

Health and Human Services Appropriations Bill House File 2463

Last Action:
**House Appropriations
Subcommittee**
April 3, 2014

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

**Fiscal Services Division
Legislative Services Agency**

NOTES ON BILLS AND AMENDMENTS (NOBA)

Available on line at <http://www.legis.iowa.gov/LSAReports/noba.aspx>
LSA Contacts: Jess Benson (515-281-4611) and Estelle Montgomery (515-281-6764)

EXECUTIVE SUMMARY

HEALTH AND HUMAN SERVICES APPROPRIATIONS BILL

FUNDING SUMMARY

Appropriations Total

General Fund FY 2015: Appropriates a total of \$1,858.4 million from the General Fund and 5,266.9 FTE positions to the Department on Aging (IDA), Departments of Public Health (DPH), Human Services (DHS), Veterans Affairs (IVA), and the Iowa Veterans Home (IVH). This is an increase of \$107.4 million and a decrease of 77.2 FTE positions compared to estimated FY 2014.

Other Funds FY 2015: Appropriates a total of \$431.7 million from other funds. This is a decrease of \$43.1 million compared to estimated FY 2014.

General Fund - Department of Human Services

Appropriates \$1,775.9 million and 5,019.61 FTE positions. This is an increase of \$105.9 million and a decrease of 80.1 FTE positions compared to estimated FY 2014.

Page 23, Line 2

General Fund - Department of Public Health

Appropriates \$58.8 million and 195.3 FTE positions. This is an increase of \$766,000 and a decrease of 0.2 FTE positions compared to estimated FY 2014.

Page 3, Line 27

General Fund - Department of Veterans Affairs and Iowa Veterans Home

Appropriates \$12.2 million and 13.0 FTE positions. This is an increase of \$900,000 and no change in FTE positions compared to estimated FY 2014.

Page 21, Line 15

General Fund - Department on Aging

Appropriates \$10.6 million and 28.0 FTE positions. This is no change in funding and an increase of 2.9 FTE positions compared to estimated FY 2014.

Page 1, Line 3

General Fund - Office of Long-Term Care Resident's Advocate

Appropriates \$822,000 and 11.0 FTE positions. This is a decrease of \$200,000 and an increase of 0.1 FTE positions compared to estimated FY 2014.

Page 3, Line 4

Other Fund Appropriations

Appropriates \$140.5 million from the Temporary Assistance for Needy Families (TANF) Block Grant. This is an increase of \$1.7 million compared to estimated FY 2014. Page 23, Line 4

Appropriates \$221.8 million from the Health Care Trust Fund. This is a decrease of \$2.7 million compared to estimated FY 2014. Page 33, Line 16

Appropriates \$5.5 million from the Pharmaceutical Settlement Account. This is a decrease of \$1.2 million compared to estimated FY 2014. Page 62, Line 2

Appropriates \$29.2 million from the Quality Assurance Trust Fund. This is an increase of \$407,000 compared to estimated FY 2014. Page 62, Line 17

NEW PROGRAMS, SERVICES, OR ACTIVITIES

Department of Human Services

Establishes an electronic asset, income, and identity eligibility verification system for individuals that apply for Medicaid on the basis of being aged, blind, or disabled. Page 74, Line 13

Department of Inspections and Appeals

Establishes a Division of Mental Health Advocate in the Department of Inspections and Appeals (DIA). Page 76, Line 1

Department of Public Health

Implements a Psychiatric Practice Model in the Primary Care Physician Residency Program at the University of Iowa. Page 19, Line 6

MAJOR INCREASES/DECREASES/TRANSFERS OF EXISTING PROGRAMS

Department of Human Services

A General Fund increase of \$696,000 for the Child Support Recovery Unit. Page 32, Line 10

A General Fund increase of \$103.8 million for the Medicaid Program. Page 33, Line 27

A General Fund increase of \$5.0 million for Medical Contracts. Page 35, Line 29

A General Fund decrease of \$2.4 million for the State Supplementary Assistance Program.	Page 37, Line 4
A General Fund increase of \$9.1 million for State Children's Health Insurance Program (hawk-i Program).	Page 38, Line 1
A General Fund decrease of \$17.1 million for Child Care Assistance.	Page 38, Line 30
A General Fund decrease of \$7.8 million for Juvenile Institutions.	Page 41, Line 27
A General Fund increase of \$5.1 million for children adjudicated as delinquent or Children in Need of Assistance (CINA).	Page 42, Line 24
A General Fund increase of \$4.3 million for Child and Family Services.	Page 43, Line 26
A General Fund increase of \$1.9 million for Adoption Subsidy.	Page 51, Line 2
A General Fund decrease of \$14,000 for the Family Support Subsidy Program.	Page 51, Line 28
A General Fund increase of \$291,000 for the four Mental Health Institutes.	Page 52, Line 30
A General Fund increase of \$1.9 million for the two State Resource Centers.	Page 53, Line 27
A General Fund increase of \$498,000 for the Civil Commitment Unit for Sexual Offenders.	Page 55, Line 6
A General Fund decrease of \$25,000 for General Administration.	Page 56, Line 29
A General Fund increase of \$735,000 for the Mental Health and Disability Services Equalization distribution.	Page 65, Line 35

