates).

Measurement Process:

- Track the time taken from billing submission to payment.
- Conduct periodic surveys or interviews with participants to assess housing stability and satisfaction.

****System Building & Sustainability (Permanent Supportive Housing)**

Guidelines: CICS shall reimburse The Bridge Home for one car, at a price not to exceed \$20,700, as well as two computers and set up at a price not to exceed \$6,000 to be used by the Permanent Supportive Housing Program funded by CICS.

Reimbursement Process and Requirements:

The Bridge Home will utilize the designated form to bill CICS for startup costs. The billing will be on a draw-down basis and will include proof of the cost of the approved start-up items.

Measures:

- Acquisition and utilization of approved items (car, computers).

Measurement Process:

- Review documentation and receipts for purchased items.

*****Community Support Program (Supported Housing)**

Guidelines: The Permanent Supportive Housing program shall be delivered by The Bridge Home in accordance with the SAMHSA program model.

Reimbursement Process and Requirements: Community Support Program (Supported Housing) shall be billed monthly. Billing shall include names of clients in the program, client CSN numbers, and dates that clients were in the program. The designated form shall be utilized for billing purposes.

Measures:

- Adherence to the SAMHSA program model.
- Client engagement and progress.

Measurement Process:

- Periodic audits or reviews to ensure program alignment with SAMHSA model.
- Analysis of client progress reports and narratives to gauge engagement and improvements.
- An independent fidelity review will be completed in accordance with Iowa Administrative Rules.

******Basic Needs**

Guidelines: Funds may be provided to approved CICS Permanent Supportive Housing clients for the following: birth certificates, identification cards, apartment application fees, CyRide fare, HIRTA fare, bicycle repairs, & non-mental health related co-pays and prescriptions.

Reimbursement Process and Requirements: Reimbursement for items identified in the guidelines above will require the client name, CSN number, item billed, and cost and shall be billed monthly.

Other Tracking:

The Bridge Home shall keep detailed and specific narrative on work with clients. The Bridge Home shall also track time spent with clients, referrals to supports, results of referrals to supports, hospital stays, and jail time.

Measures:

- Quantity and quality of interactions with clients.
- Effectiveness of referrals and their outcomes.

Measurement Process:

- Maintain and review detailed logs of client interactions, referrals made, and results.
- Review hospital stays and jail time records to evaluate service impact.

Client enrollment and eligibility:

The Bridge Home will identify clients at coordinated entry pull meetings who have achieved a score of 9 or higher on the VISPADT, then will follow up with the clients to complete the CICS eligibility determination process. CICS staff who identify potential clients for permanent supportive housing will refer to designated The Bridge Home staff for completion of the coordinated entry process. In order for a client to be enrolled in the Permanent Supportive Housing Program they must have prior approval from CICS.

Measures:

- Number of eligible clients identified and enrolled.
- Efficiency of the enrollment process.

Measurement Process:

- Track the number of clients identified and enrolled.
- Assess the time taken from initial identification to enrollment completion.

Program Monitoring and Evaluation:

CICS Planning and designated staff from The Bridge Home will meet weekly to evaluate program process and progress. Expansion of services will be dependent upon the information shared at weekly meetings.

Measures:

- Progress in program goals and objectives.
- Effective use of weekly meetings for program improvement.

Measurement Process:

- Regularly review meeting minutes and action plans.

- **Assess changes or expansions made based on meeting discussions.**

Staff Responsibilities:

Staff roles for CICS and The Bridge Home will be clearly designated on a document available to both agencies.

Measures:

- **Clarity in roles and responsibilities.**
- **Cross-agency collaboration and communication effectiveness.**

Measurement Process:

- **Surveys or feedback mechanisms to gauge staff understanding of roles.**
- **Monitor inter-agency communication and teamwork.**

Central Iowa Community Services:

By: _____

Print Name: _____

Print Title: _____

Date: _____

The Bridge Home:

By: _____

Print Name: _____

Print Title: _____

Date: _____



Logic Model

Problem Statement: *What problems or issues does the project attempt to solve or address?*

Individuals with persistent mental health challenges who are experiencing chronic homelessness often struggle to access and maintain stable housing, hindering their path to recovery and community integration.

