

Health and Human Services Appropriations Bill LSB 5004HB

Last Action:
House Subcommittee
April 10, 2024

An Act relating to and making appropriations for veterans and health and human services, including other related provisions and appropriations, and including effective date and retroactive applicability provisions.

**Fiscal Services Division
Legislative Services Agency**

NOTES ON BILLS AND AMENDMENTS (NOBA)

Available online at www.legis.iowa.gov/publications/information/appropriationBillAnalysis

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FUNDING SUMMARY

General Fund FY 2025: Appropriates a total of \$2,218.6 million from the General Fund and 4,171.0 full-time equivalent (FTE) positions to the Department of Health and Human Services (HHS), containing the Department of Veterans Affairs (IVA). This is an increase of \$93.6 million and an increase of 6.0 FTE positions compared to estimated FY 2024.

General Fund FY 2026: Appropriates a total of \$2.0 million from the General Fund to the HHS.

Other Funds FY 2025: Appropriates a total of \$470.7 million from other funds. This is an increase of \$2.5 million compared to estimated FY 2024.

Standing Appropriations FY 2025: In addition to the appropriations in the Bill, the attached tracking includes the following standing appropriations that are automatically appropriated in statute:

- \$233,000 to the HHS for Child Abuse Prevention.
- \$1,400 to the HHS for the Commission of Inquiry.
- \$143,000 to the HHS for Nonresident Mental Illness Commitment.
- \$1 to the HHS for the Low-Income Home Energy Assistance Program (LiHEAP) Weatherization Assistance Program.
- \$224,000 to the HHS for the Center for Congenital and Inherited Disorders Central Registry.
- \$1.2 million for the Psychiatry Residency and Fellowship Program
- \$990,000 for the County Commissions of Veteran Affairs Fund

NEW PROGRAMS, SERVICES, OR ACTIVITIES

Department of Health and Human Services — Medical Assistance Home and Community-Based Services Waiver for Individuals with an Intellectual Disability: Appropriates a total of \$2.0 million from the General Fund. This is a new appropriation for FY 2026.

Page 22, Line 8

MAJOR INCREASES/DECREASES/TRANSFERS OF EXISTING PROGRAMS

Department of Veterans Affairs: Appropriates a total of \$13.0 million from the General Fund and 15.0 FTE positions. This is an increase of \$1.7 million in funding and an increase of 6.0 FTE positions compared to estimated FY 2024 including the following:

Page 1, Line 3

- An increase of \$336,000 for unfunded need in General Administration.
- A new appropriation of \$292,000 for cemetery grounds services.

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- An increase of \$1.0 million to support administering care at the Iowa Veterans Home.

Department of Health and Human Services — Aging and Disability Services: Appropriates a total of \$19.1 million from the General Fund. This is a net increase of \$155,000 compared to estimated FY 2024.

Page 1, Line 35

Region Incentive Fund (RIF): Appropriates \$3.0 million to the HHS to support the statewide 988 suicide and crisis line and to support the transition to the new Behavioral Health System, if 2024 Iowa Acts, [House File 2509](#) (Behavioral Health Service System Bill), or successor legislation is enacted.

Page 4, Line 8

Department of Health and Human Services — Community Access and Eligibility: Appropriates a total of \$68.0 million from the General Fund. This is a net decrease of \$2.1 million compared to estimated FY 2024 including the following:

Page 6, Line 7

- An increase of \$784,000 for operational needs.
- A decrease of \$2.9 million due to decreased enrollment in the Family Investment Program and PROMISE JOBS.

Temporary Assistance for Needy Families (TANF) Block Grant: Appropriates \$144.0 million for various HHS programs funded through the TANF Block Grant. This is an increase of \$13.0 million compared to estimated FY 2024.

Page 8, Line 18

Department of Health and Human Services — Medical Assistance, State Supplementary Assistance (SSA), and Healthy and Well Kids in Iowa (Hawki) Program: Appropriates a total of \$1,651.3 million from the General Fund. This is a net increase of \$107.7 million compared to estimated FY 2024 including the following:

Page 10, Line 19

- An increase of \$41.3 million to include the Children’s Health Insurance Program (CHIP) in the Medicaid appropriation beginning in FY 2025. The CHIP amount is an increase of \$2.7 million compared to estimated FY 2024 due to higher enrollment in the Hawki Program and is offset by appropriation transfers to Community Access and Eligibility and Health Program Operations beginning in FY 2025.
- An increase of \$40.9 million to fund Medicaid at the Medicaid Forecasting Group’s March 2024 estimate, which does not include an FY 2025 increase for Medicaid capitation rates.
- An increase of \$16.5 million to the Home and Community-Based Services (HCBS) program to offset federal American Rescue Plan Act of 2021 (ARPA) funding that expired.
- An increase of \$14.6 million to increase access to community-based providers.
- An increase of \$5.0 million for enhanced case management to coordinate care for vulnerable populations.
- An increase of \$4.5 million to include SSA in the Medicaid appropriation beginning in FY 2025. The

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SSA amount is a decrease of \$2.9 million compared to estimated FY 2024 due to lower enrollment and an appropriation transfer to Aging and Disability Services beginning in FY 2025.

- An increase of \$3.0 million for a home health provider rate adjustment.
- An increase of \$2.3 million for a mental health provider rate adjustment.
- An increase of \$2.0 million for pharmacy dispensing fees.
- An increase of \$1.8 million for an increase in income eligibility up to 300.0% of the federal poverty level (FPL) for the Medicaid for Employed People with Disabilities (MEPD) program.
- An increase of \$418,000 for a physical therapist provider rate adjustment.
- An increase of \$369,000 for Psychiatric Medical Institutions for Children (PMIC) tiered provider rates.
- An increase of \$277,000 for a community mental health centers provider rate adjustment.
- An increase of \$199,000 for a nurse practitioner rate adjustment.
- An increase of \$144,000 for a medical supplies provider rate adjustment.
- An increase of \$86,000 for biomarker testing coverage.
- An increase of \$65,000 for an occupational therapist provider rate adjustment.
- An increase of \$33,000 for a psychologist rate adjustment.
- An increase of \$30,000 for a physician assistant provider rate adjustment.
- An increase of \$3,000 for a certified nurse midwife provider rate adjustment.
- A decrease of \$2.9 million for an appropriation transfer to Community Access and Eligibility beginning in FY 2025.
- A decrease of \$6.0 million to reflect revenue enhancements from the Hospital Directed Payment Program that allows the Legislature to reduce the Medicaid General Fund appropriation.
- A decrease of \$16.9 million for an appropriation transfer to Health Program Operations beginning in FY 2025.

Department of Health and Human Services — Health Program Operations: Appropriates a total of \$39.6 million from the General Fund. This is a net increase of \$1.2 million compared to estimated FY 2024.

Page 12, Line 24

Department of Health and Human Services — Child Protective Services: Appropriates a total of \$170.4 million. This is a net increase of \$8.3 million compared to estimated FY 2024.

Page 17, Line 30

Department of Health and Human Services — State Specialty Care: Appropriates a total of \$100.0 million from the General Fund. This is a net increase of \$35,000 compared to estimated FY 2024.

Page 20, Line 14

Department of Health and Human Services — Accountability, Compliance, and Program Integrity: Appropriates a total of \$22.4 million from the General Fund. This is an increase of \$1.3 million compared to estimated FY 2024.

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Allows the HHS to utilize General Fund moneys for up to 4,156.0 FTE positions. Requires the HHS to report to the General Assembly by December 15, 2024, the distribution of FTE positions across the organizational divisions of the HHS.

Page 21, Line 31

FUNDING FOR PROJECTS AND PROGRAMS

Region Incentive Fund (RIF): Appropriates \$3.0 million to the HHS to support the statewide 988 suicide and crisis line and to support the transition to the new Behavioral Health System, if 2024 Iowa Acts, [House File 2509](#) (Behavioral Health Service System Bill), or successor legislation is enacted.

Page 4, Line 8

Allocates \$369,000 of the funds appropriated for Medicaid to provide enhanced reimbursement for a PMIC as specified in 2024 Iowa Acts, [House File 2402](#) (Psychiatric Medical Institutions for Children, Medicaid Rates Bill), or successor legislation, if enacted.

Page 11, Line 17

Allocates \$86,000 of the funds appropriated for Medicaid to provide biomarker testing as specified in 2024 Iowa Acts, [House File 2668](#) (Biomarker Testing, Health Insurance Bill), or successor legislation, if enacted.

Page 11, Line 22

Enhances reimbursement rates for a PMIC specified in 2024 Iowa Acts, House File 2402 (Psychiatric Medical Institutions for Children, Medicaid Rates Bill), or successor legislation, if enacted.

Page 16, Line 1

CHANGES TO PRIOR APPROPRIATIONS

Allows any unexpended funds appropriated in 2023 Iowa Acts, [Senate File 561](#) (FY 2024 Health and Human Services Appropriations Act), for FY 2024 from the General Fund for the State Office of Public Guardian to remain available for expenditure in FY 2025.

Page 25, Line 6

Allows any unexpended funds appropriated in 2023 Iowa Acts, Senate File 561 for FY 2024 from the General Fund for audiological services and hearing aids for children to remain available for expenditure until the close of FY 2025.

Page 25, Line 15

Allows any unexpended funds appropriated in 2023 Iowa Acts, Senate File 561 for FY 2024 from the General Fund for Child Care Assistance (CCA) to remain available for expenditure until the close of FY 2025.

Page 26, Line 1

Allows any unexpended funds appropriated in 2023 Iowa Acts, Senate File 561 for FY 2024 from the General Fund for Child and Family Services to remain available for expenditure until the close of FY 2025.

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Allows any unexpended funds appropriated in 2023 Iowa Acts, Senate File 561 for FY 2024 from the General Fund for Field Operations to remain available for expenditure until the close of FY 2025. Page 26, Line 21

Allows any unexpended funds appropriated in 2023 Iowa Acts, Senate File 561 for FY 2024 from the General Fund for the More Options for Maternal Support (MOMS) Program to remain available for expenditure until the close of FY 2025. Page 26, Line 30

Amends 2023 Iowa Acts, [HF 709](#) (Federal Block Grant Appropriations Act) to specify that no less than 8.4% of remaining moneys for each fiscal year will be allocated for administrative expenses of Low-Income Home Energy Assistance Program (LiHEAP) contractors and no more than 1.6% will be allocated to the HHS for administrative expenses related to LiHEAP. Page 27, Line 8

STUDIES AND INTENT

Requires federal funds received in FY 2025 because of the expenditure of State funds in a previous year to be used for child protective services. Allows any unexpended funds to remain available for expenditure through FY 2026. Page 18, Line 8

Prohibits a district or juvenile court from ordering any service that is a charge to the State if there are insufficient funds to pay for the service. Page 18, Line 24

Allows any unexpended funds appropriated for the Family Development and Self-Sufficiency (FaDSS) Program for FY 2025 to remain available for FY 2026. Page 22, Line 21

Allows any unexpended funds appropriated from the General Fund, the Quality Assurance Trust Fund, and the Hospital Health Care Access Trust Fund to the HHS in FY 2025 for the Medicaid Program and the amount more than the actual expenditures for FY 2025 to remain available for FY 2026. Page 22, Line 32

Allows any unexpended funds appropriated from the General Fund to the HHS for State Specialty Care for FY 2025 to remain available for FY 2026. Page 23, Line 8

Allows any unexpended funds appropriated from the General Fund to the HHS for the Iowa State Commission Grant Program to remain available for FY 2026. Page 23, Line 17

Allows any funds appropriated from the General Fund to the HHS in FY 2025 for rural psychiatric residencies that remain at the end of FY 2025 are permitted to carry forward into FY 2026. Page 23, Line 26

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- Allows any unexpended funds appropriated from the General Fund to the HHS for audiological services and hearing aids for children to remain available for FY 2026. Page 24, Line 1
- Allows any funds appropriated from the General Fund to the HHS in FY 2025 for adoption subsidy payments or post-adoption services that remain at the end of FY 2025 are permitted to carry forward into FY 2026. Page 24, Line 10
- Requires the HHS or the MHDS Commission to adopt emergency administrative rules to comply with federal requirements or to implement the Bill. The rules are required to be effective immediately upon filing or on a later effective date specified in the rules unless delayed or suspended by the Administrative Rules Review Committee (ARRC). The rules shall not take effect before being reviewed by the ARRC. Page 27, Line 32
- Directs any unexpended funds in the FIP account on June 30, 2024, to be appropriated to the HHS for Community Access and Eligibility. Page 38, Line 29
- Requires the HHS to conduct a study to explore options for a revised payment model for reimbursement of assisted living programs for Medicaid recipients. The HHS is required to report all options identified to the General Assembly by December 1, 2024. Page 41, Line 4

SIGNIFICANT CODE CHANGES

- Amends 2023 Iowa Acts, Senate File 561 to increase the number of rural psychiatric residencies from six to eight. Page 25, Line 25
- Removes an additional amount determined by the General Assembly from the allocated transfer from the Beer and Liquor Control Fund to the HHS for substance use disorder treatment and prevention programs. Page 28, Line 29
- Requires the HHS and the Department of Revenue to collaborate for enforcement of tobacco laws and to engage in tobacco control activities. Page 29, Line 13
- Requires the HHS to establish and enforce policies relating to the expenditure of State and federal funds by Area Agencies on Aging that require State and federal compliance. Page 29, Line 20
- Establishes a General Fund appropriation to the HHS, the amount of which will be sufficient to ensure that recipients of Medicaid living in care facilities in Iowa have access to the full amount of their Personal Needs Allowance. Page 30, Line 11

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Appropriates remaining revenues from Replacement Generation Tax to the HHS to supplement Medicaid appropriations.	Page 30, Line 30
Appropriates money to the HHS from Replacement Generation Tax revenues to supplement Medicaid appropriations.	Page 31, Line 28
Requires the HHS to increase the Personal Needs Allowance for SSA by the same percentage and at the same time as federal Supplemental Security Income and Social Security Benefits.	Page 32, Line 25
Appropriates any remaining funds in the Medicaid Fraud Fund at the close of a fiscal year to the HHS to supplement the Medicaid Program.	Page 33, Line 18
Appropriates any remaining funds in the Health Care Trust Fund at the close of a fiscal year to the HHS to supplement the Medicaid Program to be used for Medicaid reimbursement and associated costs.	Page 34, Line 15
Allows any revenue received by a State mental health institute to be retained and expended by the mental health institute.	Page 35, Line 14
Permits Medicaid recipients residing in a State mental health institute to retain their Medicaid eligibility during their stay at the mental health institute.	Page 35, Line 23
Permits the HHS to bill for State Resource Center services utilizing a scope of services approach in a manner that does not shift costs between the Medicaid program, the MHDS regions, or other State Resource Center funding sources.	Page 35, Line 32
Appropriates to the HHS moneys deposited in the Juvenile Detention Home Fund for distribution.	Page 36, Line 10
Removes mention of the Family Investment Program account from Iowa Code section 239B.14 and instead credits funds to the HHS for Community Access and Eligibility for purposes of the Family Investment Program.	Page 38, Line 2
Allows the Director of the HHS to establish new positions for Child Support Services within the limitations of the amount appropriated for Child Support Services or moneys transferred for this purpose from the Community Access and Eligibility appropriation.	Page 38, Line 16
Repeals Iowa Code section 239B.11 (Family Investment Program Account — Diversion Program Subaccount — Diversion Program).	Page 38, Line 28

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Requires that quality assurance assessments be paid by nursing facilities on a monthly basis instead of a quarterly basis. Removes the requirement that quality assurance assessment forms be submitted within 30 days of the end of each calendar quarter.	Page 38, Line 35
Defines "supported community living services" as services provided in a noninstitutional setting to persons 16 years of age or older with mental illness, an intellectual disability, brain injury, or developmental disability.	Page 39, Line 13
Requires the HHS to administer a Centers of Excellence Grant Program to encourage collaboration among regional health care providers in rural areas to transform health care delivery to provide quality and sustainable care.	Page 39, Line 22
Requires the HHS to collaborate with the Autism Support Program pursuant to Iowa Code chapter 225D related to the Regional Autism Assistance Program. The functions of the Regional Autism Assistance Program must include regionalized and integrated care delivery and coordination and family navigation.	Page 40, Line 4
Requires the HHS to use appropriated funds for lodging expenses for cancer patients with income below 200.00% of the FPL who travel 30 miles or more to receive treatment at the University of Iowa Hospitals and Clinics (UIHC).	Page 40, Line 23
Decreases the standing limited appropriation from the General Fund to the Department of Veterans Affairs to be credited to the County Commissions of Veteran Affairs Fund from \$1.0 million to \$990,000 .	Page 41, Line 15

EFFECTIVE DATE

Specifies that Division XII of the Bill is effective upon enactment and applies retroactively to July 1, 2022.	Page 24, Line 33
Specifies that Division XIII of the Bill is effective upon enactment and applies retroactively to July 1, 2023.	Page 27, Line 26

LSB 5004HB provides for the following changes to the Code of Iowa.

Page #	Line #	Bill Section	Action	Code Section
28	29	38	Amend	123.17.5
29	13	39	Add	142A.5.9
29	20	40	New	231.35
30	11	41	Amend	249A.30A
30	30	42	Amend	437A.8.4.d
31	28	43	Amend	437A.15.3.f
32	25	44	New	249.9A
33	18	45	Amend	249A.50.3
34	15	46	Amend	453A.35A
35	14	47	New	218.97
35	23	48	New	249A.38A
35	32	49	New	218.97A
36	10	50	Amend	232.142
38	2	51	Amend	239B.14.2
38	16	52	Amend	252B.27.1
38	28	53	Repeal	239B.11
38	35	55	Amend	249L.3.2
39	13	56	Amend	225C.21.1
39	22	57	New	135.194
40	4	58	Amend	256.35
40	23	59	New	217.41D
41	15	61	Amend	35A.16.1.b

1 1 DIVISION I
 1 2 DEPARTMENT OF VETERANS AFFAIRS — FY 2024-2025

1 3 Section 1. DEPARTMENT OF VETERANS AFFAIRS. There is
 1 4 appropriated from the general fund of the state to the
 1 5 department of veterans affairs for the fiscal year beginning
 1 6 July 1, 2024, and ending June 30, 2025, the following amounts,
 1 7 or so much thereof as is necessary, to be used for the purposes
 1 8 designated:

1 9 1. DEPARTMENT OF VETERANS AFFAIRS ADMINISTRATION
 1 10 For salaries, support, maintenance, and miscellaneous
 1 11 purposes, and for not more than the following full-time
 1 12 equivalent positions:
 1 13 \$ 1,369,205
 1 14 FTEs 15.00

General Fund appropriation to the Department of Veterans Affairs.
 DETAIL: This is an increase of \$335,916 and an increase of 6.00 full-time equivalent (FTE) positions compared to estimated FY 2024.

1 15 2. STATE VETERANS CEMETERY
 1 16 For cemetery grounds services and miscellaneous purposes:
 1 17 \$ 292,000

General Fund appropriation to the State Veterans Cemetery.
 DETAIL: This is a new appropriation for FY 2025 for contracting groundskeepers to achieve national standards for veterans' cemeteries.

1 18 3. IOWA VETERANS HOME
 1 19 For salaries, support, maintenance, and miscellaneous
 1 20 purposes:
 1 21 \$ 8,145,736

General Fund appropriation to the Iowa Veterans Home (IVH).
 DETAIL: This is an increase of \$1,030,401 compared to estimated FY 2024 to be used at the discretion of the IVH to support administering care for Iowa Veterans.