Department of Public Health

A General Fund decrease of \$75,000 for Addictive Disorders.	Page 4, Line 2
A General Fund increase of \$18,000 for Healthy Children and Families.	Page 8, Line 16
A General Fund decrease of \$40,000 for Chronic Conditions.	Page 10, Line 31

A General Fund increase of \$722,000 for Community Capacity. Page 13, Line 1

A General Fund increase of \$141,000 for Public Protection. Page 20, Line 2

Department of Veterans Affairs

A General Fund increase of \$900,000 for the Home Ownership Assistance Program. Page 22, Line 17

STUDIES AND INTENT

Department of Human Services

Specifies that it is the intent of the General Assembly to provide sufficient funding for the Child Care Assistance Program for FY 2015 to avoid the establishment of a waiting list. Page 40, Line 32

Specifies that it is the intent of the General Assembly that the Department make every possible effort to fill Field Operations vacancies positions authorized. Page 56, Line 11

Requires the DHS and the Department of Education Vocational Rehabilitation Division to jointly develop protocols and program models to integrate employment-related services for persons with disabilities through federal matching Vocational Rehabilitation funds. Page 67, Line 26

Requires the DHS to expand on the study regarding a hospital bed tracking system for psychiatric and substance-related placements. Page 68, Line 4

Requires the DHS to convene a group to study community-based placement options for persons with serious mental illness to divert them from institutional placements. Page 68, Line 27

Requires the DHS, the DPH, and the Department of Corrections (DOC), to implement an interagency collaborative effort to provide an integrated approach to address the medical and psychosocial needs of individuals released from correctional facilities. Page 74, Line 32

Department of Public Health

Specifies it is the intent of the General Assembly that individuals with a diagnosis of both substance abuse and gambling addiction be given priority in treatment services from the funds appropriated for substance abuse and problem gambling. Page 7, Line 13

EXECUTIVE SUMMARY

HEALTH AND HUMAN SERVICES APPROPRIATIONS BILL

HOUSE FILE 2463

Implements legislative intent for [Iowa code section 135.106](#), HOPES-HFI, and [Iowa code section 256I.9](#), Early Childhood Iowa. Priority for Home Visitation Program funding is to be given to programs using evidence-based or promising models for home visitation.

Page 8, Line 31

Department of Public Health

Directs the University of Iowa College of Dentistry to create a proposal for a Geriatric Dentistry Residency Program that will include curriculum, number of residences, cost, funding sources, and incentives for the participants to stay and practice in the State upon completion of the Program.

Page 10, Line 16

Requires the DHS to submit a report to the Governor and the LSA concerning the status of juvenile delinquent girls in out-of-home placements between the dates of December 1, 2013, and December 1, 2014. The report must include placement histories, reasons for placements, education services status, treatment of youth, and recommendations for the Legislature.

Page 43, Line 15

SIGNIFICANT CODE CHANGES

Department of Human Services

Lowers the nursing facility occupancy rate to 50.0% to allow families to supplement nursing facility residents for a private room.

Page 72, Line 33

Requires the DHS to report annually to the Auditor, on or before November 1, detailing the charges and costs incurred by each county for office space and for providing supplies and equipment and the amounts reimbursed by the DHS.

Page 73, Line 4

Department of Public Health

Directs the DPH to include physical therapists as approved professionals eligible for the Primary Care Recruitment and Retention Endeavor (PRIMECARRE) Program.

Page 19, Line 2

Directs the DHS to implement a new health services initiative under the Children's Health Insurance Program (CHIP) to provide funding for the State Poison Control Center. Allows the Center to transfer as much funding as needed for the purpose of receiving matching federal funds.

Page 20, Line 22

Iowa Insurance Division

Requires the Commissioner of Insurance to develop a standard form to obtain prior authorization for

Page 84, Line 21

prescription drug benefits under a health benefit plan by January 1, 2015

EFFECTIVE DATE

Department of Human Services

The Division making changes to the Medical Residency Program, the Consumer-Directed Attendant Care (CDAC) Program under Medicaid, the Autism Program, the Foster Care Respite Program, and Community Mental Health Center (CMHC) Reimbursement is effective on enactment. Page 65, Line 20

The Section relating to CDAC is retroactive to July 1, 2013. Page 65, Line 23

The Sections relating to CMHC reimbursement are retroactive to July 1, 2013. Page 65, Line 27

The Division creating a third-party Medicaid asset, income, and identity verification system is effective on enactment. Page 74, Line 29

Department of Inspections and Appeals

The Division that implements the new Division of Mental Health Advocates and makes conforming Code changes for the shift of the Advocates is effective July 1, 2015. Page 84, Line 17

House File 2463 provides for the following changes to the Code of Iowa.