Project Objective: *State the project objectives here and divide the logic model by each objective. Objectives are concrete and viewed as targets under the general goal. One project objective per spreadsheet.*

Housing Placement and Stability:

Secure suitable permanent housing for 14 households clients within 4 months.
80% housing retention among clients for a minimum of 13 months post-placement Successful housing retention includes clients who transition between dwellings leased in their name.

Needs	Inputs	Activities	Outputs	Outcomes	Impact
<p><i>In the context of your problem statement, what are the needs of the community? What is the current service capacity available to meet these needs? Provide data if available.</i></p>	<p><i>What human and financial resources will be used for this project?</i></p> <p><i>[Staff, Time, Money, Materials, Equipment, Partners External Funding, Existing Experience within the Agency]</i></p>	<p><i>What activities will be conducted to meet the needs identified?</i></p> <p><i>[Conduct workshops, meetings; Deliver services; Provide training; Facilitate; Partner; Expand staff capacity or hire staff]</i></p>	<p><i>What will be produced or delivered by the project?</i></p> <p><i>Who will participate in activities identified in the previous section?</i></p> <p><i>Where will services resulting from the project be delivered?</i></p> <p><i>State the total population of the area to be covered by the project.</i></p> <p><i>Estimate the population who will be affected by the project.</i></p> <p><i>[Products created or resources developed; Services delivered; Participants reached]</i></p>	<p><i>What changes will happen after an activity has been implemented?</i></p> <p><i>What performance indicators will you use to measure whether outcomes are met?</i></p> <p><i>[Increased awareness, knowledge, or attitudes; Improved skills; Change in behavior, practice, or decision making; Policy change]</i></p>	<p><i>What long-term changes will occur?</i></p>
<p>Client Homelessness: Individuals experiencing chronic homelessness.</p> <p>Lack of Stable Housing: Insufficient access to safe and permanent housing options.</p> <p>Support for Housing Application: Assistance needed in navigating housing application processes.</p>	<p>Funding for housing subsidies or units</p> <p>Staff time for housing search and application processes</p> <p>Collaboration with housing authorities</p>	<p>Client Housing Assessment: Staff conducts individual assessments to determine housing needs and preferences. Identifies suitable housing options based on client criteria.</p> <p>Housing Application and Placement: Staff and supervisor assist in completing housing applications and securing units. Provides ongoing support.</p>	<p>14 households placed in suitable permanent housing</p> <p>Documentation of housing applications and placement process</p>	<p>Improved stability and security for clients in permanent housing</p> <p>Reduced homelessness among the targeted group</p>	<p>Individual Stability: Improved stability and security among housed clients.</p> <p>Community Reduction in Homelessness: Contributing to the overall decrease in homelessness rates in the community.</p> <p>Health and Well-being: Enhanced mental and physical health outcomes for housed individuals.</p>

Assumptions **External Factors**

<p><i>What factors need to occur, or which stakeholders or grantees need to be involved, for the project to be successful? How and why will proposed activities lead to proposed outputs, and how will outputs lead to outcomes?</i></p>	<p><i>What factors that are not in the control of the project could affect expected activities, outputs and outcomes? [e.g. changes in government policies]</i></p>
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Logic Model

Problem Statement: *What problems or issues does the project attempt to solve or address?*

Individuals with persistent mental health challenges who are experiencing chronic homelessness often struggle to access and maintain stable housing, hindering their path to recovery and community integration.

Project Objective: *State the project objectives here and divide the logic model by each objective. Objectives are concrete and viewed as targets under the general goal. One project objective per spreadsheet.*

Individualized Support Services:

Develop and implement personalized service plans for each client within the two weeks of enrollment in the program.
Refer all clients to mental health and substance abuse treatment services according to their plans, tracking progress through measurable indicators.