1 22 a. The Iowa veterans home billings involving the department
 1 23 of health and human services shall be submitted to the
 1 24 department on at least a monthly basis.

Requires the IVH to submit monthly claims relating to Medicaid to the Department of Health and Human Services (HHS).

1 25 b. The Iowa veterans home expenditure report shall be
 1 26 submitted monthly to the general assembly.

Requires the IVH to submit a monthly expenditure report to the General Assembly.

1 27 4. HOME OWNERSHIP ASSISTANCE PROGRAM
 1 28 For transfer to the Iowa finance authority for the
 1 29 continuation of the home ownership assistance program for

General Fund appropriation to the Home Ownership Assistance Program for military service members and veterans, to be transferred to the Iowa Finance Authority.

1 30 persons who are or were eligible members of the armed forces of
 1 31 the United States, pursuant to section 16.54:
 1 32 \$ 2,200,000

DETAIL: This is no change compared to estimated FY 2024. Under the Program, a \$5,000 grant is available to a service member for down payment and closing costs toward the purchase of a new home in the State of Iowa. The home must be a primary residence, and this is a once-in-a-lifetime grant.

1 33 DIVISION II
 1 34 AGING AND DISABILITY SERVICES — FY 2024-2025

1 35 Sec. 2. DEPARTMENT OF HEALTH AND HUMAN SERVICES — AGING

General Fund appropriation to the HHS — Aging and Disability Services for FY 2025.

2 1 AND DISABILITY SERVICES. There is appropriated from the
 2 2 general fund of the state to the department of health and human
 2 3 services for the fiscal year beginning July 1, 2024, and ending
 2 4 June 30, 2025, the following amount, or so much thereof as is
 2 5 necessary, to be used for the purposes designated:

DETAIL: Due to organizational changes within the HHS, appropriations from FY 2024 have been restructured. The new FY 2025 appropriation for Aging and Disability Services is comprised of moneys formerly appropriated to the following areas:

2 6 For aging programs for the department of health and human
 2 7 services and area agencies on aging to provide citizens of
 2 8 Iowa who are 60 years of age and older with case management;
 2 9 Iowa's aging and disabilities resource centers; for the
 2 10 return to community program; for the purposes of chapter 231E,
 2 11 to administer the prevention of elder abuse, neglect, and
 2 12 exploitation program pursuant to section 231.56A, in accordance
 2 13 with the requirements of the federal Older Americans Act of
 2 14 1965, 42 U.S.C. §3001 et seq., as amended; for the reporting
 2 15 and evaluation of cases of dependant adult abuse pursuant to
 2 16 chapter 235B; and for other services which may include but are
 2 17 not limited to adult day, respite care, chore, information
 2 18 and assistance, and material aid, for information and options
 2 19 counseling for persons with disabilities, and for salaries,
 2 20 support, administration, maintenance, and miscellaneous
 2 21 purposes:
 2 22 \$ 19,088,714

- Aging Programs
- General Administration
- Field Operations
- State Supplementary Assistance (SSA)
- Health Program Operations
- Family Support Subsidy
- Conner Decree Training

This restructured appropriation represents a net increase of \$155,157 compared to estimated FY 2024 due to increased operational needs.

2 23 1. Funds appropriated in this section may be used to
 2 24 supplement federal funds under federal regulations. To
 2 25 receive funds appropriated in this section, a local area
 2 26 agency on aging shall match the funds with moneys from other
 2 27 sources according to rules adopted by the department. Funds
 2 28 appropriated in this section may be used for services not
 2 29 specifically enumerated in this section only if approved by the
 2 30 department as part of an area agency on aging's area plan.

Permits the use of funds appropriated in this Section to supplement federal funds for elderly services if those services are approved by the HHS as part of an Area Agency on Aging's (AAA's) area plan. Requires local AAAs to match the funds for aging programs and services.

2 31 2. Of the funds appropriated in this section, \$949,282
 2 32 shall be used for the family support center component of the
 2 33 comprehensive family support program under chapter 225C,
 2 34 subchapter V.

Allocates \$949,282 to the HHS to continue the Children at Home Program. The HHS has existing statewide coordinated intake for family support services through the Division of Health Promotion and Chronic Disease Prevention.

DETAIL: This is an increase of \$17,746 compared to the estimated FY 2024 allocation. The allocation was previously located under the Family Support Subsidy appropriation.

2 35 3. Of the funds appropriated in this section, \$33,632 shall
 3 1 be used to build community capacity through the coordination
 3 2 and provision of training opportunities in accordance with the
 3 3 consent decree of Conner v.Branstad, No.4-86-CV-30871 (S.D.
 3 4 Iowa, July 14, 1994).

Allocates \$33,632 to the HHS for the Conner Decree training requirements.

DETAIL: This is no change compared to estimated FY 2024. The allocation was previously located under the Conner Decree appropriation. The funds are used for training purposes to comply with the [Conner v. Branstad](#) consent decree mandating placement of persons with developmental disabilities in the least restrictive setting possible.

3 5 DIVISION III
 3 6 BEHAVIORAL HEALTH — FY 2024-2025

3 7 Sec. 3. DEPARTMENT OF HEALTH AND HUMAN SERVICES —
 3 8 BEHAVIORAL HEALTH. There is appropriated from the general fund
 3 9 of the state to the department of health and human services for
 3 10 the fiscal year beginning July 1, 2024, and ending June 30,
 3 11 2025, the following amount, or so much thereof as is necessary,
 3 12 to be used for the purposes designated:

3 13 For behavioral health prevention, treatment, and recovery
 3 14 efforts to reduce the prevalence of the use of, provide
 3 15 treatment for, and support recovery from tobacco and substance
 3 16 use and misuse pursuant to the applicable policy, purpose,
 3 17 and intent described in sections 125.1 and 142A.1, alcohol,
 3 18 problem gambling, and other addictive behaviors. Activities
 3 19 shall align with accepted best practice guidance standards for
 3 20 behavioral health including those published by the centers for
 3 21 disease control and prevention and the substance abuse and
 3 22 mental health services administration of the United States
 3 23 department of health and human services for health promotion;
 3 24 universal, selective, and indicated prevention; treatment; and
 3 25 recovery services and supports; and shall include a 24-hour
 3 26 helpline, public information resources, professional training,

General Fund appropriation to the HHS — Behavioral Health for FY 2025.

DETAIL: Due to organizational changes within the HHS, appropriations from FY 2024 have been restructured. The new FY 2025 appropriation for Behavioral Health is comprised of moneys formerly appropriated to the following areas:

- General Administration
- Addictive Disorders
- Healthy Children and Families

This restructured appropriation represents no change in funding compared to estimated FY 2024. The HHS Division of Behavioral Health's Bureau of Substance Abuse works to address prevention and treatment needs by providing focus for training efforts, identifying and securing available grant funding, monitoring grant compliance, and regulating licensure for treatment programs. The Office of Gambling Treatment and Prevention works to reduce the harm caused by problem gambling by funding a range of services.

3 27 youth prevention, program evaluation, and efforts at the state
 3 28 and local levels:
 3 29 \$ 24,400,114

3 30 Sec. 4. DEPARTMENT OF HEALTH AND HUMAN SERVICES — SPORTS
 3 31 WAGERING RECEIPTS FUND. There is appropriated from the sports
 3 32 wagering receipts fund created in section 8.57, subsection 6,
 3 33 to the department of health and human services for the fiscal
 3 34 year beginning July 1, 2024, and ending June 30, 2025, the
 3 35 following amount, or so much thereof as is necessary, to be
 4 1 used for behavioral health prevention, treatment, and recovery
 4 2 efforts to reduce the prevalence of the use of, provide
 4 3 treatment for, and support recovery from tobacco and substance
 4 4 use and misuse pursuant to the applicable policy, purpose, and
 4 5 intent described in sections 125.1 and 142A.1, alcohol, problem
 4 6 gambling, and other addictive behaviors:
 4 7 \$ 1,750,000

Sports Wagering Receipts Fund (SWRF) appropriation for problem gambling and substance-related disorder prevention, treatment, and recovery services, including Your Life Iowa, professional training, youth prevention, and program evaluation.

DETAIL: This is no change compared to estimated FY 2024.

4 8 Sec. 5. DEPARTMENT OF HEALTH AND HUMAN SERVICES — MENTAL
 4 9 HEALTH AND DISABILITY SERVICES REGIONAL SERVICE FUND —
 4 10 REGION INCENTIVE FUND. There is appropriated from the region
 4 11 incentive fund of the mental health and disability services
 4 12 regional service fund created in section 225C.7A, to the
 4 13 department of health and human services for the fiscal year
 4 14 beginning July 1, 2024, and ending June 30, 2025, the following
 4 15 amount, or so much thereof as is necessary, to be used to
 4 16 support the statewide 988 suicide and crisis line, and to
 4 17 support the transition to the new behavioral health system
 4 18 pursuant to 2024 Iowa Acts, House File 2509, or successor
 4 19 legislation, if enacted:
 4 20 \$ 3,000,000

Appropriates \$3,000,000 from the Region Incentive Fund (RIF) to the HHS to support the statewide 988 suicide and crisis line and to support the transition to the new Behavioral Health System, if 2024 Iowa Acts, [House File 2509](#) (Behavioral Health Service System Bill), or successor legislation is enacted.

4 21 DIVISION IV
 4 22 PUBLIC HEALTH — FY 2024-2025

4 23 Sec. 6. DEPARTMENT OF HEALTH AND HUMAN SERVICES — PUBLIC
 4 24 HEALTH. There is appropriated from the general fund of the
 4 25 state to the department of health and human services for the
 4 26 fiscal year beginning July 1, 2024, and ending June 30, 2025,
 4 27 the following amount, or so much thereof as is necessary, to be
 4 28 used for the purposes designated:
 4 29 For programs that support health promotion, protect the

General Fund appropriation to the HHS — Public Health for FY 2025.

DETAIL: Due to organizational changes within the HHS, appropriations from FY 2024 have been restructured. The new FY 2025 appropriation for Public Health is comprised of moneys formerly appropriated to the following areas:

4 30 health and safety of the public, conduct disease surveillance
 4 31 and investigation to reduce the incidence of morbidity and
 4 32 mortality, serve individuals with chronic conditions, and
 4 33 strengthen the health care delivery system to improve health
 4 34 outcomes for all Iowans:
 4 35 \$ 22,916,821

- Healthy Children and Families
- Chronic Conditions
- Community Capacity
- Essential Public Health Services
- Infectious Diseases
- Public Protection
- Iowa Registry for Congenital and Inherited Disorders
- Psychiatry Residency and Fellowship Program

This restructured appropriation represents no change in funding compared to estimated FY 2024. The Division of Public Health's responsibilities include promoting the health and safety of the public, conducting disease surveillance and investigation to reduce the incidence of morbidity and mortality, serving individuals with chronic conditions, and strengthening the health care delivery system.

5 1 1. Of the funds appropriated in this section, \$2,100,000
 5 2 shall be deposited in the medical residency training account
 5 3 created in section 135.175, subsection 5, paragraph "a", and is
 5 4 appropriated from the account to the department to be used for
 5 5 the purposes of the medical residency training state matching
 5 6 grants program as specified in section 135.176.

Allocates \$2,100,000 for the Medical Residency Training State Matching Grants Program.

DETAIL: This is no change compared to the estimated FY 2024 allocation. The allocation was previously located under the Community Capacity appropriation. The Program provides matching grants to sponsors of accredited graduate medical education residency programs in this State to establish, expand, or support medical residency training programs.

5 7 2. Of the funds appropriated in this section, \$800,000
 5 8 shall be used for rural psychiatric residencies to annually
 5 9 fund eight psychiatric residents who will provide mental health
 5 10 services in underserved areas of the state.

Allocates \$800,000 for rural psychiatric residencies to support the annual creation and training of eight psychiatric residents to provide mental health services to underserved areas of the State.

DETAIL: This is no change compared to the estimated FY 2024 allocation. The allocation was previously located under the Community Capacity appropriation.

5 11 3. Of the funds appropriated in this section, \$425,000
 5 12 shall be used for the continuation of a centers of excellence
 5 13 program for the awarding of two grants to encourage innovation
 5 14 and collaboration among regional health care providers in a
 5 15 rural area based upon the results of a regional community
 5 16 needs assessment to transform health care delivery in order to
 5 17 provide quality, sustainable care that meets the needs of the
 5 18 local communities. An applicant for the grant shall specify

Allocates \$425,000 for the continuation of a Center of Excellence Program.

DETAIL: This is no change compared to the estimated FY 2024 allocation. The allocation was previously located under the Community Capacity appropriation. The Program funds grant proposals to demonstrate regional collaboration in accessing targeted medical needs of residents. The projects facilitate collaboration between rural

5 19 how the grant will be expended to accomplish the goals of the
 5 20 program and shall provide a detailed five-year sustainability
 5 21 plan prior to being awarded any grant. Following receipt
 5 22 of the grant, a recipient shall submit periodic reports as
 5 23 specified by the department to the governor and the general
 5 24 assembly regarding the recipient's expenditure of the grant and
 5 25 progress in accomplishing the program's goals.

hospitals and health systems to leverage resources and develop a business model for long-term sustainability. Applicants are required to complete a five-year sustainability plan prior to being awarded any funds and are required to provide periodic reports as specified by the HHS to the Governor and the General Assembly regarding expenditures and progress in accomplishing the Program goals.

5 26 4. Of the funds appropriated in this section, \$560,000 shall
 5 27 be deposited in the state-funded family medicine obstetrics
 5 28 fellowship program fund to be used for the state-funded family
 5 29 medicine obstetrics fellowship program, in accordance with
 5 30 section 135.193.

Allocates \$560,000 for the continuation of the Family Medicine Obstetrics Fellowship Program Fund to establish obstetrics fellowships in rural and underserved areas in the State.

DETAIL: This is no change compared to the estimated FY 2024 allocation. The allocation was previously located under the Community Capacity appropriation.

5 31 5. The department shall work with the board established
 5 32 in chapter 135D to develop plans for program enhancements
 5 33 in the Iowa health information network for the purpose of
 5 34 empowering Iowa patients to access and direct their health
 5 35 information utilizing the Iowa health information network.
 6 1 Program enhancements shall protect data privacy, facilitate the
 6 2 interchange of health data for the purpose of improving public
 6 3 health outcomes, and increase participation by health care
 6 4 providers.

Requires the HHS to work with the Iowa Health Information Network Board established in Iowa Code chapter [135D](#) to develop plans for program enhancements to empower Iowa patients to access and direct their health information using the Iowa Health Information Network.

6 5 DIVISION V
 6 6 COMMUNITY ACCESS AND ELIGIBILITY — FY 2024-2025

6 7 Sec. 7. DEPARTMENT OF HEALTH AND HUMAN SERVICES — COMMUNITY
 6 8 ACCESS AND ELIGIBILITY. There is appropriated from the
 6 9 general fund of the state to the department of health and human
 6 10 services for the fiscal year beginning July 1, 2024, and ending
 6 11 June 30, 2025, the following amount, or so much thereof as is
 6 12 necessary, to be used for the purposes designated:
 6 13 To be used for salaries, support, maintenance, and
 6 14 miscellaneous purposes and for family investment program (FIP)
 6 15 assistance in accordance with chapter 239B, and for other costs
 6 16 associated with providing needs-based benefits or assistance
 6 17 including but not limited to maternal and child health, oral
 6 18 health, obesity prevention, the promoting independence and
 6 19 self-sufficiency through employment, job opportunities and

General Fund appropriation to the HHS — Community Access and Eligibility for FY 2025.

DETAIL: Due to organizational changes within the HHS, appropriations from FY 2024 have been restructured. The new FY 2025 appropriation for Community Access and Eligibility is comprised of moneys formerly appropriated to the following areas:

- Aging Programs
- Human Rights Administration
- General Administration
- Field Operations
- Family Investment Program (FIP)/PROMISE JOBS
- Medical Assistance

6 20 basic skills (PROMISE JOBS) program, supplemental nutrition
 6 21 assistance program (SNAP) employment and training, the FIP
 6 22 diversion program, family planning, rent reimbursement,
 6 23 and eligibility determinations for medical assistance, food
 6 24 assistance, and the children’s health insurance program:
 6 25 \$ 68,043,944

- Children's Health Insurance
- Volunteers
- Healthy Children and Families
- Chronic Conditions
- Community Capacity
- Public Protection

This restructured appropriation represents a net decrease of \$2,115,731 compared to estimated FY 2024. This includes:

- An increase of \$784,269 due to increased operational needs.
- A decrease of \$2,900,000 due to decreased enrollment in the FIP and PROMISE JOBS.

6 26 1. Of the child support collections assigned under FIP,
 6 27 the federal share of support collections shall be credited to
 6 28 the child support services appropriation made in this division
 6 29 of this Act. Of the remainder of the assigned child support
 6 30 collections received by child support services, a portion
 6 31 shall be credited to community access and eligibility, and
 6 32 the remaining funds may be used to increase recoveries, to
 6 33 sustain cash flow in the child support payments account, or for
 6 34 technology needs. If child support collections assigned under
 6 35 FIP are greater than estimated or are otherwise determined not
 7 1 to be required for maintenance of effort, the state share of
 7 2 either amount may be transferred to or retained in the child
 7 3 support payments account.

Requires the federal share of child support collections recovered by the State be credited to Child Support Services. Of the remainder of support collected, a portion is credited to community access and eligibility, and the HHS is permitted to use the remaining funds to increase recoveries, to sustain cash flow, or for technology needs for the Child Support Payments Account.

7 4 2. Of the funds appropriated in this section, \$3,075,000
 7 5 shall be used for continuation of the department’s initiative
 7 6 to provide for adequate developmental surveillance and
 7 7 screening during a child’s first five years. The funds shall
 7 8 be used first to fully fund the current participating counties
 7 9 to ensure that those counties are fully operational, with the
 7 10 remaining funds to be used for expanding participation to
 7 11 additional counties. The full implementation and expansion
 7 12 shall include enhancing the scope of the initiative through
 7 13 collaboration with the child health specialty clinics to
 7 14 promote the use of developmental surveillance and screening to
 7 15 support healthy child development through early identification
 7 16 and response to both biomedical and social determinants of
 7 17 healthy development by providing practitioner consultation

Allocates \$3,075,000 for the Iowa First Five Healthy Mental Development Initiative programs.

DETAIL: This is no change compared to the estimated FY 2024 allocation. The allocation was previously located under the Healthy Children and Families appropriation. This is a public-private mental development initiative that partners primary care and public health services in Iowa to enhance high-quality well-child care. The First Five Model supports health providers in the earlier detection of socioemotional delays, developmental delays, and family risk-related factors in children from birth to age five. The Initiative then coordinates referrals, interventions, and follow-ups.

7 18 and continuous improvement through training and education,
 7 19 particularly for children with behavioral conditions and
 7 20 needs. The department shall also collaborate with the Medicaid
 7 21 program and the child health specialty clinics to assist in
 7 22 coordinating the activities of the first five initiative into
 7 23 the establishment of patient-centered medical homes developed
 7 24 to improve health quality and population health while reducing
 7 25 health care costs. To the maximum extent possible, funding
 7 26 allocated in this subsection shall be utilized as matching
 7 27 funds for Medicaid program reimbursement.

7 28 3. The university of Iowa hospitals and clinics under
 7 29 the control of the state board of regents shall not receive
 7 30 indirect costs from the funds appropriated in this section.
 7 31 The university of Iowa hospitals and clinics billings to the
 7 32 department shall be on at least a quarterly basis.