Page #	Line #	Bill Section	Action	Code Section
69	11	58	Amend	331.388.3
69	19	59	Add	331.391.4
69	34	60	Amend	331.397.4.d
70	5	61	Add	331.424A.3A
70	15	62	Amend	426B.3.4
71	8	63	Amend	426B.3.5.b
72	33	65	Amend	249A.4.10.b.(6)
73	4	66	Amend	217.32
74	3	67	Amend	256I.8.3
76	3	71	New	10A.901
76	10	72	New	10A.902
78	4	74	Amend	225C.4.1.m
78	12	75	Amend	226.31
78	29	76	Amend	229.2.1.b.(6)
79	2	77	Amend	229.9A
79	13	78	Amend	229.12.2
79	25	79	Amend	229.14A.1
80	3	80	Amend	229.14A.5.c
80	9	81	Amend	229.15.6
80	21	82	Amend	229.19
84	5	83	Amend	229.25.1.a.(1)
84	21	86	New	505.26

1 1 DIVISION I
 1 2 DEPARTMENT ON AGING
 1 3 Section 1. 2013 Iowa Acts, chapter 138, section 131, is
 1 4 amended to read as follows:

1 5 SEC. 131. DEPARTMENT ON AGING. There is appropriated from
 1 6 the general fund of the state to the department on aging for
 1 7 the fiscal year beginning July 1, 2014, and ending June 30,
 1 8 2015, the following amount, or so much thereof as is necessary,
 1 9 to be used for the purposes designated:

1 10 For aging programs for the department on aging and area
 1 11 agencies on aging to provide citizens of Iowa who are 60 years
 1 12 of age and older with case management for frail elders, Iowa's
 1 13 aging and disabilities resource center, and other services
 1 14 which may include but are not limited to adult day services,
 1 15 respite care, chore services, information and assistance,
 1 16 and material aid, for information and options counseling for
 1 17 persons with disabilities who are 18 years of age or older,
 1 18 and for salaries, support, administration, maintenance, and
 1 19 miscellaneous purposes, and for not more than the following
 1 20 full-time equivalent positions:

1 21	.....	\$	5,300,190
1 22			<u>10,606,066</u>
1 23	.....	FTEs	28.00

1 24 1. Funds appropriated in this section may be used to
 1 25 supplement federal funds under federal regulations. To
 1 26 receive funds appropriated in this section, a local area
 1 27 agency on aging shall match the funds with moneys from other
 1 28 sources according to rules adopted by the department. Funds
 1 29 appropriated in this section may be used for elderly services
 1 30 not specifically enumerated in this section only if approved
 1 31 by an area agency on aging for provision of the service within
 1 32 the area.

1 33 2. Of the funds appropriated in this section, ~~\$439,973~~
 1 34 \$279,946 is transferred to the economic development authority
 1 35 for the Iowa commission on volunteer services to be used for
 2 1 the retired and senior volunteer program.

2 2 3. a. The department on aging shall establish and enforce
 2 3 procedures relating to expenditure of state and federal funds
 2 4 by area agencies on aging that require compliance with both
 2 5 state and federal laws, rules, and regulations, including but
 2 6 not limited to all of the following:
 2 7 (1) Requiring that expenditures are incurred only for goods

General Fund appropriation to the Department on Aging for FY 2015.

 DETAIL: This is no change in funding and a general increase of 2.90 FTE positions compared to estimated FY 2014. The increase in FTE positions matches the FTE positions appropriated in FY 2014, but may not have been filled due to staff turnover.

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

Requires a transfer of \$279,946 to the Iowa Commission on Volunteer Services in the Iowa Economic Development Authority for the Retired Senior Volunteer Program (RSVP).

DETAIL: This is no change compared to the FY 2014 allocation.

Requires the Department on Aging to establish and enforce procedures related to expenditures of State and federal funds and to complying with both State and federal law. An AAA is liable for any expenditures that are not in compliance with the law.

2 8 or services received or performed prior to the end of the
2 9 fiscal period designated for use of the funds.

2 10 (2) Prohibiting prepayment for goods or services not
2 11 received or performed prior to the end of the fiscal period
2 12 designated for use of the funds.

2 13 (3) Prohibiting the prepayment for goods or services
2 14 not defined specifically by good or service, time period, or
2 15 recipient.

2 16 (4) Prohibiting the establishment of accounts from which
2 17 future goods or services which are not defined specifically by
2 18 good or service, time period, or recipient, may be purchased.

2 19 b. The procedures shall provide that if any funds are
2 20 expended in a manner that is not in compliance with the
2 21 procedures and applicable federal and state laws, rules, and
2 22 regulations, and are subsequently subject to repayment, the
2 23 area agency on aging expending such funds in contravention of
2 24 such procedures, laws, rules and regulations, not the state,
2 25 shall be liable for such repayment.

2 26 4. Of the funds appropriated in this section, ~~\$125,000~~
2 27 \$250,000 shall be used to fund services to meet the unmet needs
2 28 of older individuals as identified in the annual compilation of
2 29 unmet service units by the area agencies on aging.

Allocates \$250,000 to be used to meet the unmet needs of older individuals as identified by the Unmet Needs Services Report.

DETAIL: This is no change compared to the FY 2014 allocation.

2 30 5. Of the funds appropriated in this section, ~~\$300,000~~
2 31 \$600,000 shall be used to fund home and community-based
2 32 services through the area agencies on aging that enable older
2 33 individuals to avoid more costly utilization of residential or
2 34 institutional services and remain in their own homes.

Allocates an additional \$600,000 to be used for Home and Community-Based Services provided through an AAA.

DETAIL: This is no change compared to the FY 2014 allocation.