Needs	Inputs	Activities	Outputs	Outcomes	Impact
<p><i>In the context of your problem statement, what are the needs of the community? What is the current service capacity available to meet these needs? Provide data if available.</i></p>	<p><i>What human and financial resources will be used for this project?</i></p> <p><i>[Staff, Time, Money, Materials, Equipment, Partners External Funding, Existing Experience within the Agency]</i></p>	<p><i>What activities will be conducted to meet the needs identified?</i></p> <p><i>[Conduct workshops, meetings; Deliver services; Provide training; Facilitate; Partner; Expand staff capacity or hire staff]</i></p>	<p><i>What will be produced or delivered by the project?</i></p> <p><i>Who will participate in activities identified in the previous section?</i></p> <p><i>Where will services resulting from the project be delivered?</i></p> <p><i>State the total population of the area to be covered by the project.</i></p> <p><i>Estimate the population who will be affected by the project.</i></p> <p><i>[Products created or resources developed; Services delivered; Participants reached]</i></p>	<p><i>What changes will happen after an activity has been implemented?</i></p> <p><i>What performance indicators will you use to measure whether outcomes are met?</i></p> <p><i>[Increased awareness, knowledge, or attitudes; Improved skills; Change in behavior, practice, or decision making; Policy change]</i></p>	<p><i>What long-term changes will occur?</i></p>
<p>Complex Needs: Clients with persistent mental health and substance abuse challenges.</p> <p>Tailored Support: Individualized plans addressing specific client needs.</p> <p>Continuous Monitoring: Ongoing assessment and adjustment of services based on client progress.</p>	<p>Tailored service plans for each client</p> <p>Mental health and substance abuse treatment resources</p> <p>Time and effort of staff and supervisor for service implementation</p>	<p>Service Plan Development:</p> <p>Staff develops personalized service plans based on client assessments.</p> <p>Plans include mental health, substance abuse treatment, and other needed services as identified by the client. Client is not required to participate in services to remain the permanent supportive housing program.</p> <p>Service Delivery and Monitoring:</p> <p>Staff provides housing services and monitors progress on referred services regularly.</p> <p>Adjusts plans as needed based on client development.</p>	<p>Individualized service plans for all clients</p> <p>Records of services delivered and progress tracked</p> <p>100% of clients who express an interest in recovery services will be referred to a provider with assistance as needed.</p> <p>Record of referrals made and outcome of referrals.</p>	<p>Improved mental health and reduced substance abuse for clients</p> <p>Enhanced well-being and stability among clients</p>	<p>Reduced Relapse: Lower rates of relapse into homelessness or crisis situations.</p>

Assumptions **External Factors**

What factors need to occur, or which stakeholders or grantees need to be involved, for the project to be successful? How and why will proposed activities lead to proposed outputs, and how will outputs lead to **What factors that are not in the control of the project could affect expected activities, outputs and outcomes? [e.g. changes in government policies]**



Logic Model					
Problem Statement: <i>What problems or issues does the project attempt to solve or address?</i>					
Individuals with persistent mental health challenges who are experiencing chronic homelessness often struggle to access and maintain stable housing, hindering their path to recovery and community integration.					
Project Objective: <i>State the project objectives here and divide the logic model by each objective. Objectives are concrete and viewed as targets under the general goal. One project objective per spreadsheet.</i>					
Facilitate life skills training and employment assistance for clients who express interest. Foster community integration by encouraging participation in community activities and programs.					
Needs	Inputs	Activities	Outputs	Outcomes	Impact
<i>In the context of your problem statement, what are the needs of the community? What is the current service capacity available to meet these needs? Provide data if available.</i>	<i>What human and financial resources will be used for this project?</i> [Staff, Time, Money, Materials, Equipment, Partners External Funding, Existing Experience within the Agency]	<i>What activities will be conducted to meet the needs identified?</i> [Conduct workshops, meetings; Deliver services; Provide training; Facilitate; Partner; Expand staff capacity or hire staff]	<i>What will be produced or delivered by the project?</i> <i>Who will participate in activities identified in the previous section?</i> <i>Where will services resulting from the project be delivered?</i> <i>State the total population of the area to be covered by the project.</i> <i>Estimate the population who will be affected by the project.</i> [Products created or resources developed; Services delivered; Participants reached]	<i>What changes will happen after an activity has been implemented?</i> <i>What performance indicators will you use to measure whether outcomes are met?</i> [Increased awareness, knowledge, or attitudes; Improved skills; Change in behavior, practice, or decision making; Policy change]	<i>What long-term changes will occur?</i>
Skills Enhancement: Clients require training in life skills and employment readiness. Community Engagement: Some clients have limited involvement in community activities and networks. Resource Access: Some clients require support in accessing local resources for better integration	Training resources for life skills and employment assistance Time and effort of staff and supervisor to link clients to training and support	Life Skills Training and Linkage to other services Staff conducts housing skills training sessions tailored to client needs, needed tenancy training will be delivered in the first month of client enrollment in the program. Staff provides linkage to employment assistance.	Completion of housing skills training for 90% of clients in the first month of client enrollment. 70% of clients actively engaged in community activities.	Increased self-sufficiency among clients in managing daily housing tasks Strengthened community connections and involvement for clients	Long-Term Stability: Improved prospects for sustained independence and stability.
Assumptions			External Factors		
<i>What factors need to occur, or which stakeholders or grantees need to be involved, for the project to be successful? How and why will proposed activities lead to proposed outputs, and how will outputs lead to outcomes?</i>			<i>What factors that are not in the control of the project could affect expected activities, outputs and outcomes? [e.g. changes in government policies]</i>		