Prohibits the University of Iowa Hospitals and Clinics (UIHC) from receiving indirect cost reimbursement from General Fund appropriations to the HHS. Requires the UIHC to submit billings to the HHS on a quarterly basis each year.

7 33 CHILD SUPPORT SERVICES

7 34 Sec. 8. CHILD SUPPORT SERVICES. There is appropriated from
 7 35 the general fund of the state to the department of health and
 8 1 human services for the fiscal year beginning July 1, 2024, and
 8 2 ending June 30, 2025, the following amount, or so much thereof
 8 3 as is necessary, to be used for the purposes designated:
 8 4 For child support services, including salaries, support,
 8 5 maintenance, and miscellaneous purposes:
 8 6 \$ 15,434,282

General Fund appropriation to the HHS — Child Support Services for FY 2025.

DETAIL: Due to organizational changes within the HHS, appropriations from FY 2024 have been restructured. The new FY 2025 appropriation for Child Support Services is comprised of moneys formerly appropriated to Child Support Recoveries. This restructured appropriation represents no change in funding compared to estimated FY 2024.

8 7 1. Federal access and visitation grant moneys shall be used
 8 8 for services designed to increase compliance with the child
 8 9 access provisions of court orders, including but not limited to
 8 10 neutral visitation sites and mediation services.

Specifies the process for utilization of receipts from federal Access and Visitation Grants.

8 11 2. The appropriation made to the department for child
 8 12 support services may be used throughout the fiscal year in the
 8 13 manner necessary for purposes of cash flow management, and for
 8 14 cash flow management purposes the department may temporarily
 8 15 draw more than the amount appropriated, provided the amount
 8 16 appropriated is not exceeded at the close of the fiscal year.

Permits the HHS to use the appropriation for child support recovery as necessary and draw more than appropriated if needed to solve any cash flow problems, provided the amount appropriated is not exceeded at the end of the fiscal year.

8 17 TEMPORARY ASSISTANCE FOR NEEDY FAMILIES BLOCK GRANT

8 18 Sec. 9. TEMPORARY ASSISTANCE FOR NEEDY FAMILIES BLOCK
 8 19 GRANT. There is appropriated from the special fund created in
 8 20 section 8.41 to the department of health and human services
 8 21 for the fiscal year beginning July 1, 2024, and ending June
 8 22 30, 2025, from moneys received under the federal temporary
 8 23 assistance for needy families (TANF) block grant pursuant
 8 24 to the federal Personal Responsibility and Work Opportunity
 8 25 Reconciliation Act of 1996, Pub.L. No.104-193, and successor
 8 26 legislation, the following amounts, or so much thereof as is
 8 27 necessary, to be used for the purposes designated:

Appropriates a total of \$143,980,383 from the Temporary Assistance for Needy Families (TANF) Federal Block Grant Fund appropriation for FY 2025.

DETAIL: The federal government implemented Federal Welfare Reform on August 22, 1996. Reform eliminated Aid to Families with Dependent Children (AFDC), ending federal entitlement and creating a flexible funding source for states to use in helping needy families achieve self-sufficiency. Iowa's annual TANF award is \$131,524,959; however, federal law reduces the annual award by \$434,032 and reserves those funds for research and evaluation projects. In addition, \$582,859 is allocated to Native American tribes.

8 28 1. For community access and eligibility, FIP, the PROMISE
 8 29 JOBS program, implementing family investment agreements in
 8 30 accordance with chapter 239B, and for continuation of the
 8 31 program promoting awareness of the benefits of a healthy
 8 32 marriage:
 8 33 \$ 12,988,627

Appropriates funds from the TANF Block Grant for community access and eligibility, the FIP, the PROMISE JOBS program, implementing family investment agreements, and for continuation of the Program promoting awareness of the benefits of a healthy marriage.

DETAIL: Due to organizational changes within the TANF Block Grant, appropriations from FY 2024 have been restructured. The new FY 2025 appropriation for Community Access and Eligibility, the FIP, and the PROMISE JOBS Program is comprised of moneys formerly appropriated to the following areas under the TANF Block Grant:

- FIP Cash Grants/Recoupments/Postage
- FIP Family Self-Sufficiency Grants
- FIP/PROMISE JOBS
- FIP Technology
- FIP Food Assistance (Healthy Marriage)
- General Administration
- Field Operations

This restructured appropriation represents no change in funding compared to estimated FY 2024.

8 34 2. For community access and eligibility to provide
 8 35 pregnancy prevention grants on the condition that family
 9 1 planning services are funded:
 9 2 \$ 1,913,203

Appropriates funds from the TANF Block Grant for pregnancy prevention grants on the condition that family planning services are funded.

DETAIL: Due to organizational changes within the TANF Block Grant, appropriations from FY 2024 have been restructured. The new FY 2025 appropriation for Community Access and Eligibility, the FIP,

and the PROMISE JOBS Program is comprised of moneys formerly appropriated to the Pregnancy Prevention appropriation under the TANF Block Grant. This restructured appropriation represents no change in funding compared to estimated FY 2024.

9 3 Pregnancy prevention grants shall be awarded to programs
9 4 in existence on or before July 1, 2024, if the programs have
9 5 demonstrated positive outcomes. Grants shall be awarded to
9 6 pregnancy prevention programs which are developed after July
9 7 1, 2024, if the programs are based on existing models that
9 8 have demonstrated positive outcomes. Grants shall comply with
9 9 the requirements provided in 1997 Iowa Acts, chapter 208,
9 10 section 14, subsections 1 and 2, including the requirement that
9 11 grant programs must emphasize sexual abstinence. Priority in
9 12 the awarding of grants shall be given to programs that serve
9 13 areas of the state which demonstrate the highest percentage of
9 14 unplanned pregnancies of females of childbearing age within the
9 15 geographic area to be served by the grant.

Requires the HHS to award pregnancy prevention grants only to programs that are based on existing models and have demonstrated positive outcomes. Requires pregnancy prevention grants from the TANF to include the requirement that sexual abstinence be emphasized. Specifies that priority in awarding the grants is to be given to programs in areas of Iowa that have the highest percentage of unplanned adolescent pregnancies within the geographic area served by the grant.

9 16 3. For community access and eligibility to meet one of the
9 17 four core purposes of TANF as specified in 45 C.F.R. §260.20,
9 18 including by modernizing the program to promote economic
9 19 mobility and self-sufficiency, ensuring that families are able
9 20 to overcome benefit cliffs, encouraging healthy families, and
9 21 streamlining service delivery to reduce duplication:
9 22 \$ 5,000,000

Appropriates funds from the TANF Block Grant to promote economic mobility and self-sufficiency, encourage healthy families, and streamline service delivery.

DETAIL: This is a new appropriation under the TANF Block Grant for FY 2025.

9 23 4. For technology needs related to child support
9 24 modernization of the Iowa collections and reporting (ICAR)
9 25 system and for a closed loop referral system for the thrive
9 26 Iowa program:
9 27 \$ 5,000,000

Appropriates funds from the TANF Block Grant for technology needs for the Iowa Collections and Reporting System and the Thrive Iowa Program.

DETAIL: This is a new appropriation under the TANF Block Grant for FY 2025.

9 28 5. For early intervention and supports for the family
9 29 development and self-sufficiency (FaDSS) grant program in
9 30 accordance with section 216A.107:
9 31 \$ 2,888,980

Appropriates funds from the TANF Block Grant to the Family Development and Self-Sufficiency (FaDSS) Grant Program.

DETAIL: This is no change compared to estimated FY 2024. The FaDSS Grant Program is a home-based supportive service that assists families with significant or multiple barriers to reach self-sufficiency. The Program was created during the 1988 General Assembly to assist families participating in the FIP.

9 32 Of the funds allocated for the FaDSS grant program in this
 9 33 subsection, not more than 5 percent of the funds shall be used
 9 34 for administrative purposes.

Specifies that no more than 5.00% (\$144,449) of the funds allocated for the FaDSS Grant Program can be used for administrative purposes.

9 35 6. For early intervention and supports for child abuse
 10 1 prevention grants:
 10 2 \$ 125,000

Appropriates funds from the TANF Block Grant for child abuse prevention grants.

DETAIL: This is no change compared to estimated FY 2024.

10 3 7. For accountability, compliance, program integrity,
 10 4 technology needs, and other resources necessary to meet federal
 10 5 and state reporting, tracking, and case management requirements
 10 6 and other departmental needs:
 10 7 \$ 3,533,647

Appropriates funds from the TANF Block Grant for administration and compliance for federal welfare reform reporting, tracking, and case management technology and resource needs.

DETAIL: Due to organizational changes within the TANF Block Grant, appropriations from FY 2024 have been restructured. The new FY 2025 appropriation for Accountability, Compliance, Program Integrity, and Technology Needs is comprised of moneys formerly appropriated to the General Administration appropriation under the TANF Block Grant. This restructured appropriation represents no change in funding compared to estimated FY 2024.

10 8 8. For state child care assistance:
 10 9 \$ 47,166,826

Appropriates funds from the TANF Block Grant to Child Care Assistance (CCA).

DETAIL: This is no change compared to estimated FY 2024.

10 10 9. For child protective services:
 10 11 \$ 62,364,100

Appropriates funds from the TANF Block Grant to Child Protective Services (formerly Child and Family Services).

DETAIL: Due to organizational changes within the TANF Block Grant, appropriations from FY 2024 have been restructured. The new FY 2025 appropriation for Child Protective Services is comprised of moneys formerly appropriated to the Field Operations and Child and Family Services appropriations under the TANF Block Grant. This restructured appropriation represents no change in funding compared to estimated FY 2024.

10 12 10. For child protective services for the kinship stipend
 10 13 program:

Appropriates funds from the TANF Block Grant for the Kinship Stipend Program.

10 14 \$ 3,000,000

DETAIL: This is a new appropriation for FY 2025. The Program provides support for children in a kinship caregiver's home.

10 15 DIVISION VI
10 16 MEDICAL ASSISTANCE — STATE SUPPLEMENTARY ASSISTANCE —
10 17 AND WELL KIDS IN IOWA PROGRAM AND OTHER HEALTH-RELATED PROGRAMS
10 18 — FY 2024-2025

10 19 Sec. 10. MEDICAL ASSISTANCE, STATE SUPPLEMENTARY
10 20 ASSISTANCE, AND HEALTHY AND WELL KIDS IN IOWA PROGRAM. There
10 21 is appropriated from the general fund of the state to the
10 22 department of health and human services for the fiscal year
10 23 beginning July 1, 2024, and ending June 30, 2025, the following
10 24 amount, or so much thereof as is necessary, to be used for the
10 25 purposes designated:

General Fund appropriation to the HHS for the Medical Assistance (Medicaid), State Supplementary Assistance (SSA), and Healthy and Well Kids in Iowa (Hawki) Program for FY 2025.

10 26 For medical assistance program reimbursement and associated
10 27 costs as specifically provided in the reimbursement
10 28 methodologies in effect on June 30, 2024, except as otherwise
10 29 expressly authorized by law, consistent with options under
10 30 federal law and regulations, and contingent upon receipt of
10 31 approval from the office of the governor of reimbursement
10 32 for each abortion performed under the program; for the state
10 33 supplementary assistance program; for the health insurance
10 34 premium payment program; and for maintenance of the healthy and
10 35 well kids in Iowa (Hawki) program pursuant to chapter 514I,
11 1 including supplemental dental services, for receipt of federal
11 2 financial participation under Tit.XXI of the federal Social
11 3 Security Act, which creates the children's health insurance
11 4 program; and for other specified health-related programs:

DETAIL: This is a net increase of \$107,680,835 compared to estimated FY 2024. The changes include:

11 5 \$1,651,307,614

- An increase of \$41,322,970 to include the Children's Health Insurance Program (CHIP) in the Medicaid appropriation beginning in FY 2025. The CHIP amount is an increase of \$2,661,282 compared to estimated FY 2024 due to higher enrollment in the Hawki Program and is offset by appropriation transfers to Community Access and Eligibility and Health Program Operations beginning in FY 2025.
- An increase of \$40,920,314 to fund Medicaid at the Medicaid Forecasting Group's March 2024 estimate, which does not include an FY 2025 increase for Medicaid capitation rates.
- An increase of \$16,500,000 to the Home and Community-Based Services (HCBS) program to offset federal American Rescue Plan Act of 2021 (ARPA) funding that expired.
- An increase of \$14,600,000 to increase access to community-based providers.
- An increase of \$5,000,000 for enhanced case management to coordinate care for vulnerable populations.
- An increase of \$4,479,762 to include SSA in the Medicaid appropriation beginning in FY 2025. The SSA amount is a decrease of \$2,869,240 compared to estimated FY 2024 due to lower enrollment and an appropriation transfer to Aging and Disability Services beginning in FY 2025.
- An increase of \$3,000,000 for a home health provider rate adjustment.
- An increase of \$2,251,436 for a mental health provider rate adjustment.
- An increase of \$2,000,000 for pharmacy dispensing fees.

- An increase of \$1,779,122 for an increase in income eligibility up to 300.0% of the federal poverty level (FPL) for the Medicaid for Employed People with Disabilities (MEPD) program.
- An increase of \$418,121 for a physical therapist provider rate adjustment.
- An increase of \$369,000 for Psychiatric Medical Institutions for Children (PMICs) tiered provider rates.
- An increase of \$276,947 for a community mental health centers provider rate adjustment.
- An increase of \$198,624 for a nurse practitioner rate adjustment.
- An increase of \$144,014 for a medical supplies provider rate adjustment.
- An increase of \$86,000 for biomarker testing coverage.
- An increase of \$64,692 for an occupational therapist provider rate adjustment.
- An increase of \$32,832 for a psychologist rate adjustment.
- An increase of \$29,691 for a physician assistant provider rate adjustment.
- An increase of \$3,122 for a certified nurse midwife provider rate adjustment.
- A decrease of \$2,940,726 for an appropriation transfer to Community Access and Eligibility beginning in FY 2025.
- A decrease of \$6,000,000 to reflect revenue enhancements from the Hospital Directed Payment Program that allows the Legislature to reduce the Medicaid General Fund appropriation.
- A decrease of \$16,855,086 for an appropriation transfer to Health Program Operations beginning in FY 2025.

11 6 1. Of the funds appropriated in this section,
 11 7 \$1,605,504,882 is allocated for medical assistance program
 11 8 reimbursement and associated costs.

Allocates \$1,605,504,882 for the Medicaid Program.

DETAIL: This is an increase of \$61,878,103 compared to estimated FY 2024. This allocation was previously located under the appropriation for Medical Assistance.

11 9 a. Of the funds allocated in this subsection, \$800,000 shall
 11 10 be used for the renovation and construction of certain nursing
 11 11 facilities, consistent with the provisions of chapter 249K.

Allocates \$800,000 of the funds appropriated for Medicaid to provide assistance to nursing homes for facility improvements.

DETAIL: This is no change compared to the estimated FY 2024 allocation. This allocation was previously located under the appropriation for General Administration. Prior to FY 2022, the Program was funded through the Rebuild Iowa Infrastructure Fund. The Nursing Home Financial Assistance Program in Iowa Code

		chapter 249K was established in 2007 Iowa Acts, chapter 219 (FY 2008 Infrastructure Appropriations Act), to support an appropriate number of nursing facility beds for the State's citizens and financially assist nursing facilities to remain compliant with applicable health and safety regulations.
11 12	b. Of the funds allocated in this subsection, \$3,383,880	Allocates \$3,383,880 of the funds appropriated for Medicaid to
11 13	shall be used for program administration, outreach, and	administer the State Family Planning Services Program. Permits
11 14	enrollment activities of the state family planning services	\$200,000 to be used for administrative expenses.
11 15	program pursuant to section 217.41B, and of this amount, the	
11 16	department may use \$200,000 for administrative expenses.	DETAIL: This is no change compared to the estimated FY 2024
		allocation. This allocation was previously located under the
		appropriation for Medical Assistance.
11 17	c. Of the funds allocated in this subsection, \$369,000 shall	Allocates \$369,000 of the funds appropriated for Medicaid to provide
11 18	be used to provide enhanced reimbursement for a psychiatric	enhanced reimbursement for a PMIC as specified in 2024 Iowa Acts,
11 19	medical institution for children that meets the selection	House File 2402 (Psychiatric Medical Institutions for Children,
11 20	criteria and for the purposes specified in 2024 Iowa Acts,	Medicaid Rates Bill), or successor legislation, if enacted.
11 21	House File 2402, or successor legislation, if enacted.	DETAIL: This is a new allocation for FY 2025.
11 22	d. Of the funds allocated in this subsection, \$86,000 shall	Allocates \$86,000 of the funds appropriated for Medicaid to provide
11 23	be used to provide biomarker testing under the Medicaid program	biomarker testing as specified in 2024 Iowa Acts, House File 2668
11 24	as specified in 2024 Iowa Acts, House File 2668, or successor	(Biomarker Testing, Health Insurance Bill), or successor legislation, if
11 25	legislation, if enacted.	enacted.
		DETAIL: This is a new allocation for FY 2025.
11 26	e. Of the funds allocated in this subsection, \$32,832 shall	Allocates \$32,832 of the funds appropriated for Medicaid to increase
11 27	be used to increase the reimbursement rate under the Medicaid	the reimbursement rates for psychologists.
11 28	program for psychologists.	DETAIL: This is a new allocation for FY 2025.
11 29	f. Of the funds allocated in this subsection, \$198,624 shall	Allocates \$198,624 of the funds appropriated for Medicaid to increase
11 30	be used to increase the reimbursement rate under the Medicaid	reimbursement rates for nurse practitioners.
11 31	program for nurse practitioners.	DETAIL: This is a new allocation for FY 2025.
11 32	g. Of the funds allocated in this subsection, \$2,000,000	Allocates \$2,000,000 of the funds appropriated for Medicaid to adjust
11 33	shall be used for adjustment of the Medicaid pharmacy	the Medicaid pharmacy dispensing fee.

11 34	dispensing fee.	DETAIL: This is a new allocation for FY 2025.
11 35 h. Of the funds allocated in this subsection, \$1,779,122 12 1 shall be used to increase income eligibility for the Medicaid 12 2 for employed people with disabilities program to 300 percent of 12 3 the most recently revised official poverty guidelines published 12 4 by the United States department of health and human services.	Allocates \$1,779,122 of the funds appropriated for Medicaid for an increase in income eligibility up to 300.0% of the FPL for the MEPD program.	
12 4	DETAIL: This is a new allocation for FY 2025.	
12 5 i. Of the funds allocated in this subsection, \$2,251,436 12 6 shall be used to increase reimbursement rates under the 12 7 Medicaid program for mental health providers.	Allocates \$2,251,436 of the funds appropriated for Medicaid to increase reimbursement rates for mental health providers.	
12 7	DETAIL: This is a new allocation for FY 2025.	
12 8 2. Iowans support reducing the number of abortions 12 9 performed in our state. Funds appropriated under this section 12 10 shall not be used for abortions, unless otherwise authorized 12 11 under this section.	Specifies conditions that permit the Medicaid Program to reimburse providers for abortion services.	
12 12 3. The provisions of this section relating to abortions 12 13 shall also apply to the Iowa health and wellness plan created 12 14 pursuant to chapter 249N.	Specifies that the policy on abortion also applies to the Iowa Health and Wellness Plan.	
12 15 4. Of the funds appropriated in this section, \$4,479,762 is 12 16 allocated for the state supplementary assistance program.	Allocates \$4,479,762 of the funds appropriated for Medicaid for the SSA Program.	
12 16	DETAIL: This is a new allocation for FY 2025.	
12 17 5. Of the funds appropriated in this section, \$41,322,970 12 18 is allocated for maintenance of the Hawki program pursuant 12 19 to chapter 514I, including supplemental dental services, for 12 20 receipt of federal financial participation under Tit.XXI of 12 21 the federal Social Security Act, which creates the children's 12 22 health insurance program.	Allocates \$41,322,970 of the funds appropriated for Medicaid for the CHIP, also known as the Hawki Program.	
12 22	DETAIL: This is an increase of \$2,661,282 compared to the estimated FY 2024 allocation due to a projected increase in enrollment through FY 2025. This allocation was previously located under the appropriation for CHIP.	
12 23	HEALTH PROGRAM OPERATIONS	
12 24 Sec. 11. HEALTH PROGRAM OPERATIONS. There is appropriated 12 25 from the general fund of the state to the department of health 12 26 and human services for the fiscal year beginning July 1,	General Fund appropriation to the HHS — Health Program Operations for FY 2025.	