2 35 6. Of the funds appropriated in this subsection, ~~\$10,000~~
3 1 \$20,000 shall be used for ~~implementation~~ continuation of a
3 2 guardianship and conservatorship monitoring and assistance
3 3 pilot project as specified in this 2013 Act.

Allocates \$20,000 for the guardianship and conservatorship monitoring, and assistance pilot project.

DETAIL: This is no change compared to the FY 2014 allocation. This is the second year of the pilot project.

3 4 DIVISION II
3 5 OFFICE OF LONG-TERM CARE OMBUDSMAN

3 6 Sec. 2. 2013 Iowa Acts, chapter 138, section 132, is amended
3 7 to read as follows:
3 8 SEC. 132. OFFICE OF LONG-TERM CARE ~~—RESIDENT'S ADVOCATE~~
3 9 OMBUDSMAN . There is appropriated from the general fund of
3 10 the state to the office of long-term care ~~resident's advocate~~
3 11 ombudsman for the fiscal year beginning July 1, 2014, and
3 12 ending June 30, 2015, the following amount, or so much thereof

General Fund appropriation to the Office of Long-Term Care Resident's Advocate for FY 2015.

DETAIL: This is a decrease of \$200,000 and an increase of 0.10 FTE position compared to estimated FY 2014. The decrease reflects the Governor's veto of two additional Long-Term Care Resident's Advocates from HF 446 (FY 2014 Health and Human Services

3 13 as is necessary, to be used for the purposes designated:
 3 14 For salaries, support, administration, maintenance, and
 3 15 miscellaneous purposes, and for not more than the following
 3 16 full-time equivalent positions:
 3 17\$ 510,854
 3 18 821,707
 3 19 FTEs 43.00
 3 20 11.00

Appropriations Act).

3 21 2. Of the funds appropriated in this section, ~~\$405,000~~
 3 22 \$210,000 shall be used to provide two local long-term care
 3 23 ~~resident's advocates ombudsman~~ to administer the certified
 3 24 volunteer long-term care ~~resident's advocates ombudsman~~ program
 3 25 pursuant to section 231.45, including operational certification
 3 26 and training costs.

Allocates \$210,000 for Local Long-Term Care Resident's Advocates to administer the Certified Volunteer Long-Term Care Resident Advocates Program.

DETAIL: This is no change compared to the FY 2014 allocation.

3 27 DIVISION III
 3 28 DEPARTMENT OF PUBLIC HEALTH

3 29 Sec. 3. 2013 Iowa Acts, chapter 138, section 133, is amended
 3 30 to read as follows:
 3 31 SEC. 133. DEPARTMENT OF PUBLIC HEALTH. There is
 3 32 appropriated from the general fund of the state to the
 3 33 department of public health for the fiscal year beginning July
 3 34 1, 2014, and ending June 30, 2015, the following amounts, or
 3 35 so much thereof as is necessary, to be used for the purposes
 4 1 designated:

This Division appropriates funds to the Department of Public Health (DPH).

4 2 1. ADDICTIVE DISORDERS
 4 3 For reducing the prevalence of use of tobacco, alcohol, and
 4 4 other drugs, and treating individuals affected by addictive
 4 5 behaviors, including gambling, and for not more than the
 4 6 following full-time equivalent positions:
 4 7\$ 13,581,845
 4 8 27,088,690
 4 9 FTEs 13.00

General Fund appropriation to Addictive Disorders programs.

DETAIL: This is a decrease of \$75,000 and no change in FTE positions compared to estimated FY 2014. The General Fund changes include:

- A decrease of \$50,000 for tobacco social media funding.
- A decrease of \$25,000 for tobacco education materials.

4 10 a. (1) Of the funds appropriated in this subsection,
 4 11 ~~\$2,574,184~~ \$5,073,361 shall be used for the tobacco use
 4 12 prevention and control initiative, including efforts at the
 4 13 state and local levels, as provided in chapter 142A. The
 4 14 commission on tobacco use prevention and control established
 4 15 pursuant to section 142A.3 shall advise the director of
 4 16 public health in prioritizing funding needs and the allocation
 4 17 of moneys appropriated for the programs and activities of
 4 18 the initiative under this subparagraph (1) and shall make
 4 19 recommendations to the director in the development of budget
 4 20 requests relating to the initiative.

Allocates \$5,073,361 for tobacco use, prevention, cessation, and treatment.

DETAIL: This is a decrease of \$75,000 compared to the FY 2014 allocation.