Logic Model					
<p>Problem Statement: <i>What problems or issues does the project attempt to solve or address?</i></p> <p>Individuals with persistent mental health challenges who are experiencing chronic homelessness often struggle to access and maintain stable housing, hindering their path to recovery and community integration.</p>					
<p>Project Objective: <i>State the project objectives here and divide the logic model by each objective. Objectives are concrete and viewed as targets under the general goal. One project objective per spreadsheet.</i></p> <p>Conduct regular training sessions for the staff member and supervisor to enhance skills in providing comprehensive support. Foster collaborations with local housing authorities and healthcare providers to optimize resources and services for the all clients.</p>					
Needs	Inputs	Activities	Outputs	Outcomes	Impact
<p><i>In the context of your problem statement, what are the needs of the community? What is the current service capacity available to meet these needs? Provide data if available.</i></p>	<p><i>What human and financial resources will be used for this project?</i></p> <p>[Staff, Time, Money, Materials, Equipment, Partners External Funding, Existing Experience within the Agency]</p>	<p><i>What activities will be conducted to meet the needs identified?</i></p> <p>[Conduct workshops, meetings; Deliver services; Provide training; Facilitate; Partner; Expand staff capacity or hire staff]</p>	<p><i>What will be produced or delivered by the project?</i></p> <p><i>Who will participate in activities identified in the previous section?</i></p> <p><i>Where will services resulting from the project be delivered?</i></p> <p><i>State the total population of the area to be covered by the project.</i></p> <p><i>Estimate the population who will be affected by the project.</i></p> <p>[Products created or resources developed; Services delivered; Participants reached]</p>	<p><i>What changes will happen after an activity has been implemented?</i></p> <p><i>What performance indicators will you use to measure whether outcomes are met?</i></p> <p>[Increased awareness, knowledge, or attitudes; Improved skills; Change in behavior, practice, or decision making; Policy change]</p>	<p><i>What long-term changes will occur?</i></p>
<p>Skill Enhancement: Staff needing ongoing training to effectively support clients.</p> <p>Network Establishment: Building partnerships with local housing and healthcare providers.</p> <p>Resource Optimization: Efficient collaboration to utilize available resources effectively.</p>	<p>Training materials and resources</p> <p>Time for staff training sessions</p> <p>Time to collaborate with local housing and healthcare partners</p>	<p>Regular Staff Training: Conduct ongoing training sessions for the staff member and supervisor to enhance skills in providing housing support services and linking to comprehensive support.</p> <p>Collaboration with Partners: Engage with local housing authorities and healthcare providers to optimize services.</p>	<p>Documented staff training sessions and topics covered</p> <p>Collaborative agreements or partnerships established</p> <p>Documentation of collaborative discussion with other stakeholders to be shared monthly with CICS.</p>	<p>Enhanced skills and knowledge among staff for improved client support</p> <p>Strengthened network of partnerships for more comprehensive services</p>	<p>Enhanced Services: Improved quality and effectiveness of support services for clients.</p> <p>Expanded Network: Broader access to resources and collaborations for future endeavors.</p> <p>Sustainability: Building a strong foundation for sustainable service provision.</p>
Assumptions			External Factors		
<p><i>What factors need to occur, or which stakeholders or grantees need to be involved, for the project to be successful? How and why will proposed activities lead to proposed outputs, and how will outputs lead to outcomes?</i></p>			<p><i>What factors that are not in the control of the project could affect expected activities, outputs and outcomes? [e.g. changes in government policies]</i></p>		



Logic Model

Problem Statement: *What problems or issues does the project attempt to solve or address?*

Individuals with persistent mental health challenges who are experiencing chronic homelessness often struggle to access and maintain stable housing, hindering their path to recovery and community integration.