12 27 2024, and ending June 30, 2025, the following amount, or so
 12 28 much thereof as is necessary, to be used for the purposes
 12 29 designated:
 12 30 For health program operations:
 12 31 \$ 39,597,231

DETAIL: Due to organizational changes within the HHS, appropriations from FY 2024 have been restructured. The new FY 2025 appropriation for Health Program Operations is comprised of moneys formerly appropriated to the following areas:

- General Administration
- Field Operations
- FIP/PROMISE JOBS
- Medical Assistance
- Children's Health Insurance
- Health Program Operations
- Public Protection

This restructured appropriation represents a net increase of \$1,185,661 compared to estimated FY 2024 for a federal services data hub connection, a 10.00% procurement factor for six major contracts, and to replace pharmaceutical settlement funds for Health Program Operations.

12 32 1. The department of inspections, appeals, and licensing
 12 33 shall provide all state matching funds for survey and
 12 34 certification activities performed by the department of
 12 35 inspections, appeals, and licensing. The department of health
 13 1 and human services is solely responsible for distributing the
 13 2 federal matching funds for such activities.

Requires the Department of Inspections, Appeals, and Licensing (DIAL) to provide the State matching funds for survey and certification activities and requires the HHS to distribute the federal matching funds.

13 3 2. Of the funds appropriated in this section, a sufficient
 13 4 amount shall be used for the administration of the health
 13 5 insurance premium payment program, including salaries, support,
 13 6 maintenance, and miscellaneous purposes.

Specifies that a sufficient amount must be used for the administration of the Health Insurance Premium Payment Program.

13 7 3. Of the funds appropriated in this section, \$750,000 shall
 13 8 be used for the state poison control center. Pursuant to the
 13 9 directive under 2014 Iowa Acts, chapter 1140, section 102, the
 13 10 federal matching funds available to the state poison control
 13 11 center from the department under the federal Children's Health
 13 12 Insurance Program Reauthorization Act of 2009 allotment shall
 13 13 be subject to the federal administrative cap rule of 10 percent
 13 14 applicable to funding provided under Tit.XXI of the federal
 13 15 Social Security Act and included within the department's
 13 16 calculations of the cap.

Allocates \$750,000 for the State Poison Control Center.

DETAIL: This is no change compared to the estimated FY 2024 allocation. This allocation was previously located under the appropriation for Public Protection. The Center is allowed to transfer as much funding as needed for the purpose of receiving matching federal funds.

13 17 4. Unless otherwise provided, annual increases for services
 13 18 provided through contracts funded under this section shall
 13 19 not exceed the amount by which the consumer price index for
 13 20 all urban consumers increased during the most recently ended
 13 21 calendar year.

Specifies that annual increases for services provided through contracts must not exceed the increase in the Consumer Price Index for All Urban Consumers for the most recently ended calendar year.

13 22 HEALTH CARE ACCOUNTS AND FUNDS

13 23 Sec. 12. PHARMACEUTICAL SETTLEMENT ACCOUNT — DEPARTMENT
 13 24 OF HEALTH AND HUMAN SERVICES. There is appropriated from the
 13 25 pharmaceutical settlement account created in section 249A.33 to
 13 26 the department of health and human services for the fiscal year
 13 27 beginning July 1, 2024, and ending June 30, 2025, the following
 13 28 amount, or so much thereof as is necessary, to be used for the
 13 29 purposes designated:

Pharmaceutical Settlement Account appropriation to the HHS to supplement Health Program Operations under the Medicaid Program.

DETAIL: This is no change compared to estimated FY 2024.

13 30 Notwithstanding any provision of law to the contrary, to
 13 31 supplement the appropriation made in this Act for health
 13 32 program operations under the medical assistance program for the
 13 33 same fiscal year:

13 34 \$ 234,193

13 35 Sec. 13. QUALITY ASSURANCE TRUST FUND — DEPARTMENT OF
 14 1 HEALTH AND HUMAN SERVICES. Notwithstanding any provision to
 14 2 the contrary and subject to the availability of funds, there is
 14 3 appropriated from the quality assurance trust fund created in
 14 4 section 249L.4 to the department of health and human services
 14 5 for the fiscal year beginning July 1, 2024, and ending June 30,
 14 6 2025, the following amount, or so much thereof as is necessary,
 14 7 for the purposes designated:

Quality Assurance Trust Fund appropriation to the HHS to supplement nursing facilities under the Medicaid Program.

DETAIL: This is no change compared to estimated FY 2024, which is related to increasing the Quality Assurance Assessment Fee from 3.00% to 6.00% effective April 1, 2023. This fee change was authorized in 2018 Iowa Acts, chapter [1165](#) (FY 2019 Health and Human Services Appropriation Act).

14 8 To supplement the appropriation made in this Act from the
 14 9 general fund of the state to the department of health and human
 14 10 services for medical assistance for the same fiscal year:

14 11 \$ 111,216,205

14 12 Sec. 14. HOSPITAL HEALTH CARE ACCESS TRUST FUND —
 14 13 DEPARTMENT OF HEALTH AND HUMAN SERVICES. Notwithstanding any
 14 14 provision to the contrary and subject to the availability of
 14 15 funds, there is appropriated from the hospital health care
 14 16 access trust fund created in section 249M.4 to the department
 14 17 of health and human services for the fiscal year beginning July
 14 18 1, 2024, and ending June 30, 2025, the following amount, or so
 14 19 much thereof as is necessary, for the purposes designated:

Hospital Health Care Access Trust Fund appropriation to the HHS for the Medicaid Program.

DETAIL: This is no change compared to estimated FY 2024.

14 20 To supplement the appropriation made in this Act from the
 14 21 general fund of the state to the department of health and human
 14 22 services for medical assistance for the same fiscal year:
 14 23 \$ 33,920,554

14 24 REIMBURSEMENT RATES

14 25 Sec. 15. REIMBURSEMENT RATES.

14 26 1. Reimbursement for medical assistance, state
 14 27 supplementary assistance, and social service providers and
 14 28 services reimbursed under the purview of the department of
 14 29 health and human services shall remain at the reimbursement
 14 30 rate or shall be determined pursuant to the reimbursement
 14 31 methodology in effect on June 30, 2024, with the exception of
 14 32 the following:

- 14 33 a. If reimbursement is otherwise negotiated by contract or
- 14 34 pursuant to an updated fee schedule.
- 14 35 b. As otherwise provided in this section.

15 1 2. a. Notwithstanding any provision of law to the contrary,
 15 2 for the fiscal year beginning July 1, 2024, and ending June
 15 3 30, 2025, the department of health and human services shall
 15 4 reimburse case-mix nursing facility rates at the amounts in
 15 5 effect on June 30, 2024.
 15 6 b. The department of health and human services shall
 15 7 calculate each nursing facility's case-mix index for the period
 15 8 beginning July 1, 2023, using weighting based on the current
 15 9 patient driven payment model (PDPM) schedule. Rosters shall be
 15 10 made to show a separate calculation to determine the average
 15 11 case-mix index for a nursing-facility-wide case mix index, and
 15 12 a case-mix index for the residents of a nursing facility who
 15 13 are Medicaid recipients using all minimum data set reports by
 15 14 the nursing facility for the previous semi-annual period using
 15 15 a day weighted calculation.

15 16 3. For the fiscal year beginning July 1, 2024, Medicaid
 15 17 provider rates shall be adjusted to 85 percent of the benchmark
 15 18 rates based on the department's 2023 Medicaid rate review for
 15 19 all of the following Medicaid providers:
 15 20 a. Home health agencies.
 15 21 b. Medical supply providers.
 15 22 c. Physician assistants.

Requires that reimbursement for Medical Assistance, SSA, and social service providers and services must remain at the reimbursement rate or be determined pursuant to the reimbursement methodology, unless otherwise negotiated by contract or provided in this Section.

Requires the HHS to reimburse case-mix nursing facility reimbursement rates for FY 2025 at the rates in effect in FY 2024. The HHS is required to calculate each nursing facility's case-mix index for FY 2024 using weighting based on the current patient driven payment model (PDPM) schedule.

Requires the FY 2025 provider rates for home health agencies, medical supply providers, physician assistants, physical therapists, occupational therapists, and certified nurse midwives to be adjusted to 85.00% of the benchmark rates based on the HHS 2023 Medicaid rate review.

15 23	d. Physical therapists.	
15 24	e. Occupational therapists.	
15 25	f. Certified nurse midwives.	
15 26	4. For the fiscal year beginning July 1, 2024, reimbursement	Allocates \$14,600,000 to increase the FY 2025 reimbursement rates for HCBS providers to the extent possible within State funding.
15 27	rates for home and community-based services providers shall be	
15 28	increased compared to the rates in effect on June 30, 2024, to	
15 29	the extent possible within the state funding, including the	
15 30	\$14,600,000 provided for this purpose.	
15 31	5. For the fiscal year beginning July 1, 2024, reimbursement	Allocates \$276,947 to increase FY 2025 reimbursement rates for community mental health centers.
15 32	rates for community mental health centers shall be increased	
15 33	compared to the rates in effect on June 30, 2024, to the extent	
15 34	possible within the state funding, including the \$276,947	
15 35	provided for this purpose.	
16 1	6. For the fiscal year beginning July 1, 2024, enhanced	Enhances reimbursement rates for a PMIC specified in 2024 Iowa Acts, House File 2402 (Psychiatric Medical Institutions for Children, Medicaid Rates Bill), or successor legislation, if enacted. DETAIL: The Fiscal Note for HF 2402 detailed approximately \$369,000 in State costs in FY 2025 to implement enhanced reimbursement rates for a PMIC.
16 2	reimbursement shall be provided for a psychiatric medical	
16 3	institution for children that meets the selection criteria	
16 4	specified in 2024 Iowa Acts, House File 2402, or successor	
16 5	legislation, if enacted.	
16 6	7. For the fiscal year beginning July 1, 2024, the	Allocates \$32,832 to increase the FY 2025 reimbursement rates for psychologists.
16 7	reimbursement rate for psychologists shall be increased within	
16 8	the additional \$32,832 appropriated for this purpose.	
16 9	8. For the fiscal year beginning July 1, 2024, the pharmacy	Allocates \$2,000,000 to increase the FY 2025 pharmacy dispensing fee.
16 10	dispensing fee shall be adjusted within the additional	
16 11	\$2,000,000 appropriated for this purpose.	
16 12	9. For the fiscal year beginning July 1, 2024, the	Allocates \$198,624 to increase the FY 2025 reimbursement rates for nurse practitioners.
16 13	reimbursement rate for nurse practitioners shall be increased	
16 14	within the additional \$198,624 appropriated for this purpose.	
16 15	10. For the fiscal year beginning July 1, 2024, the	Allocates \$2,251,436 to increase the FY 2025 reimbursement rates for mental health providers.
16 16	reimbursement rates for mental health providers shall be	
16 17	increased within the additional \$2,251,436 appropriated for	
16 18	this purpose.	

16 20 FAMILY WELL-BEING AND PROTECTION — FY 2024-2025

16 21 STATE CHILD CARE ASSISTANCE

16 22 Sec. 16. STATE CHILD CARE ASSISTANCE. There is appropriated
16 23 from the general fund of the state to the department of health
16 24 and human services for the fiscal year beginning July 1,
16 25 2024, and ending June 30, 2025, the following amount, or so
16 26 much thereof as is necessary, to be used for the purposes
16 27 designated:

16 28 For state child care assistance in accordance with section
16 29 237A.13:

16 30 \$ 34,966,931

16 31 A portion of the state match for the federal child care and
16 32 development block grant shall be provided as necessary to meet
16 33 federal matching funds requirements through the state general
16 34 fund appropriation made for child development grants and other
16 35 programs for at-risk children in section 279.51.

17 1 EARLY INTERVENTION AND SUPPORTS

17 2 Sec. 17. EARLY INTERVENTION AND SUPPORTS. There is
17 3 appropriated from the general fund of the state to the
17 4 department of health and human services for the fiscal year
17 5 beginning July 1, 2024, and ending June 30, 2025, the following
17 6 amount, or so much thereof as is necessary, to be used for the
17 7 purposes designated:

17 8 For promoting the optimum health status for children
17 9 and adolescents from birth through 21 years of age, and for
17 10 families:

17 11 \$ 35,277,739

17 12 1. Of the funds appropriated in this section, not more
17 13 than \$734,000 shall be used for the healthy opportunities for

General Fund appropriation to the HHS for CCA.

DETAIL: Due to organizational changes within the HHS, appropriations from FY 2024 have been restructured. The new FY 2025 appropriation for State CCA is comprised of moneys formerly appropriated to CCA. This restructured appropriation represents no change compared to estimated FY 2024.

Requires a portion of the State match for the federal Child Care and Development Block Grant to be provided from the State appropriation for child development grants and other programs for at-risk children as necessary to meet federal matching requirements.

General Fund appropriation to the HHS — Early Intervention and Supports for FY 2025.

DETAIL: Due to organizational changes within the HHS, appropriations from FY 2024 have been restructured. The new FY 2025 appropriation for Early Intervention and Supports is comprised of moneys formerly appropriated to the following areas:

- Human Rights Administration
- Community Advocacy and Services
- FIP/PROMISE JOBS
- CCA
- Healthy Children and Families
- Child Abuse Prevention

This restructured appropriation represents no change in funding compared to estimated FY 2024.

Limits the General Fund amount used to fund the Healthy Opportunities for Parents to Experience Success – Healthy Families

17 14 parents to experience success (HOPES)-healthy families Iowa
17 15 (HFI) program established pursuant to section 135.106.

Iowa (HOPES-HFI) Program to \$734,000.

DETAIL: This is no change compared to the estimated FY 2024 allocation. This allocation was previously located under the appropriation for Healthy Children and Families. This Program provides support for families through home visits that begin during pregnancy or at the birth of a child and can continue through age four.

17 16 2. Of the funds appropriated in this section, \$4,313,854 is
17 17 allocated for the FaDSS grant program. Of the funds allocated
17 18 for the FaDSS grant program in this subsection, not more than 5
17 19 percent of the funds shall be used for administration of the
17 20 grant program.

Allocates \$4,313,854 for the FaDSS Grant Program. Requires that a maximum of 5.00% (\$215,963) of the allocation be spent on administration of the Program.

DETAIL: This is no change compared to estimated FY 2024. This allocation was previously located under the moneys spent from the FIP Account.

17 21 3. Of the funds appropriated in this section, \$29,256,799
17 22 shall be used for the purposes of the early childhood Iowa fund
17 23 created in section 256I.11.

Allocates \$29,256,799 for the Early Childhood Iowa (ECI) Fund.

DETAIL: This is no change compared to estimated FY 2024. This allocation was previously located under the appropriation for CCA. The funds are distributed to local ECI Area Boards in addition to the following four allocations:

- Funding for technical assistance through the ECI Office within the Department of Management (DOM) and to provide skill development and support for training the ECI State Board.
- Funding to local ECI Area Boards to improve the quality of early care, health, and education programs.
- Funding to support professional development and training activities for people working in early care, health, and education.
- Funding for the State's early childhood database system.
- Funding for community-based early childhood programs

17 24 4. Of the funds appropriated in this section, \$1,000,000
17 25 shall be used for the purposes of program administration and
17 26 provision of pregnancy support services through the more
17 27 options for maternal support program in accordance with section
17 28 217.41C.

Allocates \$1,000,000 to be used for administration and pregnancy support services through the More Options for Maternal Support (MOMS) Program.

DETAIL: This is no change compared to estimated FY 2024. This allocation was previously located under the appropriation for General Administration.

17 29 CHILD PROTECTIVE SERVICES

17 30 Sec. 18. CHILD PROTECTIVE SERVICES. There is appropriated
 17 31 from the general fund of the state to the department of health
 17 32 and human services for the fiscal year beginning July 1,
 17 33 2024, and ending June 30, 2025, the following amount, or so
 17 34 much thereof as is necessary, to be used for the purposes
 17 35 designated:
 18 1 For child, family, and adoption services, and for salaries,
 18 2 support, maintenance, and miscellaneous purposes:
 18 3 \$ 170,374,778

General Fund appropriation to the HHS — Child Protective Services for FY 2025.

DETAIL: Due to organizational changes within the HHS, appropriations from FY 2024 have been restructured. The new FY 2025 appropriation for Child Protective Services is comprised of moneys formerly appropriated to the following areas:

- General Administration
- Field Operations
- Adoption Subsidy
- Child and Family Services

This restructured appropriation represents a net increase of \$8,330,387 compared to estimated FY 2024.

18 4 1. Of the funds appropriated in this section, \$1,717,000
 18 5 is allocated specifically for expenditure for fiscal year
 18 6 2024-2025 through the decategorization services funding pools
 18 7 and governance boards established pursuant to section 232.188.

Allocates \$1,717,000 for decategorization services funding pools and governance boards.

DETAIL: This is no change compared to the estimated FY 2024 allocation. This allocation was previously located under the appropriation for Child and Family Services.

18 8 2. Federal funds received by the state during the fiscal
 18 9 year beginning July 1, 2024, as the result of the expenditure
 18 10 of state funds appropriated during a previous state fiscal
 18 11 year for a service or activity funded under this section, are
 18 12 appropriated to the department to be used as additional funding
 18 13 for services and purposes provided for under this section.
 18 14 Notwithstanding section 8.33, moneys received in accordance
 18 15 with this subsection that remain unencumbered or unobligated at
 18 16 the close of the fiscal year shall not revert to any fund but
 18 17 shall remain available for the purposes designated until the
 18 18 close of the succeeding fiscal year.

Requires federal funds received in FY 2025 because of the expenditure of State funds in a previous year to be used for child protective services. Allows any unexpended funds to remain available for expenditure through FY 2026.

18 19 3. a. Of the funds appropriated in this section, \$748,000
 18 20 is allocated for the payment of the expenses of court-ordered
 18 21 services provided to children who are under the supervision
 18 22 of the department, which expenses are a charge upon the state

Allocates up to \$748,000 for court-ordered services provided to children who are under the supervision of the HHS.

