

#### **ICTS ADVISORY COMMITTEE MINUTES**

4.2.25 | 11:00am

Member	Term Ends	Member	Term Ends
Barry Anderson, Chair	7/1/25	Bill Horning	7/1/25
Karla Weiss	1/1/28	Melissa Loehr	7/1/25
Ryan Eaton	7/1/26	Sue Duhn	7/1/26
Dewey Hildebrandt	7/1/27	Chopper Albert	7/1/27
Sarah Berndt	7/1/27	Andrea Woodard	

#### In attendance:

Barry Anderson, Ryan Eaton, Dewey Hildebrant, Sarah Berndt, Melissa Loehr, Sue Duhn, Chopper Albert

#### **ISAC Staff:**

Dylan Young, Brandi Kanselaar, Brad Holton, Andrea Woodard, Andrew De Hann, Joel Rohne, Ashley Clark, Beth Manley

#### Absent:

Karla Weiss, Bill Horning

Meeting called to order at 11:02am.

## **Approval of Minutes**

The committee reviewed the ICTS Advisory meeting minutes from 11/6/24.

MOTION: Approve meeting minutes from 11/6/24. Motion by Hildebrant. Seconded by Loehr. Motion passed.

The committee reviewed the meeting minutes from the Operations Committee on 1/14/25. No action is needed.

### **CSN Update**

Kanselaar presented a graph showing the support hours that CSN Expert Users put in by quarter. With the new legislative changes for behavioral health realignment, ICTS will lose almost all expert users as of 6/30/25. ICTS is prepared to take over the support. Expert users are also the CSN testers for production releases, so this should be taken into consideration for the future structure of CSN.

## **CSN Operations Sub-Committee Structure**

The current Operations sub-committee structure is made up of 11 region representatives. Since regions are being dissolved as of 6/30/25, the Operations committee will have to be re-structured. The group feels we may have to wait to see who is using CSN to determine how Operations will be structured in the future.

Kanselaar stated that currently General Assistance, Veterans Assistance, Judicial Advocates, Community Services, and substance use disorder entities are using CSN. For the Disability Access Points (DAPs), HHS does not want them using CSN for client data, as HHS has their own system that they'd like the DAPs to use. The DAPs stated they may use CSN for financials, but ICTS hasn't received solid confirmation on that. ICTS does not expect the ASO, Iowa PCA, to use CSN.

Case Management	10	1
County Community Services	183	61
General Assistance	67	25
Mental Health Advocate	54	99
MHDS Region	426	99
Provider	237	Unknown
Substance Use Disorder	54	21
Veterans Affairs	23	5

Updated 4/1/25

ICTS would like to keep CSN viable as it's generally believed the cycle may come back around and behavioral health may come back to county control eventually. Hildebrant stated that this was the most difficult budget year for counties and next year may be worse. So, keeping this in mind, CSN would have to be a reasonable cost.

#### **TSB Update**

Rohne presented an update on TSB. Projects include back up as a service, software RFP, new IT Director, data analytics, tech team evolution and tools, staff augmentation, and a possible Iowa State University collaboration.

Rohne gave an update on the software RFP. In Iowa, there are two main software companies, Harris/Solutions and Tyler Technologies. A lot of members have complained and are unhappy with the two vendors as they have not kept up with the needs of counties and support is slow. A task force was put together to assist with creating an RFP that includes all the requirements/wants from counties. One of the major stipulations is that ISAC would house the Tier 1 support structure. Counties will go through ISAC for support and not the vendors themselves, so the support stays Iowa-focused. In April, a Q/A will be held, then the task force will pick the top respondents to be interviewed in May. By the end of June, the RFP will be awarded.

The State and Local Cybersecurity Grant Program (SLCGP) states that 80% of the funds should go towards governments; however, that money was given to Iowa State University. So, Woodard and Rohne, along with other field experts from League of Cities and IT affiliate, will meet with Iowa State University about their plans for that money and hopefully form a collaboration or partnership.

# **ICTS Funding**

Holtan presented the plan for keeping CSN viable. The proposed plan is for FY26, ICTS won't collect any revenue/dues from anyone using CSN. ICTS will use reserves to fund the system. That will put the net income into a negative. However, staff time will be reduced as fewer users will be utilizing CSN, given that all regions will be completed by 12/31/25. This gives time for ICTS to determine who will use CSN, how they will use it then start planning for FY27 and how it should be funded. ICTS will have a final proposed plan by November

2025, so counties can budget appropriately for the next fiscal year. Throughout FY26, ICTS plans to create demos and speak to various affiliates to market CSN and its features.

ICTS' initial proposal is to assess each county annual dues for services. That will allow any county department to use CSN, even if it's just using the financial module, since that module can currently integrate with the county auditor's software. Ideally, TSB services will be included in the annual dues as well. There are a lot of things TSB is doing that ICTS is not charging for. Initially, ICTS was thinking \$5,000 annually per county, but ICTS would like the group's feedback.

The group expressed they are not opposed to the proposed suggestions, but it's premature, at this time, to set an amount since we don't know all the services being provided at this time between CSN and TSB.

It was asked if regions could be billed for their close out between July and December 2025, but regional close-out plans were due to HHS on April 1<sup>st</sup>, so it's too late to change. They didn't include those costs in their close-out budget plan, which must be approved by HHS.

The group is okay with recommending to the ICTS Board that ICTS will not collect dues for FY26.

For FY27, ICTS will gather more information and determine a dues structure at a later date. The group feels dues are appropriate, as long as counties know in advance the amount, and what they are getting for the price.

# **Open Discussion Items**

This group may need to meet before the scheduled next meeting in October/November, depending on what information is gathered regarding ICTS funding. It was suggested to meet during the fall ISAC conference, even if it's just a quick update meeting.

Meeting adjourned at 11:48 am.