Project Objective: *State the project objectives here and divide the logic model by each objective. Objectives are concrete and viewed as targets under the general goal. One project objective per spreadsheet.*

Implement a system for tracking client progress and outcomes, reporting on key metrics monthly.
Hold weekly meetings with CICS highlighting program achievements, challenges, and areas for improvement. Meeting frequency may be adjusted with the agreement of both parties.

Needs	Inputs	Activities	Outputs	Outcomes	Impact
<p><i>In the context of your problem statement, what are the needs of the community? What is the current service capacity available to meet these needs? Provide data if available.</i></p>	<p><i>What human and financial resources will be used for this project?</i></p> <p><i>[Staff, Time, Money, Materials, Equipment, Partners External Funding, Existing Experience within the Agency]</i></p>	<p><i>What activities will be conducted to meet the needs identified?</i></p> <p><i>[Conduct workshops, meetings; Deliver services; Provide training; Facilitate; Partner; Expand staff capacity or hire staff]</i></p>	<p><i>What will be produced or delivered by the project?</i></p> <p><i>Who will participate in activities identified in the previous section?</i></p> <p><i>Where will services resulting from the project be delivered?</i></p> <p><i>State the total population of the area to be covered by the project.</i></p> <p><i>Estimate the population who will be affected by the project.</i></p> <p><i>[Products created or resources developed; Services delivered; Participants reached]</i></p>	<p><i>What changes will happen after an activity has been implemented?</i></p> <p><i>What performance indicators will you use to measure whether outcomes are met?</i></p> <p><i>[Increased awareness, knowledge, or attitudes; Improved skills; Change in behavior, practice, or decision making; Policy change]</i></p>	<p><i>What long-term changes will occur?</i></p>
<p>Data Tracking: A system to collect and analyze client progress data.</p> <p>Insightful Reporting: Regular reporting to assess program efficacy and areas for improvement.</p> <p>Transparency: Clear communication of program successes and challenges to stakeholders.</p>	<p>Monitoring and evaluation tools</p> <p>Time for data collection and analysis</p>	<p>Data Collection and Tracking:</p> <p>Implement a system to track client progress and outcomes monthly.</p> <p>Gather data on key metrics and indicators per program requirements.</p> <p>Report Generation:</p> <p>Compile monthly reports on program achievements and challenges.</p> <p>Creates comprehensive end-of-fiscal year reports for stakeholders.</p>	<p>Quarterly updated progress reports on client outcomes</p> <p>Monthly comprehensive program reports highlighting achievements and areas for improvement.</p>	<p>Informed decision-making for program improvements based on data.</p> <p>Transparent reporting to stakeholders about program successes and challenges.</p>	<p>Informed Decision-Making: Data-driven decisions leading to program enhancements.</p> <p>Stakeholder Engagement: Engaging stakeholders based on transparent and insightful reporting.</p> <p>Program Evolution: Continuous improvement and evolution based on reported outcomes.</p>

Assumptions | **External Factors**

What factors need to occur, or which stakeholders or grantees need to be involved, for the project to be successful? How and why will proposed activities lead to proposed outputs, and how will outputs lead to outcomes? | *What factors that are not in the control of the project could affect expected activities, outputs and outcomes? [e.g. changes in government policies]*

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Project Title:	Permanent Supportive Housing
Agency:	The Bridge Home
<i>Attribute expenses and funding sources according to timeline. Materials or work purchased outside of this timeline is not eligible for reimbursement.</i>	
<i>Include funding from all other sources, including in-kind. Add columns as necessary for multiple funding sources.</i>	