DETAIL: This is no change compared to the estimated FY 2024 allocation. This allocation was previously located under the

18 23 pursuant to section 232.141, subsection 4.	appropriation for Child and Family Services.
18 24 b. Notwithstanding chapter 232 or any other provision of 18 25 law to the contrary, a district or juvenile court shall not 18 26 order any service which is a charge upon the state pursuant 18 27 to section 232.141 if the court-ordered services distribution 18 28 amount is insufficient to pay for the service.	Prohibits a district or juvenile court from ordering any service that is a charge to the State if there are insufficient funds to pay for the service.
18 29 4. Of the funds appropriated in this section, \$1,658,000 18 30 shall be used for the child protection center grant program for 18 31 child protection centers located in Iowa in accordance with 18 32 section 135.118. The grant amounts under the program shall be 18 33 equalized so that each center receives a uniform base amount of 18 34 \$245,000, and so that the remaining funds are awarded through 18 35 a funding formula based upon the volume of children served. 19 1 To increase access to child protection center services for 19 2 children in rural areas, the funding formula for the awarding 19 3 of the remaining funds shall provide for the awarding of an 19 4 enhanced amount to eligible grantees to develop and maintain 19 5 satellite centers in underserved regions of the state.	Requires \$1,658,000 to be used for the Child Protection Center (CPC) Grant Program. Each CPC will receive \$245,000, and the remaining funds will be distributed through a funding formula based on the volume of children served. Requires the funding formula to provide for the awarding of an enhanced amount to eligible grantees to develop and maintain satellite centers in underserved regions of the State. DETAIL: This is no change compared to the estimated FY 2024 allocation. This allocation was previously located under the appropriation for Child and Family Services.
19 6 5. Of the funds appropriated in this section, \$4,359,500 is 19 7 allocated for the preparation for adult living program pursuant 19 8 to section 234.46.	Allocates \$4,359,500 to the Preparation for Adult Living (PAL) Program. DETAIL: This is an increase of \$334,500 compared to the estimated FY 2024 allocation. This allocation was previously located under the appropriation for Child and Family Services.
19 9 6. Of the funds appropriated in this section, a portion may 19 10 be used for family-centered services for purposes of complying 19 11 with the federal Family First Prevention Services Act of 2018, 19 12 Pub.L. No.115-123, and successor legislation.	Allows the HHS to use a portion of the funds allocated in this Section for family-centered services to comply with the federal Family First Prevention Services Act .
19 13 7. a. Of the funds appropriated in this section, a 19 14 sufficient amount is allocated for adoption subsidy payments 19 15 and related costs.	Specifies that a sufficient amount is allocated to the Adoption Subsidy Program. DETAIL: This allocation was previously an appropriation of \$40,883,507 for the Adoption Subsidy Program in FY 2024.
19 16 b. Any funds allocated in this subsection remaining after 19 17 the allocation under paragraph "a" are designated and allocated	CODE: Directs the HHS to use the funds appropriated to the Adoption Subsidy Program for adoption subsidy payments and post-adoption

<p>19 18 as state savings resulting from implementation of the federal 19 19 Fostering Connections to Success and Increasing Adoptions Act 19 20 of 2008, Pub.L. No.110-351, and successor legislation, as 19 21 determined in accordance with 42 U.S.C. §673(a)(8), and shall 19 22 be used for post-adoption services and for other purposes 19 23 allowed under these federal laws, Tit.IV-B or Tit.IV-E of the 19 24 federal Social Security Act.</p>	<p>services as allowed under Title IV-B and Title IV-E of the federal Social Security Act, due to the federal Fostering Connections to Success and Increasing Adoptions Act of 2008.</p>
<p>19 25 c. Of the funds appropriated in this section, \$296,463 19 26 shall be used to increase the adoption subsidy paid to a person 19 27 pursuant to section 600.17 who adopts a child after July 1, 19 28 2024, by ten percent over the rates in effect on June 30, 2024.</p>	<p>Allocates \$296,463 to increase the adoption subsidy by 10.00% over the rates in effect on June 30, 2024. DETAIL: This is a new allocation for FY 2025.</p>
<p>19 29 8. Of the funds appropriated in this section, \$193,000 shall 19 30 be used to expand the availability of supervised apartment 19 31 living arrangements.</p>	<p>Allocates \$193,000 to expand the availability of supervised apartment living arrangements. DETAIL: This is a new allocation for FY 2025.</p>
<p>19 32 9. Of the funds appropriated in this section, \$617,530 shall 19 33 be used to increase the foster care reimbursement rates paid 19 34 pursuant to section 234.38, by ten percent over the rates in 19 35 effect on June 30, 2024.</p>	<p>Allocates \$617,530 to increase foster care reimbursement rates by 10.00% over the rates in effect June 30, 2024. DETAIL: This is a new allocation for FY 2025.</p>
<p>20 1 10. Of the funds appropriated in this section, \$2,000,000 20 2 shall be used to pay the cost of the preplacement investigation 20 3 and the postplacement investigations related to adoptions.</p>	<p>Allocates \$2,000,000 to pay the cost of preplacement and postplacement adoption investigations. DETAIL: This is a new allocation for FY 2025.</p>
<p>20 4 11. Of the funds appropriated in this section, \$2,623,748 20 5 shall be used to lower the required ratio of supervisors to 20 6 social workers from one supervisor for every six and one-half 20 7 social workers to one supervisor for every five social workers.</p>	<p>Allocates \$2,623,748 to lower the required ratio of supervisors to social workers from one supervisor for every six and one-half social workers to one supervisor for every five social workers. DETAIL: This is a new allocation for FY 2025.</p>
<p>20 8 12. If a separate funding source is identified that reduces 20 9 the need for state funds within an allocation under this 20 10 section, the allocated state funds may be redistributed to 20 11 other allocations under this section for the same fiscal year.</p>	<p>Specifies that if other funding is available, the allocations of State funds in this Section may be redistributed to other allocations for FY 2025. DETAIL: Other funding sources for Child and Family Services include Title IV-B and IV-E of the Social Security Act, TANF, and the Social Services Block Grant.</p>

20 12 DIVISION VIII
 20 13 STATE SPECIALTY CARE — FY 2024-2025

20 14 Sec. 19. STATE SPECIALTY CARE. There is appropriated from
 20 15 the general fund of the state to the department of health and
 20 16 human services for the fiscal year beginning July 1, 2024, and
 20 17 ending June 30, 2025, the following amount, or so much thereof
 20 18 as is necessary, to be used for the purposes designated:
 20 19 For salaries, support, maintenance, and miscellaneous
 20 20 purposes at institutions under the jurisdiction of the
 20 21 department of health and human services:
 20 22 \$ 100,006,128

General Fund appropriation to the HHS — State Specialty Care for FY 2025.

DETAIL: Due to organizational changes within the HHS, appropriations from FY 2024 have been restructured. The new FY 2025 appropriation for State Specialty Care is comprised of moneys formerly appropriated to the following areas:

- Department-Wide Duties
- Eldora Training School
- Civil Commitment Unit for Sexual Offenders (CCUSO)
- Cherokee Mental Health Institute (MHI)
- Independence MHI
- Glenwood Resource Center
- Woodward Resource Center

This restructured appropriation represents a net increase of \$35,259 compared to estimated FY 2024 due to funding increases for Department-Wide Duties, the Eldora Training School, the CCUSO, and the MHIs as well as a funding decrease for Glenwood Resource Center.

20 23 1. The department shall utilize the funds appropriated in
 20 24 this section as necessary to maximize bed capacity and to most
 20 25 effectively meet the needs of the individuals served.

Specifies that funds must be used as necessary to maximize bed capacity and meet the needs of the individuals served.

20 26 2. Of the amount appropriated in this section, the following
 20 27 amounts are allocated to each institution as follows:

20 28 a. For the state mental health institute at Cherokee:
 20 29 \$ 19,439,086

Allocates \$19,439,086 for the MHI at Cherokee.

DETAIL: This allocation is an increase of \$3,515,834 compared to estimated FY 2024 to annualize staffing increases, annualize one-time moneys, and for operational needs.

20 30 b. For the state mental health institute at Independence:
 20 31 \$ 23,916,279

Allocates \$23,916,279 for the MHI at Independence.

DETAIL: This allocation is an increase of \$4,104,809 compared to

estimated FY 2024 to annualize staffing increases, annualize one-time moneys, and for operational needs.

20 32 c. For the civil commitment unit for sexual offenders at
20 33 Cherokee:
20 34 \$ 17,755,397

Allocates \$17,755,397 for the CCUSO at Cherokee.

DETAIL: This allocation is an increase of \$2,890,060 compared to estimated FY 2024 to annualize staffing increases, annualize one-time moneys, and for operational needs.

20 35 d. For the state resource center at Woodward:
21 1 \$ 14,018,717

Allocates \$14,018,717 for the State Resource Center at Woodward.

DETAIL: This allocation is an increase of \$629,140 compared to estimated FY 2024 for increased operational needs.

21 2 e. For the state resource center at Glenwood:
21 3 \$ 5,255,132

Allocates \$5,255,132 for the State Resource Center at Glenwood.

DETAIL: This allocation is a decrease of \$11,000,000 compared to estimated FY 2024 due to the planned facility closure in FY 2024.

21 4 f. For the state training school at Eldora:
21 5 \$ 19,621,517

Allocates \$19,621,517 for the State Training School at Eldora.

DETAIL: This allocation is an increase of \$2,053,006 compared to estimated FY 2024 to annualize one-time moneys and for operational needs.

21 6 DIVISION IX
21 7 ADMINISTRATION AND COMPLIANCE — FY 2024-2025

21 8 Sec. 20. ACCOUNTABILITY, COMPLIANCE, AND PROGRAM
21 9 INTEGRITY. There is appropriated from the general fund of the
21 10 state to the department of health and human services for the
21 11 fiscal year beginning July 1, 2024, and ending June 30, 2025,
21 12 the following amount, or so much thereof as is necessary, to be
21 13 used for the purposes designated:
21 14 For accountability, compliance, and program integrity,
21 15 including salaries, support, maintenance, and miscellaneous
21 16 purposes:
21 17 \$ 22,356,598

General Fund appropriation to the HHS — Accountability, Compliance, and Program Integrity for FY 2025.

DETAIL: Due to organizational changes within the HHS, appropriations from FY 2024 have been restructured. The new FY 2025 appropriation for Accountability, Compliance, and Program Integrity is comprised of moneys formerly appropriated to the following areas:

- Aging Programs
- Office of Long-Term Care Ombudsman
- Human Rights Administration
- Criminal and Juvenile Justice

PG LN	GA:90 5004HB	Explanation
		<ul style="list-style-type: none"> • Single Grant Program • General Administration • Child Support Recoveries • Community Capacity • Resource Management
		<p>This restructured appropriation represents a net increase of \$1,255,606 compared to estimated FY 2024 due to increased operational needs and Title IV-E penetration rate adjustments for General Administration.</p>
<p>21 18 1. Of the funds appropriated in this section, \$200,000 shall 21 19 be transferred to and deposited in the Iowa ABLÉ savings plan 21 20 trust administrative fund created in section 121.4, to be used 21 21 for implementation and administration activities of the Iowa 21 22 ABLÉ savings plan trust.</p>		<p>Transfers \$200,000 to the Treasurer of State to implement the Iowa ABLÉ Savings Plan Trust.</p> <p>DETAIL: This is no change compared to the estimated FY 2024 transfer. This allocation was previously located under the appropriation for General Administration.</p>
<p>21 23 2. Of the funds appropriated in this section, \$2,602,312 21 24 shall be used for foster care review and the court appointed 21 25 special advocate program, including for salaries, support, 21 26 maintenance, and miscellaneous purposes.</p>		<p>Allocates \$2,602,312 for foster care review and the Court Appointed Special Advocate (CASA) Program.</p> <p>DETAIL: This is no change compared to the estimated FY 2024 allocation. In prior years, this allocation was directed to the Child Advocacy Board. This allocation was previously located under the appropriation for General Administration. The State's Local Foster Care Review Boards and the CASA Program work to recruit, train, and support community volunteers through the State to represent the interests of abused and neglected children.</p>
<p>21 27 3. Of the funds appropriated in this section, \$1,148,959 21 28 shall be used for the office of long-term care ombudsman 21 29 for salaries, support, administration, maintenance, and 21 30 miscellaneous purposes.</p>		<p>Allocates \$1,148,959 to the Office of Long-Term Care Ombudsman.</p> <p>DETAIL: This allocation is no change compared to estimated FY 2024.</p>
<p>21 31 4. For the fiscal year beginning July 1, 2024, and ending 21 32 June 30, 2025, the department of health and human services 21 33 may utilize the funds appropriated from the general fund of 21 34 the state to the department under this Act for up to 4,156.00 21 35 full-time equivalent positions. The department shall report to 22 1 the general assembly by December 15, 2024, the distribution of 22 2 the approved number of full-time equivalent positions across</p>		<p>Allows the HHS to utilize General Fund moneys for up to 4,156.00 FTE positions. Requires the HHS to report to the General Assembly by December 15, 2024, the distribution of FTE positions across the organizational divisions of the HHS.</p>

22 3 the organizational divisions of the department.

22 4 DIVISION X
22 5 MEDICAL ASSISTANCE HOME AND COMMUNITY-BASED SERVICES WAIVER
22 6 FOR INDIVIDUALS WITH AN INTELLECTUAL DISABILITY — ADDITIONAL
22 7 WAIVER SLOTS — FY 2025-2026

22 8 Sec. 21. MEDICAL ASSISTANCE — HOME AND COMMUNITY-BASED
22 9 SERVICES WAIVER FOR INDIVIDUALS WITH AN INTELLECTUAL
22 10 DISABILITY — ADDITIONAL WAIVER SLOTS — APPROPRIATION — FY
22 11 2025-2026. There is appropriated from the general fund of
22 12 the state to the department of health and human services for
22 13 the fiscal year beginning July 1, 2025, and ending June 30,
22 14 2026, the following amount, or so much thereof as is necessary,
22 15 to be used for the medical assistance program to provide for
22 16 additional home and community-based services waiver slots for
22 17 individuals with an intellectual disability:
22 18 \$ 1,950,000

General Fund appropriation to the HHS — Medical Assistance HCBS Waiver for Individuals with an Intellectual Disability for FY 2026.

DETAIL: This is a new appropriation for FY 2026.

22 19 DIVISION XI
22 20 DEPARTMENT OF HEALTH AND HUMAN SERVICES NONREVERSIONS

22 21 Sec. 22. DEPARTMENT OF HEALTH AND HUMAN SERVICES
22 22 NONREVERSIONS.

22 23 1. Notwithstanding section 8.33, moneys appropriated from
22 24 the general fund of the state and the temporary assistance for
22 25 needy families block grant to the department of health and
22 26 human services for the fiscal year beginning July 1, 2024,
22 27 and ending June 30, 2025, for the purposes of the FaDSS grant
22 28 program that remain unencumbered or unobligated at the close of
22 29 the fiscal year shall not revert, but shall remain available
22 30 for expenditure for the purposes designated until the close of
22 31 the succeeding fiscal year.

CODE: Allows any unexpended funds appropriated for the FaDSS Grant Program for FY 2025 to remain available for FY 2026.

22 32 2. Notwithstanding section 8.33, of the moneys appropriated
22 33 from the general fund of the state, the quality assurance trust
22 34 fund, and the hospital health care access trust fund to the
22 35 department of health and human services for the fiscal year
23 1 beginning July 1, 2024, and ending June 30, 2025, for the
23 2 purposes of the medical assistance program, the amount that is
23 3 in excess of actual expenditures for the medical assistance

CODE: Allows any unexpended funds appropriated from the General Fund, the Quality Assurance Trust Fund, and the Hospital Health Care Access Trust Fund to the HHS in FY 2025 for the Medicaid Program and the amount that is in excess of the actual expenditures for FY 2025 to remain available for FY 2026.

23 4 program that remains unencumbered or unobligated at the close
 23 5 of the fiscal year shall not revert, but shall remain available
 23 6 for expenditure for the medical assistance program until the
 23 7 close of the succeeding fiscal year.

23 8 3. Notwithstanding section 8.33, and notwithstanding the
 23 9 nonreversion amount limitation specified in section 222.92,
 23 10 moneys appropriated from the general fund of the state to the
 23 11 department of health and human services for the fiscal year
 23 12 beginning July 1, 2024, and ending June 30, 2025, for the
 23 13 purposes of state specialty care that remain unencumbered or
 23 14 unobligated at the close of the fiscal year shall not revert,
 23 15 but shall remain available for expenditure for the purposes
 23 16 designated for subsequent fiscal years.

CODE: Allows any unexpended funds appropriated from the General Fund to the HHS for State Specialty Care for FY 2025 to remain available for subsequent fiscal years.

23 17 4. Notwithstanding section 8.33, moneys appropriated from
 23 18 the general fund of the state to the department of health and
 23 19 human services for the fiscal year beginning July 1, 2024,
 23 20 and ending June 30, 2025, for the commission on volunteer
 23 21 service for purposes of the Iowa state commission grant program
 23 22 that remain unencumbered or unobligated at the close of the
 23 23 fiscal year shall not revert, but shall remain available for
 23 24 expenditure for the purposes designated for subsequent fiscal
 23 25 years.

CODE: Allows any unexpended funds appropriated from the General Fund to the HHS for the Iowa State Commission Grant Program to remain available for subsequent fiscal years.

23 26 5. Notwithstanding section 8.33, moneys appropriated from
 23 27 the general fund of the state to the department of health and
 23 28 human services for the fiscal year beginning July 1, 2024,
 23 29 and ending June 30, 2025, and allocated for rural psychiatric
 23 30 residencies to annually fund eight psychiatric residents who
 23 31 will provide mental health services to underserved areas of the
 23 32 state that remain unencumbered or unobligated at the close of
 23 33 the fiscal year shall not revert, but shall remain available
 23 34 for expenditure for the purposes designated until the close of
 23 35 the succeeding fiscal year.

CODE: Specifies that any funds appropriated from the General Fund to the HHS in FY 2025 for rural psychiatric residencies that remain at the end of FY 2025 are permitted to remain available for FY 2026.

24 1 6. Notwithstanding section 8.33, moneys appropriated from
 24 2 the general fund of the state to the department of health and
 24 3 human services for the fiscal year beginning July 1, 2024, and
 24 4 ending June 30, 2025, and allocated to provide audiological
 24 5 services and hearing aids for children that remain unencumbered
 24 6 or unobligated at the close of the fiscal year shall not

CODE: Allows any unexpended funds appropriated from the General Fund to the HHS for audiological services and hearing aids for children to remain available for FY 2026.

24 7 revert, but shall remain available for expenditure for the
 24 8 purposes designated until the close of the succeeding fiscal
 24 9 year.

24 10 7. Notwithstanding section 8.33, moneys appropriated from
 24 11 the general fund of the state to the department of health and
 24 12 human services for the fiscal year beginning July 1, 2024,
 24 13 and ending June 30, 2025, and allocated for adoption subsidy
 24 14 payments and related costs or for post-adoption services
 24 15 and related allowable purposes that remain unencumbered or
 24 16 unobligated at the close of the fiscal year shall not revert,
 24 17 but shall remain available for expenditure for the purposes
 24 18 designated until the close of the succeeding fiscal year.

CODE: Specifies that any funds appropriated from the General Fund to the HHS in FY 2025 for adoption subsidy payments or post-adoption services that remain at the end of FY 2025 are permitted to remain available for FY 2026.

24 19 DIVISION XII
 24 20 HEALTH AND HUMAN SERVICES — PRIOR APPROPRIATIONS AND OTHER
 24 21 PROVISIONS — FY 2022-2023
 24 22 RURAL PSYCHIATRIC RESIDENCIES

24 23 Sec. 23. 2022 Iowa Acts, chapter 1131, section 3, subsection
 24 24 4, paragraph j, is amended to read as follows:
 24 25 j. Of the funds appropriated in this subsection, \$800,000
 24 26 shall be used for rural psychiatric residencies to support the
 24 27 annual creation and training of ~~six~~ eight psychiatric residents
 24 28 who will provide mental health services in underserved areas of
 24 29 the state. Notwithstanding section 8.33, moneys that remain
 24 30 unencumbered or unobligated at the close of the fiscal year
 24 31 shall not revert but shall remain available for expenditure for
 24 32 the purposes designated for subsequent fiscal years.