<p>4 21 (2) Of the funds allocated in this paragraph "a", \$37,500 4 22 shall be used to develop a social media structure to engage 4 23 youth and prevent youth initiation of tobacco use. Of the 4 24 amount allocated in this subparagraph (2), \$12,500 <u>\$25,000</u> 4 25 shall be used for a youth summit.</p>	<p>Allocates \$25,000 to be used for a Youth Summit.</p> <p>DETAIL: This is no change compared to the FY 2014 allocation for the Youth Summit. However, the FY 2014 allocation of \$50,000 for social media structure has been removed.</p>
<p>4 26 (3) Of the funds allocated in this paragraph "a", \$100,000 4 27 <u>\$200,000</u> shall be used to increase the efficacy of local 4 28 tobacco control efforts by community partnerships, including 4 29 through professional development, regional trainings and round 4 30 table planning efforts, and a training opportunity involving 4 31 all community partnerships.</p>	<p>Allocates \$200,000 for local tobacco control community partnerships.</p> <p>DETAIL: This is no change compared to the FY 2014 allocation.</p>
<p>4 32 (4) Of the funds allocated in this paragraph "a", \$600,000 4 33 <u>\$1,950,000</u> shall be used to promote smoking cessation and to 4 34 reduce the number of tobacco users in the state by offering 4 35 nicotine replacement therapy to uninsured and underinsured 5 1 lowans.</p>	<p>Allocates \$1,950,000 to be used for smoking cessation nicotine replacement therapy for uninsured and underinsured lowans.</p> <p>DETAIL: This is no change compared to the FY 2014 allocation.</p>
<p>5 2 (5) (a) Of the funds allocated in this paragraph "a", 5 3 \$226,534 <u>\$453,067</u> is transferred to the alcoholic beverages 5 4 division of the department of commerce for enforcement of 5 5 tobacco laws, regulations, and ordinances and to engage in 5 6 tobacco control activities approved by the division of tobacco 5 7 use prevention and control as specified in the memorandum of 5 8 understanding entered into between the divisions.</p>	<p>Transfers \$453,067 to the Alcoholic Beverages Division (ABD) of the Department of Commerce for enforcement of tobacco laws, regulations, and ordinances per provisions in Iowa Code chapter 63.</p> <p>DETAIL: This is no change compared to the FY 2014 allocation.</p>
<p>5 9 (b) For the fiscal year beginning July 1, 2014, and ending 5 10 June 30, 2015, the terms of the memorandum of understanding, 5 11 entered into between the division of tobacco use prevention 5 12 and control of the department of public health and the 5 13 alcoholic beverages division of the department of commerce, 5 14 governing compliance checks conducted to ensure licensed retail 5 15 tobacco outlet conformity with tobacco laws, regulations, and 5 16 ordinances relating to persons under eighteen years of age, 5 17 shall <u>continue</u> to restrict the number of such checks to one 5 18 check per retail outlet, and one additional check for any 5 19 retail outlet found to be in violation during the first check.</p>	<p>Limits tobacco compliance checks by the ABD to one annually per retail outlet and one additional check for any retail outlet found to be in violation during the first check.</p>
<p>5 20 b. Of the funds appropriated in this subsection, 5 21 \$41,007,665 <u>\$22,015,329</u> shall be used for problem gambling and 5 22 substance-related disorder prevention, treatment, and recovery 5 23 services, including a 24-hour helpline, public information 5 24 resources, professional training, and program evaluation.</p>	<p>Allocates \$22,015,329 for problem gambling and substance abuse treatment and prevention.</p> <p>DETAIL: This is no change compared to the FY 2014 allocation.</p>
<p>5 25 (1) Of the funds allocated in this paragraph "b", \$9,451,858 5 26 <u>\$18,903,715</u> shall be used for substance-related disorder</p>	<p>Allocates \$18,903,715 for substance abuse prevention and treatment.</p>

5 27	prevention and treatment.	DETAIL: This is no change compared to the FY 2014 allocation.
5 28 5 29 5 30 5 31	(a) Of the funds allocated in this subparagraph (1), \$449,650 <u>\$899,300</u> shall be used for the public purpose of a grant program to provide substance-related disorder prevention programming for children.	Allocates \$899,300 for substance abuse prevention programs for children and youth. DETAIL: This is no change compared to the FY 2014 allocation.
5 32 5 33 5 34 5 35 6 1 6 2 6 3 6 4	(i) Of the funds allocated in this subparagraph division (a), \$213,770 <u>\$427,539</u> shall be used for grant funding for organizations that provide programming for children by utilizing mentors. Programs approved for such grants shall be certified or will be certified within six months of receiving the grant award by the Iowa commission on volunteer services as utilizing the standards for effective practice for mentoring programs.	Allocates \$427,539 for children's substance abuse prevention to be used for programs that utilize mentors. DETAIL: This is no change compared to the FY 2014 allocation. Requires the programs receiving funding to be certified, within six months of receiving grants, by the Iowa Commission on Volunteer Services as using effective standards for mentoring programs.
6 5 6 6 6 7 6 8 6 9 6 10 6 11	(ii) Of the funds allocated in this subparagraph division (a), \$213,420 <u>\$426,839</u> shall be used for grant funding for organizations that provide programming that includes youth development and leadership. The programs shall also be recognized as being programs that are scientifically based with evidence of their effectiveness in reducing substance-related disorders in children.	Allocates \$426,839 for children's substance abuse prevention programs that provide services that include youth and character development and leadership. DETAIL: This is no change compared to the FY 2014 allocation. Requires the programs to be recognized as scientifically-based with evidence of effectiveness in reducing substance abuse in children.
6 12 6 13	(iii) The department of public health shall utilize a request for proposals process to implement the grant program.	Requires the Department to issue a Request for Proposals (RFP) to determine grant recipients for the funds allocated for substance abuse prevention programs for children.
6 14 6 15	(iv) All grant recipients shall participate in a program evaluation as a requirement for receiving grant funds.	Requires substance abuse prevention programs for children grant recipients to participate in program evaluations.
6 16 6 17 6 18 6 19	(v) Of the funds allocated in this subparagraph division (a), up to \$22,461 <u>\$44,922</u> may be used to administer substance-related disorder prevention grants and for program evaluations.	Allows up to \$44,922 of the amount allocated for substance abuse prevention programs for children to be used to administer prevention program grants and program evaluations. DETAIL: This is no change compared to the FY 2014 allocation.
6 20 6 21 6 22	(b) Of the funds allocated in this subparagraph (1), \$136,302 <u>\$272,603</u> shall be used for culturally competent substance-related disorder treatment pilot projects.	Allocates \$272,603 for at least three culturally competent substance abuse treatment pilot projects. DETAIL: This is no change compared to the FY 2014 allocation. Requires each pilot project to target a particular ethnic minority population, including and not limited to African American, Asian, and Latino.