Budgeted Expenses	Expense Narrative	Jan-24	Feb-24	Mar-24	Apr-24	May-24	Jun-24	Total	Anticipated Funding Source 1	Source 1 Anticipated Funding Amount	Anticipated Funding Source 2	Source 2 Anticipated Funding Amount
Professional Fees	The Bridge Home will cover the cost of the professional fees that	\$ 1,701.00	\$ 1,701.00	\$ 1,701.00	\$ 1,701.00	\$ 1,701.00	\$ 1,701.00	\$ 10,206.00			The Bridge Home	\$10,206.00
Assistant Director	1/3 of total Salary due to 1/3 of total time spent on program	\$ 1,805.56	\$ 1,805.56	\$ 1,805.56	\$ 1,805.56	\$ 1,805.56	\$ 1,805.56	\$ 10,833.36	CICS	\$ 10,833.36		
Company cell phones/ plan	Cell phones to promote a healthy work-life balance for our employees. Additionally, company cell phones help maintain confidentiality and ensure secure communication in the workplace. 2 cell phones, one for staff, and one for assistant director	\$ 200.00	\$ 200.00	\$ 200.00	\$ 200.00	\$ 200.00	\$ 200.00	\$ 1,200.00	CICS	\$ 1,200.00		
Admin and Overhead	10% of ongoing staff cost	\$ 570.56	\$ 570.56	\$ 570.56	\$ 570.56	\$ 570.56	\$ 570.56	\$ 3,423.36	CICS	\$ 3,423.36		
Employee 1	During the first year, the staff's caseload will consist of approximately 9 to 10 clients. Introducing a large number of new clients simultaneously can pose challenges, and our focus will be on providing quality care and support to each individual. However, after the initial year, we anticipate that the caseload may double as the program expands and client referrals increase. This growth will require careful management and allocation of resources to ensure continued high-quality service	\$ 3,900.00	\$ 3,900.00	\$ 3,900.00	\$ 3,900.00	\$ 3,900.00	\$ 3,900.00	\$ 23,400.00	CICS	\$ 23,400.00		
Mileage	For employees who need to use their own vehicles, we offer mileage reimbursement to cover the costs associated with gas and maintenance. Or for company cars, we take care of the gas and service fees to ensure their smooth operation.	\$ 300.00	\$ 300.00	\$ 300.00	\$ 300.00	\$ 300.00	\$ 300.00	\$ 1,800.00	CICS	\$ 1,800.00		
Training/Conferences	The allocated funds will enable our employees to receive top-notch training in evidence-based practices for Supportive Housing, including comprehensive training on the CSH model. Additionally, the funds will support our participation in conferences, allowing us to not only enhance our training but also foster collaboration with other service providers in the field. This will help us stay at the forefront of knowledge and best practices in Supportive Housing, ultimately benefiting our	\$ 50.00	\$ 50.00	\$ 50.00	\$ 50.00	\$ 50.00	\$ 50.00	\$ 300.00	CICS	\$ 300.00		
Client Assistance	Financial Assistance for the following: birth certificates, identification cards, apartment application fees, CyRide fare, HIRTA fare, bicycle repairs, daycare while waiting for daycare assistance, non-mental health related co-pays and prescriptions	\$ 833.50	\$ 833.50	\$ 833.50	\$ 833.50	\$ 833.50	\$ 833.50	\$ 5,001.00	CICS	\$ 5,001.00		
Rental Assistance	14 Clients in Ames	\$12,500.00	\$12,500.00	\$12,500.00	\$12,500.00	\$12,500.00	\$ 12,500.00	\$ 75,000.00	CICS	\$ 75,000.00		
Car	1 Vehicle to transport clients							\$ 20,700.00	CICS	\$ 20,700.00		
Computers	2 computers							\$ 6,000.00	CICS	\$ 6,000.00		
Total Program Cost: \$157,863.72									Total CICS Funding:	\$147,657.72	Total The Bridge Home Funding:	\$10,206.00



CICS

Supporting Individuals. Strengthening Communities.

**Central Iowa Community Services
Provider and Program Participation Agreement Amendment No. 1**

1. This amendment is entered into this 1st day of January, 2024 by and between Central Iowa Community Services (CICS) and Substance Abuse Treatment Unit of Central Iowa (Provider), original parties to the agreement dated First day of October, 2023.