CODE: Amends 2022 Iowa Acts, [HF 2578](#) (FY 2023 Health and Human Services Appropriations Act) to increase the number of rural psychiatric residencies from six to eight.

24 33 Sec. 24. EFFECTIVE DATE. This division of this Act, being
 24 34 deemed of immediate importance, takes effect upon enactment.

Specifies that Division XII of the Bill is effective upon enactment.

24 35 Sec. 25. RETROACTIVE APPLICABILITY. This division of this
 25 1 Act applies retroactively to July 1, 2022.

Specifies that Division XII of the Bill applies retroactively to July 1, 2022.

25 2 DIVISION XIII
 25 3 HEALTH AND HUMAN SERVICES — PRIOR APPROPRIATIONS AND OTHER
 25 4 PROVISIONS — FY 2023-2024

25 5 OFFICE OF PUBLIC GUARDIAN

25 6 Sec. 26. 2023 Iowa Acts, chapter 112, section 3, is amended
 25 7 by adding the following new subsection:
 25 8 NEW SUBSECTION 7. Notwithstanding section 8.33,
 25 9 moneys appropriated in this section for the state office of
 25 10 public guardian established under chapter 231E that remain
 25 11 unencumbered or unobligated at the close of the fiscal year
 25 12 shall not revert but shall remain available for the purposes
 25 13 designated until the close of the succeeding fiscal year.

CODE: Allows any unexpended funds appropriated in 2023 Iowa Acts, [Senate File 561](#) (FY 2024 Health and Human Services Appropriations Act), for FY 2024 from the General Fund for the State Office of Public Guardian to remain available for expenditure in FY 2025.

25 14 AUDIOLOGICAL SERVICES

25 15 Sec. 27. 2023 Iowa Acts, chapter 112, section 5, subsection
 25 16 2, paragraph e, is amended to read as follows:
 25 17 e. Of the funds appropriated in this subsection, \$156,000
 25 18 shall be used to provide audiological services and hearing aids
 25 19 for children. Notwithstanding section 8.33, moneys allocated
 25 20 in this paragraph that remain unencumbered or unobligated at
 25 21 the close of the fiscal year shall not revert but shall remain
 25 22 available for the purposes designated until the close of the
 25 23 succeeding fiscal year.

CODE: Allows any unexpended funds appropriated in 2023 Iowa Acts, Senate File 561 for FY 2024 from the General Fund for audiological services and hearing aids for children to remain available for expenditure until the close of FY 2025.

25 24 RURAL PSYCHIATRIC RESIDENCIES

25 25 Sec. 28. 2023 Iowa Acts, chapter 112, section 5, subsection
 25 26 4, paragraph j, is amended to read as follows:
 25 27 j. Of the funds appropriated in this subsection, \$800,000
 25 28 shall be used for rural psychiatric residencies to annually
 25 29 fund ~~six~~ eight psychiatric residents who will provide
 25 30 mental health services in underserved areas of the state.
 25 31 Notwithstanding section 8.33, moneys that remain unencumbered
 25 32 or unobligated at the close of the fiscal year shall not revert
 25 33 but shall remain available for expenditure for the purposes
 25 34 designated for subsequent fiscal years.

CODE: Amends 2023 Iowa Acts, Senate File 561 to increase the number of rural psychiatric residencies from six to eight.

25 35 CHILD CARE ASSISTANCE

26 1 Sec. 29. 2023 Iowa Acts, chapter 112, section 17, subsection
 26 2 8, is amended to read as follows:
 26 3 8. Notwithstanding section 8.33, moneys ~~advanced for~~
 26 4 ~~purposes of the programs developed by early childhood Iowa~~
 26 5 ~~areas, advanced for purposes of wraparound child care, or~~
 26 6 ~~received from the federal appropriations made for the purposes~~

CODE: Allows any unexpended funds appropriated in 2023 Iowa Acts, Senate File 561 for FY 2024 from the General Fund for CCA to remain available for expenditure until the close of FY 2025.

26 7 of appropriated in this section that remain unencumbered or
 26 8 unobligated at the close of the fiscal year shall not revert
 26 9 to any fund but shall remain available for expenditure for the
 26 10 purposes designated until the close of the succeeding fiscal
 26 11 year.

26 12 CHILD AND FAMILY SERVICES

26 13 Sec. 30. 2023 Iowa Acts, chapter 112, section 19, is amended
 26 14 by adding the following new subsection:
 26 15 NEW SUBSECTION 23. Notwithstanding section 8.33, moneys
 26 16 appropriated in this section that remain unencumbered or
 26 17 unobligated at the close of the fiscal year shall not revert
 26 18 but shall remain available for the purposes designated until
 26 19 the close of the succeeding fiscal year.

CODE: Allows any unexpended funds appropriated in 2023 Iowa Acts, Senate File 561 for FY 2024 from the General Fund for Child and Family Services to remain available for expenditure until the close of FY 2025.

26 20 FIELD OPERATIONS

26 21 Sec. 31. 2023 Iowa Acts, chapter 112, section 26, is amended
 26 22 by adding the following new subsection:
 26 23 NEW SUBSECTION 4. Notwithstanding section 8.33, moneys
 26 24 appropriated in this section that remain unencumbered or
 26 25 unobligated at the close of the fiscal year shall not revert
 26 26 but shall remain available for the purposes designated until
 26 27 the close of the succeeding fiscal year.

CODE: Allows any unexpended funds appropriated in 2023 Iowa Acts, Senate File 561 for FY 2024 from the General Fund for Field Operations to remain available for expenditure until the close of FY 2025.

26 28 GENERAL ADMINISTRATION — MORE OPTIONS FOR MATERNAL SUPPORT
 26 29 PROGRAM

26 30 Sec. 32. 2023 Iowa Acts, chapter 112, section 27, subsection
 26 31 8, is amended to read as follows:
 26 32 8. Of the funds appropriated under this section, \$1,000,000
 26 33 shall be used for the purposes of program administration and
 26 34 provision of pregnancy support services through the more
 26 35 options for maternal support program in accordance with section
 27 1 217.41C. Notwithstanding section 8.33, moneys allocated in
 27 2 this subsection that remain unencumbered or unobligated at the
 27 3 close of the fiscal year shall not revert but shall remain
 27 4 available for the purposes designated until the close of the
 27 5 succeeding fiscal year.

CODE: Allows any unexpended funds appropriated in 2023 Iowa Acts, Senate File 561 for FY 2024 from the General Fund for the More Options for Maternal Support (MOMS) Program to remain available for expenditure until the close of FY 2025.

27 6 LOW-INCOME HOME ENERGY ASSISTANCE PROGRAM ADMINISTRATIVE

27 7 ALLOCATION — FEDERAL BLOCK GRANT

27 8 Sec. 33. 2023 Iowa Acts, chapter 161, section 10, subsection
27 9 3, is amended to read as follows:

27 10 3. After subtracting the allocation in subsection 2, ~~up to~~
27 11 ~~10~~ no less than 8.4 percent of the remaining moneys for each
27 12 federal fiscal year are allocated for administrative expenses
27 13 of low-income home energy assistance program contractors and
27 14 up to 1.6 percent of the remaining moneys for each fiscal year
27 15 are allocated for the administrative expenses of the department
27 16 of health and human services under the low-income home energy
27 17 assistance program of which \$377,000 is allocated each federal
27 18 fiscal year for administrative expenses of the department of
27 19 health and human services. The costs of auditing the use and
27 20 administration of the portion of the appropriation in this
27 21 section that is retained by the state shall be paid from the
27 22 amount allocated in this subsection each federal fiscal year to
27 23 the department of health and human services. The auditor of
27 24 state shall bill the department of health and human services
27 25 for the audit costs.

27 26 Sec. 34. EFFECTIVE DATE. This division of this Act, being
27 27 deemed of immediate importance, takes effect upon enactment.

27 28 Sec. 35. RETROACTIVE APPLICABILITY. This division of this
27 29 Act applies retroactively to July 1, 2023.

27 30 DIVISION XIV
27 31 EMERGENCY RULES AND REPORTS

27 32 Sec. 36. EMERGENCY RULES.

27 33 1. If necessary to comply with federal requirements
27 34 including time frames, or if specifically authorized by a
27 35 provision of this Act, the department of health and human
28 1 services or the mental health and disability services
28 2 commission shall adopt administrative rules under section
28 3 17A.4, subsection 3, and section 17A.5, subsection 2, paragraph
28 4 “b”, to implement the applicable provisions of this Act. The
28 5 rules shall be effective immediately upon filing unless a
28 6 later date is specified in the rules. Any rules adopted in
28 7 accordance with this section shall also be published as a
28 8 notice of intended action as provided in section 17A.4.

CODE: Amends 2023 Iowa Acts, [House File 709](#) (Federal Block Grant Appropriations Act) to specify that no less than 8.40% of remaining moneys for each fiscal year will be allocated for administrative expenses of Low-Income Home Energy Assistance Program (LiHEAP) contractors and no more than 1.60% will be allocated to the HHS for administrative expenses related to LiHEAP.

Specifies that Division XIII of the Bill is effective upon enactment.

Specifies that Division XIII of the Bill applies retroactively to July 1, 2023.

Requires the HHS or the Mental Health and Disability Services (MHDS) Commission to adopt emergency administrative rules to comply with federal requirements or to implement the Bill. The rules are required to be effective immediately upon filing or on a later effective date specified in the rules unless delayed or suspended by the Administrative Rules Review Committee (ARRC). The rules shall not take effect before being reviewed by the ARRC.

28 9 2. If during a fiscal year, the department of health and
 28 10 human services is adopting rules in accordance with this
 28 11 section or as otherwise directed or authorized by state
 28 12 law, and the rules will result in an expenditure increase
 28 13 beyond the amount anticipated in the budget process or if the
 28 14 expenditure was not addressed in the budget process for the
 28 15 fiscal year, the department shall notify the general assembly
 28 16 and the department of management concerning the rules and the
 28 17 expenditure increase. The notification shall be provided at
 28 18 least thirty calendar days prior to the date notice of the
 28 19 rules is submitted to the administrative rules coordinator and
 28 20 the administrative code editor.

Requires the HHS to report to the General Assembly and the DOM at least 30 calendar days prior to submitting administrative rules that have a fiscal impact that was not addressed in the budget process.

28 21 Sec. 37. REPORTS. Unless otherwise provided, any reports or
 28 22 other information required to be compiled and submitted under
 28 23 this Act during the fiscal year beginning July 1, 2024, shall
 28 24 be submitted on or before the date specified for submission of
 28 25 the reports or information.

Requires any reports or information required to be submitted under the Bill for FY 2025 to be submitted on or before the dates specified for submission.

28 26 DIVISION XV
 28 27 CODIFIED PROVISIONS

28 28 SUBSTANCE USE DISORDER — BEER AND LIQUOR CONTROL FUND

28 29 Sec. 38. Section 123.17, subsection 5, Code 2024, is amended
 28 30 to read as follows:
 28 31 5. After any transfer provided for in subsection 3 is
 28 32 made, the department shall transfer into a special revenue
 28 33 account in the general fund of the state, a sum of money at
 28 34 least equal to seven percent of the gross amount of sales made
 28 35 by the department from the beer and liquor control fund on a
 29 1 monthly basis but not less than nine million dollars annually.
 29 2 Of the amounts transferred, two million dollars, ~~plus an~~
 29 3 ~~additional amount determined by the general assembly,~~ shall be
 29 4 appropriated to the department of health and human services for
 29 5 use by the staff who administer the comprehensive substance use
 29 6 disorder program under chapter 125 for substance use disorder
 29 7 treatment and prevention programs. Any amounts received in
 29 8 excess of the amounts appropriated to the department of health
 29 9 and human services for use by the staff who administer the
 29 10 comprehensive substance use disorder program under chapter 125

CODE: Removes an additional amount determined by the General Assembly from the allocated transfer from the Beer and Liquor Control Fund to the HHS for substance use disorder treatment and prevention programs.

29 11 shall be considered part of the general fund balance.

29 12 TOBACCO USE PREVENTION AND CONTROL

29 13 Sec. 39. Section 142A.5, Code 2024, is amended by adding the
29 14 following new subsection:

29 15 NEW SUBSECTION 9. Collaborate with the department of
29 16 revenue for enforcement of tobacco laws, regulations, and
29 17 ordinances and to engage in tobacco control activities approved
29 18 by the departments.

29 19 AREA AGENCIES ON AGING

29 20 Sec. 40. NEW SECTION 231.35 PROCEDURES RELATED TO
29 21 EXPENDITURE OF STATE AND FEDERAL FUNDS.

29 22 1. The department shall establish and enforce procedures
29 23 relating to expenditure of state and federal funds by area
29 24 agencies on aging that require compliance with both state and
29 25 federal laws, rules, and regulations, including but not limited
29 26 to all of the following:

29 27 a. Requiring that expenditures are incurred only for goods
29 28 or services received or performed prior to the end of the
29 29 fiscal period designated for use of the funds.

29 30 b. Prohibiting prepayment for goods or services not received
29 31 or performed prior to the end of the fiscal period designated
29 32 for use of the funds.

29 33 c. Prohibiting prepayment for goods or services not defined
29 34 specifically by good or service, time period, or recipient.

29 35 d. Prohibiting the establishment of accounts from which
30 1 future goods or services which are not defined specifically by
30 2 good or service, time period, or recipient, may be purchased.

30 3 2. The procedures shall provide that if any funds are
30 4 expended in a manner that is not in compliance with the
30 5 procedures and applicable federal and state laws, rules, and
30 6 regulations, and are subsequently subject to repayment, the
30 7 area agency on aging expending such funds in contravention of
30 8 such procedures, laws, rules and regulations, not the state,
30 9 shall be liable for such repayment.

30 10 PERSONAL NEEDS ALLOWANCE FOR FACILITIES UNDER MEDICAID

30 11 Sec. 41. Section 249A.30A, Code 2024, is amended to read as
30 12 follows:

CODE: Requires the HHS and the Department of Revenue to collaborate for enforcement of tobacco laws and to engage in tobacco control activities.

CODE: Requires the HHS to establish and enforce policies relating to the expenditure of State and federal funds by AAAs that require State and federal compliance.

CODE: Requires the General Assembly to appropriate a sufficient amount of funds from the General Fund to the HHS to ensure that

30 13 249A.30A MEDICAL ASSISTANCE — PERSONAL NEEDS ALLOWANCE.

30 14 1. The personal needs allowance under the medical
 30 15 assistance program, which may be retained by a person who is a
 30 16 resident of a nursing facility, an intermediate care facility
 30 17 for persons with an intellectual disability, or an intermediate
 30 18 care facility for persons with mental illness, as defined in
 30 19 section 135C.1, or a person who is a resident of a psychiatric
 30 20 medical institution for children as defined in section 135H.1,
 30 21 shall be fifty dollars per month.

30 22 2. A resident who has income of less than fifty dollars
 30 23 per month shall receive a supplement from the state in the
 30 24 amount necessary to receive a personal needs allowance of fifty
 30 25 dollars per month, if funding is specifically appropriated for
 30 26 this purpose. The general assembly shall annually appropriate
 30 27 a sufficient amount from the general fund of the state to the
 30 28 department of health and human services for this purpose.

recipients of Medicaid living in care facilities in Iowa have access to the full amount of their Personal Needs Allowance.

30 29 REPLACEMENT GENERATION TAX REVENUES

30 30 Sec. 42. Section 437A.8, subsection 4, paragraph d, Code
 30 31 2024, is amended to read as follows:

30 32 d. Notwithstanding paragraph "a", a taxpayer who owns
 30 33 or leases a new electric power generating plant and who has
 30 34 no other operating property in the state of Iowa except for
 30 35 operating property directly serving the new electric power
 31 1 generating plant as described in section 437A.16 shall pay
 31 2 the replacement generation tax associated with the allocation
 31 3 of the local amount to the county treasurer of the county in
 31 4 which the local amount is located and shall remit the remaining
 31 5 replacement generation tax, if any, to the director according
 31 6 to paragraph "a" for remittance of the tax to county treasurers.
 31 7 The director shall notify each taxpayer on or before August 31
 31 8 following a tax year of its remaining replacement generation
 31 9 tax to be remitted to the director. All remaining replacement
 31 10 generation tax revenues received by the director shall be
 31 11 ~~deposited in the property tax relief fund created in section~~
 31 12 ~~426B.1, and shall be distributed as provided in section 426B.2~~
 31 13 appropriated annually to the department of health and human
 31 14 services to supplement any appropriation made for medical
 31 15 assistance.

31 16 If a taxpayer has paid an amount of replacement tax,
 31 17 penalty, or interest which was ~~deposited into the property~~

CODE: Appropriates remaining revenues from the Replacement Generation Tax to the HHS to supplement Medicaid appropriations. Funding is currently deposited in the Property Tax Relief Fund. In FY 2022, the Property Tax Relief Fund had a carryforward of \$12,954.

31 18 ~~tax relief fund~~ appropriated to the department of health and
 31 19 human services under this paragraph and which was not due, all
 31 20 of the provisions of section 437A.14, subsection 1, paragraph
 31 21 “b”, shall apply with regard to any claim for refund or credit
 31 22 filed by the taxpayer. The director shall have sole discretion
 31 23 as to whether the erroneous payment will be refunded to the
 31 24 taxpayer or credited against any replacement tax due, or to
 31 25 become due, from the taxpayer that would be ~~subject to deposit~~
 31 26 in the property tax relief fund appropriated to the department
 31 27 of health and human services under this paragraph.

31 28 Sec. 43. Section 437A.15, subsection 3, paragraph f, Code
 31 29 2024, is amended to read as follows:

31 30 f. Notwithstanding the provisions of this section, if
 31 31 a taxpayer is a municipal utility or a municipal owner of
 31 32 an electric power facility financed under the provisions
 31 33 of chapter 28F or 476A, the assessed value, other than the
 31 34 local amount, of a new electric power generating plant shall
 31 35 be allocated to each taxing district in which the municipal
 32 1 utility or municipal owner is serving customers and has
 32 2 electric meters in operation in the ratio that the number of
 32 3 operating electric meters of the municipal utility or municipal
 32 4 owner located in the taxing district bears to the total number
 32 5 of operating electric meters of the municipal utility or
 32 6 municipal owner in the state as of January 1 of the tax year.
 32 7 If the municipal utility or municipal owner of an electric
 32 8 power facility financed under the provisions of chapter 28F
 32 9 or 476A has a new electric power generating plant but the
 32 10 municipal utility or municipal owner has no operating electric
 32 11 meters in this state, the municipal utility or municipal owner
 32 12 shall pay the replacement generation tax associated with the
 32 13 new electric power generating plant allocation of the local
 32 14 amount to the county treasurer of the county in which the local
 32 15 amount is located and shall remit the remaining replacement
 32 16 generation tax, if any, to the director at the times contained
 32 17 in section 437A.8, subsection 4, for remittance of the tax to
 32 18 the county treasurers. All remaining replacement generation
 32 19 tax revenues received by the director shall be ~~deposited in~~
 32 20 the property tax relief fund created in section 426B.1, and
 32 21 shall be distributed as provided in section 426B.2 appropriated
 32 22 annually to the department of health and human services to
 32 23 supplement any appropriation made for medical assistance.

CODE: Appropriates all remaining Replacement Generation Tax
 revenues, following the allocations provided in Iowa Code section
[437A.15](#)(3)(f), to the HHS to supplement Medicaid appropriations.

32 24 PERSONAL NEEDS ALLOWANCE FOR STATE SUPPLEMENTARY ASSISTANCE

32 25 Sec. 44.NEW SECTION 249.9A PERSONAL NEEDS ALLOWANCE.