<p>6 23 (i) The department shall utilize the amount allocated 6 24 in this subparagraph division (b) for at least three pilot 6 25 projects to provide culturally competent substance-related 6 26 disorder treatment in various areas of the state. Each pilot 6 27 project shall target a particular ethnic minority population. 6 28 The populations targeted shall include but are not limited to 6 29 African American, Asian, and Latino. 6 30 (ii) The pilot project requirements shall provide for 6 31 documentation or other means to ensure access to the cultural 6 32 competence approach used by a pilot project so that such 6 33 approach can be replicated and improved upon in successor 6 34 programs.</p>	<p>Requires culturally competent substance abuse treatment pilot projects to provide for documentation of program approaches so that future program projects can be replicated and improved upon.</p>
<p>6 35 (2) Of the funds allocated in this paragraph "b", up 7 1 to \$1,555,807 <u>\$3,111,614</u> may be used for problem gambling 7 2 prevention, treatment, and recovery services.</p>	<p>Allocates \$3,111,614 for problem gambling treatment, prevention, and recovery services.</p> <p>DETAIL: This is no change compared to the FY 2014 allocation.</p>
<p>7 3 (a) Of the funds allocated in this subparagraph (2), 7 4 \$1,286,884 <u>\$2,573,762</u> shall be used for problem gambling 7 5 prevention and treatment.</p>	<p>Allocates \$2,573,762 for problem gambling prevention and treatment.</p> <p>DETAIL: This is no change compared to the FY 2014 allocation.</p>
<p>7 6 (b) Of the funds allocated in this subparagraph (2), up to 7 7 \$248,926 <u>\$437,852</u> may be used for a 24-hour helpline, public 7 8 information resources, professional training, and program 7 9 evaluation.</p>	<p>Allocates up to \$437,852 for a 24-hour helpline, public information resources, professional training, and program evaluation.</p> <p>DETAIL: This is no change compared to the FY 2014 allocation.</p>
<p>7 10 (c) Of the funds allocated in this subparagraph (2), up 7 11 to \$50,000 <u>\$100,000</u> may be used for the licensing of problem 7 12 gambling treatment programs.</p>	<p>Permits the Department to use up to \$100,000 for licensing of problem gambling treatment programs.</p> <p>DETAIL: This is no change compared to the FY 2014 allocation.</p>
<p>7 13 (3) It is the intent of the general assembly that from the 7 14 moneys allocated in this paragraph "b", persons with a dual 7 15 diagnosis of substance-related disorder and gambling addiction 7 16 shall be given priority in treatment services.</p>	<p>Specifies that it is the intent of the General Assembly for individuals with a diagnosis of both substance abuse and gambling addiction to be given priority in treatment services from the funds appropriated to substance abuse and problem gambling.</p>
<p>7 17 c. Notwithstanding any provision of law to the contrary, 7 18 to standardize the availability, delivery, cost of delivery, 7 19 and accountability of problem gambling and substance-related 7 20 disorder treatment services statewide, the department shall 7 21 continue implementation of a process to create a system 7 22 for delivery of treatment services in accordance with the 7 23 requirements specified in 2008 Iowa Acts, chapter 1187, section</p>	<p>Requires the DPH to implement a process to create a standardized system for delivery of treatment services. Requires the process to include the establishment of joint licensure for gambling and substance abuse treatment programs.</p>

7 24 3, subsection 4. To ensure the system provides a continuum
 7 25 of treatment services that best meets the needs of lowans,
 7 26 the problem gambling and substance-related disorder treatment
 7 27 services in any area may be provided either by a single agency
 7 28 or by separate agencies submitting a joint proposal.

7 29 (1) The system for delivery of substance-related disorder
 7 30 and problem gambling treatment shall include problem gambling
 7 31 prevention.

7 32 (2) The system for delivery of substance-related disorder
 7 33 and problem gambling treatment shall include substance-related
 7 34 disorder prevention by July 1, 2015.

7 35 (3) Of the funds allocated in paragraph "b", the department
 8 1 may use up to ~~\$50,000~~ \$100,000 for administrative costs to
 8 2 continue developing and implementing the process in accordance
 8 3 with this paragraph "c".