2. In consideration of the mutual covenants herein made, the agreement is amended as follows: Attachment A is removed and replaced in its entirety with the following attachment A:

**Substance Abuse Treatment Unit of Central Iowa
ATTACHMENT A Effective 1/1/24
SERVICE DEFINITIONS AND RATES
FISCAL YEAR 2024**

Chart of Account	Service Description	Unit of Service	Rate
42305	Family Therapy (90846)	Hour	\$98.83
46305 Jail 42305 Outpatient	Therapy Evaluation (90791)	Visit	\$155.61
46305 Jail 42305 Outpatient	Therapy 90837	60 Min.	\$114.17
	90834	45 Min.	\$114.17
	90832	30 Min.	\$59.43
46305 Jail 42305 Outpatient	Group Therapy (90853)	Hour	\$69.43
42305 42306	Care Coordination	One Tele Health Session	\$31.21
46305 Jail 42306 Outpatient	Psychiatric Evaluation (90792)	Visit	Dr \$300.67 ARNP \$232.09 PA \$232.09
42305	Outpatient Mental Health Services- Building Purchase & Renovations	One Time Cost	\$125,000
42305	Outpatient Mental Health Services- Building Renovations	One Time Cost	\$121,475
42306	Medication Management (99213)	15 Min.	Dr. \$101.60 ARNP \$72.45 PA \$72.45



OTHER TERMS:

Medicaid/MCO floor rate may be honored if higher than the CICS Contracted Rate. Please send documentation of the Medicaid/MCO rate to the Operations Officer for consideration of the rate adjustment. If the rate adjustment is approved by CICS this will be executed through a written document with the CICS CEO and the Provider with the effective date as the month following the receipt of the rate documentation. A CICS contract amendment will not be required in these situations.

For applicable services, Provider will meet Iowa Code or Administrative Code requirements.

Provider will ensure provider information is available in 211 and updated annually.

All funding for outpatient services must be pre-authorized by CICS. CICS will issue a Notice of Decision to the patient and provider. CICS will determine the copayment for persons as specified in the CICS Management Plan. Patients are responsible to pay all copayment amounts directly to the provider. CICS funds may supplement patients with insurance any remaining amount due, up to the "allowed charge" on the insurance Explanation of Benefits (EOB) or the contracted CICS rate, whichever is less.

The provider is required to negotiate to the best of their ability with the seller and provide CICS documentation of negotiations prior to funds being released. If a purchase price is accepted by the seller in the amount of \$125,000, the provider may submit invoices to CICS for the cost of the renovations listed above. The one-time cost of renovations is contingent on the purchase of the building. CICS funding is based on the Provider Special Project Funding Request, and SATUCI Budget. These documents are attached to this Provider and Participation Agreement. Provider will submit contract of sale to CICS for release of funds as listed in the above terms.

3. All other terms and conditions of the Agreement identified in the caption hereof shall remain in full force and effect except as specifically modified by this amendment. If there is conflict between this amendment and the agreement, the terms of this amendment will prevail.

This Agreement Amendment has been executed by the parties hereto, through their duly authorized officials.

Central Iowa Community Services:

Substance Abuse Treatment Unit of Central Iowa:

By: _____

By: _____

Print Name: _____

Print Name: _____

Print Title: _____

Print Title: _____

Date: _____

Date: _____





CICS

Supporting Individuals. Strengthening Communities.

2024 CICS Governing Board Meeting Dates: Meetings will be held in the Public Meeting Room, 2nd Floor Story County Administration Building, Nevada unless otherwise noted.

1/25/24 – Assessor’s Conference Room, 1st Floor Story County Administration Building, Nevada

2/22/24

3/28/24

4/25/24 – Assessor’s Conference Room, 1st Floor Story County Administration Building, Nevada

5/23/24

6/27/24

7/25/24

8/22/24 – Conflicts with ISAC Conference, will need to decide a different date

9/26/24

10/24/24

11/21/24 - Meeting moved up one week as the 4th Thursday is holiday

12/19/24 - Meeting moved up one week due to holiday