32 26 1. The department shall increase the personal needs
 32 27 allowance for residents of residential care facilities by the
 32 28 same percentage and at the same time as federal supplemental
 32 29 security income and federal social security benefits are
 32 30 increased due to a recognized increase in the cost of living.

CODE: Requires the HHS to increase the Personal Needs Allowance for SSA by the same percentage and at the same time as federal Supplemental Security Income and Social Security Benefits.

32 31 2. If during a fiscal year, the department projects that
 32 32 state supplementary assistance expenditures for a calendar year
 32 33 will not meet the federal pass-through requirement specified
 32 34 in Tit.XVI of the federal Social Security Act, section 1618,
 32 35 as codified in 42 U.S.C. §1382g, the department may take
 33 1 actions including but not limited to increasing the personal
 33 2 needs allowance for residential care facility residents
 33 3 and making programmatic adjustments or upward adjustments
 33 4 of the residential care facility or in-home health-related
 33 5 care reimbursement rates to ensure compliance with federal
 33 6 requirements. In addition, the department may make other
 33 7 programmatic and rate adjustments necessary to remain within
 33 8 the funds appropriated for a fiscal year while ensuring
 33 9 compliance with federal requirements.

Permits the HHS to take actions to ensure federal requirements are met if the HHS projects that SSA expenditures for a calendar year will not meet federal pass-through requirements.

33 10 3. The department may adopt emergency rules under section
 33 11 17A.4, subsection 3, and section 17A.5, subsection 2, paragraph
 33 12 “b”, to implement the provisions of this section and the rules
 33 13 shall be effective immediately upon filing unless a later date
 33 14 is specified in the rules. Any rules adopted in accordance
 33 15 with this section shall also be published as a notice of
 33 16 intended action as provided in section 17A.4.

Permits the HHS to adopt emergency administrative rules to implement the provisions of the Bill, and requires any rules adopted to be published as a Notice of Intended Action as provided in Iowa Code sections [17A.4](#) and [17A.5](#).

33 17 MEDICAID FRAUD FUND AND HEALTH CARE TRUST FUND

33 18 Sec. 45. Section 249A.50, subsection 3, Code 2024, is
 33 19 amended to read as follows:

33 20 3. a. A Medicaid fraud fund is created in the state
 33 21 treasury under the authority of the department of inspections,
 33 22 appeals, and licensing. Moneys from penalties, investigative
 33 23 costs recouped by the Medicaid fraud control unit, and other
 33 24 amounts received as a result of prosecutions involving

CODE: Appropriates any remaining funds in the Medicaid Fraud Fund at the close of a fiscal year to the HHS to supplement the Medicaid Program. Prior to this, the remaining funds remained in the Medicaid Fraud Fund.

DETAIL: It is estimated that there will be \$150,000 available in FY 2025. This is no change compared to the FY 2024 estimate. The Fund consists of the revenues generated from penalties received as a result

33 25 the department of inspections, appeals, and licensing
 33 26 investigations and audits to ensure compliance with the medical
 33 27 assistance program that are not credited to the program shall
 33 28 be credited to the fund.

33 29 b. Notwithstanding section 8.33, moneys credited to the
 33 30 fund from any other account or fund shall not revert to the
 33 31 other account or fund. Moneys in the fund shall only be used as
 33 32 provided in appropriations from the fund and shall be used in
 33 33 accordance with applicable laws, regulations, and the policies
 33 34 of the office of inspector general of the United States
 33 35 department of health and human services.

34 1 c. Any funds remaining in the Medicaid fraud fund at the
 34 2 close of a fiscal year are appropriated to the department of
 34 3 health and human services to supplement any medical assistance
 34 4 program appropriation for the same fiscal year to be used
 34 5 for medical assistance reimbursement and associated costs,
 34 6 including program administration and costs associated with
 34 7 program implementation.

34 8 ~~c.~~ d. For the purposes of this subsection, “investigative
 34 9 costs” means the reasonable value of a Medicaid fraud control
 34 10 unit investigator’s, auditor’s or employee’s time, any moneys
 34 11 expended by the Medicaid fraud control unit, and the reasonable
 34 12 fair market value of resources used or expended by the Medicaid
 34 13 fraud control unit in a case resulting in a criminal conviction
 34 14 of a provider under this chapter or chapter 714 or 715A.

34 15 Sec. 46. Section 453A.35A, Code 2024, is amended to read as
 34 16 follows:

34 17 453A.35A HEALTH CARE TRUST FUND — APPROPRIATION TO MEDICAID
 34 18 PROGRAM .

34 19 1. A health care trust fund is created in the office of
 34 20 the treasurer of state. The fund consists of the revenues
 34 21 generated from the tax on cigarettes pursuant to section
 34 22 453A.6, subsection 1, and from the tax on tobacco products
 34 23 as specified in section 453A.43, subsections 1, 2, 3, and 4,
 34 24 that are credited to the health care trust fund, annually,
 34 25 pursuant to section 453A.35. Moneys in the fund shall be
 34 26 separate from the general fund of the state and shall not be
 34 27 considered part of the general fund of the state. However, the
 34 28 fund shall be considered a special account for the purposes
 34 29 of section 8.53 relating to generally accepted accounting
 34 30 principles. Moneys in the fund shall be used only as specified

of prosecutions involving the DIAL and audits to ensure compliance
 with the Medicaid Program.

CODE: Appropriates any remaining funds in the Health Care Trust
 Fund at the close of a fiscal year to the HHS to supplement the
 Medicaid program to be used for Medicaid reimbursement and
 associated costs.

34 31 in this section and shall be appropriated only for the uses
 34 32 specified. Moneys in the fund are not subject to section 8.33
 34 33 and shall not be transferred, used, obligated, appropriated,
 34 34 or otherwise encumbered, except as provided in this section.
 34 35 Notwithstanding section 12C.7, subsection 2, interest or
 35 1 earnings on moneys deposited in the fund shall be credited to
 35 2 the fund.

35 3 2. Moneys in the fund shall be used only for purposes
 35 4 related to health care, substance use disorder treatment and
 35 5 prevention, and tobacco use prevention, cessation, and control.

35 6 3. Any funds remaining in the health care trust fund at the
 35 7 close of a fiscal year are appropriated to the department of
 35 8 health and human services to supplement any medical assistance
 35 9 program appropriation for the same fiscal year to be used
 35 10 for medical assistance reimbursement and associated costs,
 35 11 including program administration and costs associated with
 35 12 program implementation.

35 13 MENTAL HEALTH INSTITUTES — RETAINING OF REVENUE

35 14 Sec. 47.NEW SECTION 218.97 RETAINING OF REVENUE BY MENTAL
 35 15 HEALTH INSTITUTES.

35 16 Notwithstanding sections 218.78 and 249A.11, any revenue
 35 17 received from the state mental health institute at Cherokee or
 35 18 the state mental health institute at Independence pursuant to
 35 19 42 C.F.R. §438.6(e) may be retained and expended by the mental
 35 20 health institute.

CODE: Allows any revenue received by a State MHI to be retained and expended by the MHI.

35 21 RESIDENTS OF MENTAL HEALTH INSTITUTES — RETAINING MEDICAID
 35 22 ELIGIBILITY

35 23 Sec. 48.NEW SECTION 249A.38A RESIDENTS OF MENTAL HEALTH
 35 24 INSTITUTES — RETAINING OF MEDICAID ELIGIBILITY.

35 25 Notwithstanding any provision of law to the contrary,
 35 26 a Medicaid recipient residing at the state mental health
 35 27 institute at Cherokee or the state mental health institute
 35 28 at Independence shall retain Medicaid eligibility during the
 35 29 period of the Medicaid recipient's stay for which federal
 35 30 financial participation is available.

CODE: Permits Medicaid recipients residing in a State MHI to retain their Medicaid eligibility during their stay at the MHI.

35 31 STATE RESOURCES CENTERS — SCOPE OF SERVICES

35 32 Sec. 49. NEW SECTION 218.97A STATE RESOURCE CENTERS —
 35 33 SCOPE OF SERVICES APPROACH — TIME-LIMITED ASSESSMENT AND
 35 34 RESPIRE SERVICES.

CODE: Permits the HHS to bill for State Resource Center services utilizing a scope of services approach in a manner that does not shift costs between the Medicaid program, the MHDS regions, or other State Resource Center funding sources.

35 35 1. The department may continue to bill for state resource
 36 1 center services utilizing a scope of services approach used for
 36 2 private providers of intermediate care facilities for persons
 36 3 with an intellectual disability services, in a manner which
 36 4 does not shift costs between the medical assistance program,
 36 5 mental health and disability services regions, or other sources
 36 6 of funding for the state resource centers.
 36 7 2. The state resource centers may expand the time-limited
 36 8 assessment and respite services during a fiscal year.

36 9 JUVENILE DETENTION HOME FUND — APPROPRIATION

36 10 Sec. 50. Section 232.142, Code 2024, is amended to read as
 36 11 follows:

CODE: Appropriates moneys deposited in the Juvenile Detention Home Fund to the HHS for distribution.

36 12 232.142 MAINTENANCE AND COST OF JUVENILE HOMES — FUND —
 36 13 APPROPRIATION OF MONEYS IN FUND .

DETAIL: The amount of distribution will be equal to a percentage of the costs associated with county and multicounty juvenile detention homes in the prior fiscal year. Moneys appropriated for distribution will be allocated among eligible detention homes.

36 14 1. County boards of supervisors which singly or in
 36 15 conjunction with one or more other counties provide and
 36 16 maintain juvenile detention and juvenile shelter care homes are
 36 17 subject to this section.

36 18 2. For the purpose of providing and maintaining a county
 36 19 or multicounty home, the board of supervisors of any county
 36 20 may issue general county purpose bonds in accordance with
 36 21 sections 331.441 through 331.449. Expenses for providing and
 36 22 maintaining a multicounty home shall be paid by the counties
 36 23 participating in a manner to be determined by the boards of
 36 24 supervisors.

36 25 3. A county or multicounty juvenile detention home approved
 36 26 pursuant to this section shall receive financial aid from the
 36 27 state in a manner approved by the director. Aid paid by the
 36 28 state shall be at least ten percent and not more than fifty
 36 29 percent of the total cost of the establishment, improvements,
 36 30 operation, and maintenance of the home.

36 31 4. The director shall adopt minimal rules and standards for
 36 32 the establishment, maintenance, and operation of such homes as
 36 33 shall be necessary to effect the purposes of this chapter. The
 36 34 rules shall apply the requirements of section 237.8, concerning
 36 35 employment and evaluation of persons with direct responsibility
 37 1 for a child or with access to a child when the child is

37 2 alone and persons residing in a child foster care facility,
 37 3 to persons employed by, residing in, or volunteering for a
 37 4 home approved under this section. The director shall, upon
 37 5 request, give guidance and consultation in the establishment
 37 6 and administration of the homes and programs for the homes.
 37 7 5. The director shall approve annually all such homes
 37 8 established and maintained under the provisions of this
 37 9 chapter. A home shall not be approved unless it complies with
 37 10 minimal rules and standards adopted by the director and has
 37 11 been inspected by the department of inspections, appeals, and
 37 12 licensing. The statewide number of beds in the homes approved
 37 13 by the director shall not exceed two hundred seventy-two beds
 37 14 beginning July 1, 2017.

37 15 6. a. A juvenile detention home fund is created in the
 37 16 state treasury under the authority of the department. The
 37 17 fund shall consist of moneys deposited in the fund pursuant to
 37 18 section 602.8108. The moneys in the fund shall be used for
 37 19 the costs of the establishment, improvement, operation, and
 37 20 maintenance of county or multicounty juvenile detention homes
 37 21 in accordance with ~~annual appropriations made by the general~~
 37 22 ~~assembly from the fund for these purposes~~ this subsection.

37 23 b. (1) Moneys deposited in the juvenile detention home
 37 24 fund during a fiscal year are appropriated to the department
 37 25 for the same fiscal year for distribution of an amount equal to
 37 26 a percentage of the costs of the establishment, improvement,
 37 27 operation, and maintenance of county or multicounty juvenile
 37 28 detention homes in the prior fiscal year. Such percentage
 37 29 shall be determined by the department based on the amount
 37 30 available for distribution from the fund.

37 31 (2) Moneys appropriated for distribution in accordance with
 37 32 this subsection shall be allocated among eligible detention
 37 33 homes, prorated on the basis of an eligible detention home's
 37 34 proportion of the costs of all eligible detention homes in the
 37 35 prior fiscal year.

38 1 FAMILY INVESTMENT PROGRAM ACCOUNT ELIMINATION

38 2 Sec. 51. Section 239B.14, subsection 2, Code 2024, is
 38 3 amended to read as follows:
 38 4 2. An individual who commits a fraudulent practice under
 38 5 this section is personally liable for the amount of assistance
 38 6 or other benefits fraudulently obtained. The amount of the

CODE: Redirects recovered funds from fraudulent practices to be credited to the Community Access and Eligibility appropriation for purposes of the FIP instead of being deposited in the Family Investment Program Account.

38 7 assistance or other benefits may be recovered from the offender
 38 8 or the offender's estate in an action brought or by claim
 38 9 filed in the name of the state and the recovered funds shall
 38 10 be deposited in the family investment program account credited
 38 11 to the appropriation to the department for community access
 38 12 and eligibility to be used for the purposes of the family
 38 13 investment program. The action or claim filed in the name of
 38 14 the state shall not be considered an election of remedies to
 38 15 the exclusion of other remedies.

38 16 Sec. 52. Section 252B.27, subsection 1, Code 2024, is
 38 17 amended to read as follows:
 38 18 1. The director, within the limitations of the amount
 38 19 appropriated for child support services, or moneys transferred
 38 20 for this purpose from the family investment program account
 38 21 created in section 239B.11 appropriation to the department for
 38 22 community access and eligibility, may establish new positions
 38 23 and add employees to child support services if the director
 38 24 determines that both the current and additional employees
 38 25 together can reasonably be expected to maintain or increase net
 38 26 state revenue at or beyond the budgeted level for the fiscal
 38 27 year.

38 28 Sec. 53. REPEAL. Section 239B.11, Code 2024, is repealed.

38 29 Sec. 54. TRANSITION PROVISION. All unencumbered and
 38 30 unobligated moneys remaining on June 30, 2024, in the family
 38 31 investment program account created in section 239B.11, are
 38 32 appropriated to the department of health and human services for
 38 33 community access and eligibility.

38 34 QUALITY ASSURANCE ASSESSMENT — PAYMENT PERIOD BASIS

38 35 Sec. 55. Section 249L.3, subsection 2, Code 2024, is amended
 39 1 to read as follows:
 39 2 2. The quality assurance assessment shall be paid by each
 39 3 nursing facility to the department on a quarterly monthly basis
 39 4 after the nursing facility's medical assistance payment rates
 39 5 are adjusted to include funds appropriated from the quality
 39 6 assurance trust fund for that purpose. The department shall

CODE: Allows the Director of the HHS to establish new positions for Child Support Services within the limitations of the amount appropriated for Child Support Services or moneys transferred for this purpose from the Community Access and Eligibility appropriation.

CODE: Repeals Iowa Code section [239B.11](#) (Family Investment Program Account — Diversion Program Subaccount — Diversion Program).

Directs any unexpended funds in the FIP account on June 30, 2024, to be appropriated to the HHS for Community Access and Eligibility.

CODE: Requires that quality assurance assessments be paid by nursing facilities on a monthly basis instead of a quarterly basis. Removes the requirement that quality assurance assessment forms be submitted within 30 days of the end of each calendar quarter.

39 7 prepare and distribute a form upon which nursing facilities
 39 8 shall calculate and report the quality assurance assessment.
 39 9 A nursing facility shall submit the completed form with the
 39 10 assessment amount ~~no later than thirty days following the end~~
 39 11 ~~of each calendar quarter.~~

39 12 SUPPORTED COMMUNITY LIVING SERVICES

39 13 Sec. 56. Section 225C.21, subsection 1, Code 2024, is
 39 14 amended to read as follows:

39 15 1. As used in this section, "supported community living
 39 16 services" means services provided in a noninstitutional
 39 17 setting to ~~adult~~ persons sixteen years of age and older with
 39 18 mental illness, an intellectual disability, brain injury, or
 39 19 developmental disabilities to meet the persons' daily living
 39 20 needs.

CODE: Defines "supported community living services" as services provided in a noninstitutional setting to persons 16 years of age or older with mental illness, an intellectual disability, brain injury, or developmental disability.

39 21 CENTERS OF EXCELLENCE GRANT PROGRAM

39 22 Sec. 57. NEW SECTION 135.194 CENTERS OF EXCELLENCE GRANT
 39 23 PROGRAM.

39 24 1. The department shall administer a centers of excellence
 39 25 grant program to encourage innovation and collaboration among
 39 26 regional health care providers in rural areas, based upon the
 39 27 results of a regional community needs assessment, in order
 39 28 to transform health care delivery that provides quality,
 39 29 sustainable care in meeting the needs of the local community.

39 30 2. An applicant for a grant shall specify how the grant will
 39 31 be expended to accomplish the goals of the program and shall
 39 32 provide a detailed five-year sustainability plan prior to being
 39 33 awarded the grant.

39 34 3. Following receipt of a grant, a recipient shall submit
 39 35 periodic reports as specified by the department to the governor
 40 1 and the general assembly regarding the recipient's expenditure
 40 2 of the grant and progress in accomplishing the program's goals.

CODE: Requires the HHS to administer a Centers of Excellence Grant Program to encourage collaboration among regional health care providers in rural areas to transform health care delivery to provide quality and sustainable care.

40 3 REGIONAL AUTISM ASSISTANCE PROGRAM

40 4 Sec. 58. Section 256.35, Code 2024, is amended to read as
 40 5 follows:

40 6 256.35 REGIONAL AUTISM ASSISTANCE PROGRAM.

40 7 The department shall establish a regional autism assistance

CODE: Requires the HHS to collaborate with the Autism Support Program pursuant to Iowa Code chapter [225D](#) on the Regional Autism

40 8 program, to be administered by the child health specialty
 40 9 clinics of the university of Iowa hospitals and clinics. The
 40 10 program shall ~~be designed to coordinate~~ collaborate with the
 40 11 autism support program created in chapter 225D to enhance
 40 12 interagency collaboration in coordinating educational, medical,
 40 13 and other human services for persons with autism, their
 40 14 parents, and providers of services to persons with autism. The
 40 15 ~~function~~ functions of the program shall include but ~~is~~ are
 40 16 not limited to regionalized and integrated care delivery and
 40 17 coordination, family navigation, the coordination of diagnostic
 40 18 and assessment services, the maintaining of a research base,
 40 19 coordination of in-service training, providing provision of
 40 20 technical assistance, and providing provision of consultation.

Assistance Program. The functions of the Regional Autism Assistance Program must include regionalized and integrated care delivery and coordination and family navigation.

40 21 LODGING EXPENSES UNIVERSITY OF IOWA HOSPITALS AND CLINICS ———
 40 22 CANCER PATIENTS

40 23 Sec. 59. NEW SECTION 217.41D LODGING FOR CANCER PATIENTS
 40 24 ——— UNIVERSITY OF IOWA HOSPITALS AND CLINICS.