8 4 d. The requirement of section 123.53, subsection 5, is met
 8 5 by the appropriations and allocations made in this 2014 Act for
 8 6 purposes of substance-related disorder treatment and addictive
 8 7 disorders for the fiscal year beginning July 1, 2014.

8 8 e. The department of public health shall work with all
 8 9 other departments that fund substance-related disorder
 8 10 prevention and treatment services and all such departments
 8 11 shall, to the extent necessary, collectively meet the state
 8 12 maintenance of effort requirements for expenditures for
 8 13 substance-related disorder services as required under the
 8 14 federal substance-related disorder prevention and treatment
 8 15 block grant.

8 16 2. HEALTHY CHILDREN AND FAMILIES

8 17 For promoting the optimum health status for children,
 8 18 adolescents from birth through 21 years of age, and families,
 8 19 and for not more than the following full-time equivalent
 8 20 positions:

8 21	.....	\$	1,826,780
8 22	.....		<u>3,671,602</u>
8 23	.....	FTEs	14.00

Requires the system of delivery for substance abuse and problem gambling treatment to include problem gambling prevention.

Requires the DPH to expand the system for delivery of substance abuse and problem gambling treatment and prevention to include substance abuse prevention by July 1, 2015.

Permits the DPH to use up to \$100,000 for administrative costs to continue the process of developing the system for delivery of substance abuse and problem gambling treatment and prevention programming.

DETAIL: This is no change compared to the FY 2014 allocation.

Specifies the requirements of [Iowa code section 123.53\(5\)](#) are met by the appropriations made in this Act.

Requires the DPH to work with other State entities that provide funding for substance abuse treatment and prevention services to collectively meet the State Maintenance of Effort (MOE) requirements for the federal Substance Abuse Prevention and Treatment Block Grant.

General Fund appropriation to Healthy Children and Families programs.

DETAIL: This is a net increase of \$18,043 and no change in FTE positions compared to estimated FY 2014. The General Fund changes include:

- An increase of \$43,043 for a donated dental services program for indigent elderly and disabled individuals
- A decrease of \$25,000 to the Audiological Services for Kids Program.

8 24 a. Of the funds appropriated in this subsection, not
 8 25 more than ~~\$367,424~~ \$734,841 shall be used for the healthy
 8 26 opportunities for parents to experience success (HOPES)-healthy
 8 27 families Iowa (HFI) program established pursuant to section
 8 28 135.106. The funding shall be distributed to renew the grants
 8 29 that were provided to the grantees that operated the program
 8 30 during the fiscal year ending June 30, 2014.

Limits the General Fund amount used to fund the Healthy Opportunities to Experience Success - Healthy Families Iowa (HOPES-HFI) program to \$734,841.

DETAIL: This is no change compared to the FY 2014 allocation. Requires funds to be distributed to the grantees that received funding in FY 2014.

8 31 b. In order to implement the legislative intent stated in
 8 32 sections 135.106 and 256I.9, that priority for home visitation
 8 33 program funding be given to programs using evidence-based or
 8 34 promising models for home visitation, it is the intent of the
 8 35 general assembly to phase in the funding priority in accordance
 9 1 with 2012 Iowa Acts, chapter 1133, section 2, subsection 2,
 9 2 paragraph 0b.

Implements legislative intent for [Iowa code section 135.106](#), HOPES-HFI, and [Iowa code section 256I.9](#), Early Childhood Iowa. Priority for Home Visitation Program funding is to be given to programs using evidence-based or promising models for home visitation.

9 3 c. Of the funds appropriated in this subsection, ~~\$663,944~~
 9 4 \$1,327,887 shall be used to continue the department's
 9 5 initiative to provide for adequate developmental surveillance
 9 6 and screening during a child's first five years statewide. The
 9 7 funds shall be used first to fully fund the current sites to
 9 8 ensure that the sites are fully operational, with the remaining
 9 9 funds to be used for expansion to additional sites. The full
 9 10 implementation and expansion shall include enhancing the scope
 9 11 of the program through collaboration with the child health
 9 12 specialty clinics to promote healthy child development through
 9 13 early identification and response to both biomedical and social
 9 14 determinants of healthy development; by developing child
 9 15 health metrics to inform practice, document long-term health
 9 16 impacts and savings, and provide for continuous improvement
 9 17 through training, education, and evaluation; and by providing
 9 18 for practitioner consultation particularly for children with
 9 19 behavioral conditions and needs. The department of public
 9 20 health shall also collaborate with the Iowa Medicaid enterprise
 9 21 and the child health specialty clinics to integrate the
 9 22 activities of the first five initiative into the establishment
 9 23 of patient-centered medical homes, community utilities,
 9 24 accountable care organizations, and other integrated care
 9 25 models developed to improve health quality and population
 9 26 health while reducing health care costs. To the maximum extent
 9 27 possible, funding allocated in this paragraph shall be utilized
 9 28 as matching funds for medical assistance program reimbursement.

Allocates \$1,327,887 for the Iowa First Five Healthy Mental Development Initiative Programs.

DETAIL: This is no change compared to the FY 2014 allocation. The DPH, the Department of Human Services (DHS), and the Iowa Medicaid Enterprise (IME) are directed to develop a plan to secure matching Medicaid funding.