40 25 The department shall use funding appropriated to the
 40 26 department for lodging expenses associated with care provided
 40 27 at the university of Iowa hospitals and clinics for patients
 40 28 with cancer in accordance with this section. The funding shall
 40 29 be used for patients whose travel distance is thirty miles
 40 30 or more and whose income is at or below two hundred percent
 40 31 of the federal poverty level as defined by the most recently
 40 32 revised poverty income guidelines published by the United
 40 33 States department of health and human services. The department
 40 34 shall establish the maximum number of overnight stays and the
 40 35 maximum rate reimbursed for overnight lodging, which may be
 41 1 based on the state employee rate established by the department
 41 2 of administrative services.

CODE: Requires the HHS to use appropriated funds for lodging expenses for cancer patients with income below 200.00% of the FPL who travel 30 miles or more to receive treatment at the UIHC.

41 3 ASSISTED LIVING PROGRAM ——— REVISED PAYMENT MODEL STUDY

41 4 Sec. 60. ASSISTED LIVING PROGRAM ——— REVISED PAYMENT
 41 5 MODEL STUDY. The department of health and human services,
 41 6 in consultation with Medicaid provider associations and
 41 7 stakeholders, shall explore options for a revised payment model
 41 8 for reimbursement of assisted living programs that provide
 41 9 services to Medicaid recipients. The study shall include
 41 10 consideration of all sources of funding utilized by residents

Requires the HHS, in consultation with Medicaid provider associations and stakeholders, to conduct a study to explore options for a revised payment model for reimbursement of assisted living programs for Medicaid recipients. Requires the study to include consideration of all sources of funding utilized by residents of assisted living programs. The HHS is required to report all options identified to the General Assembly by December 1, 2024.

41 11 of assisted living programs. The department of health and
41 12 human services shall report all options identified to the
41 13 general assembly by December 1, 2024.

41 14 COUNTY COMMISSIONS OF VETERAN AFFAIRS — APPROPRIATION

41 15 Sec. 61. Section 35A.16, subsection 1, paragraph b, Code
41 16 2024, is amended to read as follows:

41 17 b. There is appropriated from the general fund of the state
41 18 to the department, for the fiscal year beginning July 1, 2009,
41 19 and for each subsequent fiscal year, the sum of ~~one million~~
41 20 nine hundred ninety thousand dollars to be credited to the
41 21 county commissions of veteran affairs fund.

CODE: Decreases the standing limited appropriation from the General Fund to the Department of Veterans Affairs to be credited to the County Commissions of Veteran Affairs Fund from \$1,000,000 to \$990,000 .

DETAIL: This is no change compared to estimated FY 2024.

Health and Human Services

General Fund

	Actual FY 2023 (1)	Estimated FY 2024 (2)	House Subcom FY 2025 (3)	Hse Sub FY25 vs Est FY 2024 (4)	Page and Line # (5)
<u>Aging, Iowa Department on</u>					
Aging					
Aging Programs	\$ 11,304,082	\$ 0	\$ 0	\$ 0	
Office of LTC Ombudsman	1,149,821	0	0	0	
Total Aging, Iowa Department on	\$ 12,453,903	\$ 0	\$ 0	\$ 0	
<u>Public Health, Department of</u>					
Public Health					
Addictive Disorders	\$ 23,659,379	\$ 0	\$ 0	\$ 0	
Healthy Children and Families	5,816,681	0	0	0	
Chronic Conditions	4,258,373	0	0	0	
Community Capacity	6,519,306	0	0	0	
Essential Public Health Services	7,662,464	0	0	0	
Infectious Diseases	1,796,206	0	0	0	
Public Protection	4,466,601	0	0	0	
Resource Management	933,871	0	0	0	
Congenital & Inherited Disorders Registry	202,081	0	0	0	
Total Public Health, Department of	\$ 55,314,962	\$ 0	\$ 0	\$ 0	
<u>Veterans Affairs, Department of</u>					
Veterans Affairs, Dept. of					
General Administration	\$ 1,229,763	\$ 1,033,289	\$ 1,369,205	\$ 335,916	PG 1 LN 9
Cemetery Grounds Service	0	0	292,000	292,000	PG 1 LN 15
Home Ownership Assistance Program	2,000,000	2,200,000	2,200,000	0	PG 1 LN 27
Veterans County Grants	990,000	990,000	990,000	0	STANDING
Veterans Affairs, Dept. of	\$ 4,219,763	\$ 4,223,289	\$ 4,851,205	\$ 627,916	
Veterans Affairs, Dept. of					
Iowa Veterans Home	\$ 7,131,552	\$ 7,115,335	\$ 8,145,736	\$ 1,030,401	PG 1 LN 18
Total Veterans Affairs, Department of	\$ 11,351,315	\$ 11,338,624	\$ 12,996,941	\$ 1,658,317	
<u>Health and Human Services, Department of</u>					
HHS - Aging					
Aging Programs	\$ 0	\$ 11,799,361	\$ 0	\$ -11,799,361	
Office of LTC Ombudsman	0	1,148,959	0	-1,148,959	
Aging and Disability Services	0	0	19,088,714	19,088,714	PG 1 LN 35
HHS - Aging	\$ 0	\$ 12,948,320	\$ 19,088,714	\$ 6,140,394	
HHS - Assistance Payment					

Health and Human Services

General Fund

	Actual FY 2023 (1)	Estimated FY 2024 (2)	House Subcom FY 2025 (3)	Hse Sub FY25 vs Est FY 2024 (4)	Page and Line # (5)
Family Investment Program/PROMISE JOBS	\$ 41,003,978	\$ 41,003,575	\$ 0	\$ -41,003,575	
Medical Assistance	1,510,127,388	1,543,626,779	1,651,307,614	107,680,835	PG 10 LN 19
Health Program Operations	17,446,343	17,446,067	0	-17,446,067	
State Supplementary Assistance	7,349,002	7,349,002	0	-7,349,002	
State Children's Health Insurance	38,661,688	38,661,688	0	-38,661,688	
Child Care Assistance	40,816,931	64,223,730	0	-64,223,730	
Child and Family Services	93,571,677	79,027,794	0	-79,027,794	
Adoption Subsidy	40,596,007	40,883,507	0	-40,883,507	
Family Support Subsidy	949,282	949,282	0	-949,282	
Conner Training	33,632	33,632	0	-33,632	
Volunteers	84,686	84,686	0	-84,686	
Child Abuse Prevention	202,081	232,570	232,570	0	STANDING
HHS - Assistance Payment	\$ 1,790,842,695	\$ 1,833,522,312	\$ 1,651,540,184	\$ -181,982,128	
HHS - Eldora State Training School					
Eldora Training School	\$ 17,606,871	\$ 17,568,511	\$ 0	\$ -17,568,511	
HHS - Cherokee Mental Health Institution					
Cherokee MHI	\$ 15,613,624	\$ 15,923,252	\$ 0	\$ -15,923,252	
HHS - Independence Mental Health Institution					
Independence MHI	\$ 19,688,928	\$ 19,811,470	\$ 0	\$ -19,811,470	
HHS - Glenwood Resource Center					
Glenwood Resource Center	\$ 16,288,739	\$ 16,255,132	\$ 0	\$ -16,255,132	
HHS - Woodward Resource Center					
Woodward Resource Center	\$ 13,409,294	\$ 13,389,577	\$ 0	\$ -13,389,577	
HHS - Civil Commitment Unit / Sexual Offenders					
Civil Commitment Unit for Sexual Offenders	\$ 13,891,276	\$ 14,865,337	\$ 0	\$ -14,865,337	
HHS - Community Services					
Child Support Services	\$ 15,942,885	\$ 15,914,329	\$ 0	\$ -15,914,329	
Field Operations	65,894,438	72,056,945	0	-72,056,945	
HHS - Community Services	\$ 81,837,323	\$ 87,971,274	\$ 0	\$ -87,971,274	
HHS - Human Services					
General Administration	\$ 15,842,189	\$ 18,913,662	\$ 0	\$ -18,913,662	
HHS Facilities	4,172,123	2,157,590	0	-2,157,590	
Commission of Inquiry	0	1,394	1,394	0	STANDING
Nonresident Mental Illness Commitment	12,530	142,802	142,802	0	STANDING
Behavioral Health	0	0	24,400,114	24,400,114	PG 3 LN 7
Community Access and Eligibility	0	0	68,043,944	68,043,944	PG 6 LN 7
Child Support Services	0	0	15,434,282	15,434,282	PG 7 LN 34

Health and Human Services

General Fund

	Actual FY 2023 (1)	Estimated FY 2024 (2)	House Subcom FY 2025 (3)	Hse Sub FY25 vs Est FY 2024 (4)	Page and Line # (5)
Health Program Operations	0	0	39,597,231	39,597,231	PG 12 LN 24
State Child Care Assistance	0	0	34,966,931	34,966,931	PG 16 LN 22
Early Intervention and Supports	0	0	35,277,739	35,277,739	PG 17 LN 2
Child Protective Services	0	0	170,374,778	170,374,778	PG 17 LN 30
State Specialty Care	0	0	100,006,128	100,006,128	PG 20 LN 14
Administration and Compliance	0	0	22,356,598	22,356,598	PG 21 LN 8
HHS - Human Services	\$ 20,026,842	\$ 21,215,448	\$ 510,601,941	\$ 489,386,493	
HHS - Human Rights					
LiHEAP Weatherization Assistance Program – Standing	\$ 0	\$ 1	\$ 1	\$ 0	
Central Administration	0	186,913	0	-186,913	
Community Advocacy and Services	0	956,894	0	-956,894	
Criminal & Juvenile Justice	0	1,318,547	0	-1,318,547	
Single Grant Program	0	140,000	0	-140,000	
HHS - Human Rights	\$ 0	\$ 2,602,355	\$ 1	\$ -2,602,354	
HHS - Public Health					
Congenital & Inherited Disorders Registry	\$ 0	\$ 223,521	\$ 223,521	\$ 0	STANDING
Psychiatry Residency & Fellowship Program - Standing	0	1,200,000	1,200,000	0	STANDING
Addictive Disorders	0	23,656,992	0	-23,656,992	
Healthy Children and Families	0	5,815,491	0	-5,815,491	
Chronic Conditions	0	4,256,595	0	-4,256,595	
Community Capacity	0	7,435,682	0	-7,435,682	
Essential Public Health Services	0	7,662,464	0	-7,662,464	
Infectious Diseases	0	1,795,902	0	-1,795,902	
Public Protection	0	4,581,792	0	-4,581,792	
Resource Management	0	933,543	0	-933,543	
Public Health	0	0	22,916,821	22,916,821	PG 4 LN 23
HHS - Public Health	\$ 0	\$ 57,561,982	\$ 24,340,342	\$ -33,221,640	
Total Health and Human Services, Department of	\$ 1,989,205,591	\$ 2,113,634,970	\$ 2,205,571,182	\$ 91,936,212	
Total Health and Human Services	\$ 2,068,325,771	\$ 2,124,973,594	\$ 2,218,568,123	\$ 93,594,529	

NOTE: There is appropriated from the General Fund for FY 2026 \$1,950,000 for the Medical Assistance HCBS Waiver for Individuals with an Intellectual Disability.

Health and Human Services

Other Funds

	Actual FY 2023 <u>(1)</u>	Estimated FY 2024 <u>(2)</u>	House Subcom FY 2025 <u>(3)</u>	Hse Sub FY25 vs Est FY 2024 <u>(4)</u>	Page and Line # <u>(5)</u>
<u>Public Health, Department of</u>					
Public Health					
Gambling Treatment Program - SWRF	\$ 1,750,000	\$ 0	\$ 0	\$ 0	
Total Public Health, Department of	\$ 1,750,000	\$ 0	\$ 0	\$ 0	
<u>Health and Human Services, Department of</u>					
HHS - Human Services					
FIP - TANF	\$ 2,123,750	\$ 4,881,085	\$ 0	\$ -4,881,085	
PROMISE JOBS - TANF	2,826,748	5,412,060	0	-5,412,060	
Field Operations - TANF	31,296,335	31,296,232	0	-31,296,232	
General Administration - TANF	3,744,000	3,744,000	0	-3,744,000	
Child & Family Services - TANF	31,192,889	32,501,575	0	-32,501,575	
Training & Technology - TANF	379,318	1,037,186	0	-1,037,186	
Categorical Eligibility SNAP - TANF	16,557	14,236	0	-14,236	
TANF General Transfer	0	0	12,988,627	12,988,627	PG 8 LN 28
Pregnancy Prevention - TANF	\$ 1,602,232	\$ 1,913,203	\$ 1,913,203	\$ 0	PG 8 LN 34
Community Access and Eligibility - TANF	0	0	5,000,000	5,000,000	PG 9 LN 16
ICAR System - TANF	0	0	5,000,000	5,000,000	PG 9 LN 23
FaDSS - TANF	2,885,440	2,888,980	2,888,980	0	PG 9 LN 28
Child Abuse Prevention - TANF	74,194	125,000	125,000	0	PG 9 LN 35
TANF Administration and Compliance	0	0	3,533,647	3,533,647	PG 10 LN 3
Child Care Assistance - TANF	26,205,412	47,166,826	47,166,826	0	PG 10 LN 8
Child Protective Service - TANF	0	0	62,364,100	62,364,100	PG 10 LN 10
Kinship Stipend - TANF	0	0	3,000,000	3,000,000	PG 10 LN 12
HHS - Human Services	\$ 102,346,875	\$ 130,980,383	\$ 143,980,383	\$ 13,000,000	
HHS - Assistance Payment					
Behavioral Health System - RIF	0	0	3,000,000	3,000,000	
Health Program Operations - PSA	234,193	234,193	234,193	0	PG 13 LN 23
Medical Assistance - QATF	66,282,906	111,216,205	111,216,205	0	PG 13 LN 35
Medical Assistance - HHCAT	33,920,554	33,920,554	33,920,554	0	PG 14 LN 12
Medicaid Supplemental - MFF	150,000	150,000	150,000	0	PG 33 LN 18
Medical Assistance - HCTF	200,660,000	189,860,000	176,470,000	-13,390,000	PG 34 LN 15
HHS - Assistance Payment	\$ 301,247,653	\$ 335,380,952	\$ 324,990,952	\$ -10,390,000	
HHS - Public Health					
Gambling Treatment Program - SWRF	\$ 0	\$ 1,750,000	\$ 1,750,000	\$ 0	PG 3 LN 30
Total Health and Human Services, Department of	\$ 403,594,528	\$ 468,111,335	\$ 470,721,335	\$ 2,610,000	

Health and Human Services

Other Funds

	<u>Actual FY 2023 (1)</u>	<u>Estimated FY 2024 (2)</u>	<u>House Subcom FY 2025 (3)</u>	<u>Hse Sub FY25 vs Est FY 2024 (4)</u>	<u>Page and Line # (5)</u>
Total Health and Human Services	<u>\$ 405,344,528</u>	<u>\$ 468,111,335</u>	<u>\$ 470,721,335</u>	<u>\$ 2,610,000</u>	

Health and Human Services

FTE Positions

	Actual FY 2023 <u>(1)</u>	Estimated FY 2024 <u>(2)</u>	House Subcom FY 2025 <u>(3)</u>	Hse Sub FY25 vs Est FY 2024 <u>(4)</u>	Page and Line # <u>(5)</u>
Health and Human Services, Department of					
HHS - Aging					
Aging Programs	0.00	31.02	0.00	-31.02	
Office of LTC Ombudsman	0.00	12.00	0.00	-12.00	
HHS - Aging	<u>0.00</u>	<u>43.02</u>	<u>0.00</u>	<u>-43.02</u>	
HHS - Assistance Payment					
Family Investment Program/PROMISE JOBS	20.13	18.50	0.00	-18.50	
Medical Assistance	8.53	13.10	0.00	-13.10	
Health Program Operations	3.29	3.00	0.00	-3.00	
Child Care Assistance	2.73	5.22	0.00	-5.22	
Child and Family Services	4.62	5.00	0.00	-5.00	
HHS - Assistance Payment	<u>39.30</u>	<u>44.82</u>	<u>0.00</u>	<u>-44.82</u>	
HHS - Eldora State Training School					
Eldora Training School	165.87	206.82	0.00	-206.82	
HHS - Cherokee Mental Health Institution					
Cherokee MHI	148.97	167.49	0.00	-167.49	
HHS - Independence Mental Health Institution					
Independence MHI	163.46	184.20	0.00	-184.20	
HHS - Glenwood Resource Center					
Glenwood Resource Center	428.45	343.50	0.00	-343.50	
HHS - Woodward Resource Center					
Woodward Resource Center	477.35	545.76	0.00	-545.76	
HHS - Civil Commitment Unit / Sexual Offenders					
Civil Commitment Unit for Sexual Offenders	129.07	146.02	0.00	-146.02	
HHS - Community Services					
Child Support Services	415.14	423.00	0.00	-423.00	
Field Operations	1,519.26	1,589.00	0.00	-1,589.00	
HHS - Community Services	<u>1,934.40</u>	<u>2,012.00</u>	<u>0.00</u>	<u>-2,012.00</u>	
HHS - Human Services					
General Administration	279.17	323.67	0.00	-323.67	
HHS Administration	0.00	0.00	4,156.00	4,156.00	
HHS - Human Services	<u>279.17</u>	<u>323.67</u>	<u>4,156.00</u>	<u>3,832.33</u>	
HHS - Human Rights					
Central Administration	0.00	5.58	0.00	-5.58	
Community Advocacy and Services	0.00	7.53	0.00	-7.53	
Criminal & Juvenile Justice	0.00	7.57	0.00	-7.57	

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Health and Human Services

FTE Positions

	Actual FY 2023 (1)	Estimated FY 2024 (2)	House Subcom FY 2025 (3)	Hse Sub FY25 vs Est FY 2024 (4)	Page and Line # (5)
HHS - Human Rights	0.00	20.68	0.00	-20.68	
HHS - Public Health					
Addictive Disorders	0.00	12.00	0.00	-12.00	
Healthy Children and Families	0.00	12.05	0.00	-12.05	
Chronic Conditions	0.00	11.00	0.00	-11.00	
Community Capacity	0.00	14.00	0.00	-14.00	
Infectious Diseases	0.00	6.00	0.00	-6.00	
Public Protection	0.00	59.00	0.00	-59.00	
Resource Management	0.00	4.00	0.00	-4.00	
HHS - Public Health	0.00	118.05	0.00	-118.05	
Total Health and Human Services, Department of	3,766.04	4,156.03	4,156.00	-0.03	

Health and Human Services

FTE Positions

	Actual FY 2023 (1)	Estimated FY 2024 (2)	House Subcom FY 2025 (3)	Hse Sub FY25 vs Est FY 2024 (4)	Page and Line # (5)
<u>Aging, Iowa Department on</u>					
Aging					
Aging Programs	33.78	0.00	0.00	0.00	
Office of LTC Ombudsman	12.23	0.00	0.00	0.00	
Total Aging, Iowa Department on	46.00	0.00	0.00	0.00	
<u>Public Health, Department of</u>					
Public Health					
Addictive Disorders	8.65	0.00	0.00	0.00	
Healthy Children and Families	10.68	0.00	0.00	0.00	
Chronic Conditions	8.66	0.00	0.00	0.00	
Community Capacity	6.31	0.00	0.00	0.00	
Infectious Diseases	4.76	0.00	0.00	0.00	
Public Protection	140.08	0.00	0.00	0.00	
Resource Management	3.42	0.00	0.00	0.00	
Total Public Health, Department of	182.56	0.00	0.00	0.00	
<u>Veterans Affairs, Department of</u>					
Veterans Affairs, Dept. of					
General Administration	8.83	9.00	15.00	6.00	PG 1 LN 9
Total Veterans Affairs, Department of	8.83	9.00	15.00	6.00	
Total Health and Human Services	4,003.43	4,165.03	4,171.00	5.97	