9 29 d. Of the funds appropriated in this subsection, ~~\$15,799~~
 9 30 \$74,640 shall be distributed to a statewide dental carrier to
 9 31 provide funds to continue the donated dental services program
 9 32 patterned after the projects developed by the lifeline network

Allocates \$74,640 for a Donated Dental Services Program for Indigent Elderly and Disabled individuals.

DETAIL: This is an increase of \$43,043 compared to FY 2014.

9 33 to provide dental services to indigent elderly and disabled
 9 34 individuals.

9 35 e. Of the funds appropriated in this subsection, ~~\$55,998~~
 10 1 \$111,995 shall be used for childhood obesity prevention.

Allocates \$111,995 for childhood obesity programs.

DETAIL: This is no change compared to the FY 2014 allocation.

10 2 f. Of the funds appropriated in this subsection, ~~\$81,384~~
 10 3 \$137,768 shall be used to provide audiological services and
 10 4 hearing aids for children. The department may enter into a
 10 5 contract to administer this paragraph.

Allocates \$137,768 for the Audiological Services for Kids Program to provide audiological services and hearing aids to children.

DETAIL: This is a decrease of \$25,000 compared to FY 2014.

10 6 g. Of the funds appropriated in this subsection, ~~\$12,500~~
 10 7 \$25,000 is transferred to the university of iowa college of
 10 8 dentistry for provision of primary dental services to children.
 10 9 State funds shall be matched on a dollar-for-dollar basis.
 10 10 The university of iowa college of dentistry shall coordinate
 10 11 efforts with the department of public health, bureau of
 10 12 oral and health delivery systems, to provide dental care to
 10 13 underserved populations throughout the state.

Transfers \$25,000 to the University of Iowa College of Dentistry to provide primary dental services to children. Requires a one-to-one dollar match by the University. The College is directed to coordinate efforts with the Department's Bureau of Oral Health to provide dental care to underserved populations throughout Iowa.

DETAIL: This is no change compared to the FY 2014 allocation.

10 14 h. Of the funds appropriated in this subsection, ~~\$25,000~~
 10 15 \$50,000 shall be used to address youth suicide prevention.

Allocates \$50,000 for a youth suicide prevention program.

DETAIL: This is no change compared to the FY 2014 allocation.

10 16 i. The university of iowa college of dentistry shall
 10 17 develop and submit a proposal by December 15, 2014, to the
 10 18 individuals identified in this Act for submission of reports
 10 19 and to the chairpersons and ranking members of the joint
 10 20 appropriations subcommittee on education to offer a residency
 10 21 program in geriatric dentistry that prepares dentists with
 10 22 the specific skills needed to treat geriatric patients and
 10 23 provides incentives for the participants to remain in the
 10 24 state to practice dentistry upon completion of the program.
 10 25 The proposal shall include at a minimum, the curriculum to
 10 26 be utilized, the number of residency positions to be made
 10 27 available, the incentives for participants to practice
 10 28 dentistry in the state upon completion of the residency, the
 10 29 projected cost of the program, and any potential funding
 10 30 sources.

Directs the University of Iowa College of Dentistry to create a proposal for a Geriatric Dentistry Residency Program that will include curriculum, number of residences, cost, funding sources, and incentives for the participants to stay and practice in the State upon completion of the Program.

10 31 3. CHRONIC CONDITIONS

10 32 For serving individuals identified as having chronic
 10 33 conditions or special health care needs, and for not more than
 10 34 the following full-time equivalent positions:
 10 35 \$ 2,540,346

General Fund appropriation to Chronic Conditions programs.

DETAIL: This is a decrease of \$40,000 and no change in FTE positions compared to estimated FY 2014 for the Medical Home Advisory Council.

11 1 5,040,692
 11 2 FTEs 6.00

11 3 a. Of the funds appropriated in this subsection, ~~\$79,966~~
 11 4 \$159,932 shall be used for grants to individual patients
 11 5 who have phenylketonuria (PKU) to assist with the costs of
 11 6 necessary special foods.

Allocates \$159,932 for grants to individual patients with Phenylketonuria (PKU) to assist with necessary costs for special foods.

DETAIL: This is no change compared to the FY 2014 allocation. Click [here](#) to learn more about the allocation.

11 7 b. Of the funds appropriated in this subsection, ~~\$445,822~~
 11 8 \$891,644 shall be used for the brain injury services program
 11 9 pursuant to section 135.22B, including for continuation of the
 11 10 contracts for resource facilitator services in accordance with
 11 11 section 135.22B, subsection 9, and to enhance brain injury
 11 12 training and recruitment of service providers on a statewide
 11 13 basis. Of the amount allocated in this paragraph, ~~\$47,500~~
 11 14 \$95,000 shall be used to fund one full-time equivalent position
 11 15 to serve as the state brain injury ~~service~~ services program
 11 16 manager.

Allocates \$891,644 for continuation of the two contracts in the Department's Brain Injury Services Program for facilitator services, training services, and provider recruitment. Of the amount, \$95,000 is allocated to fund a State Brain Injury Service program manager FTE position.

DETAIL: This is no change compared to the FY 2014 allocation.

11 17 c. Of the funds appropriated in this subsection, ~~\$273,994~~
 11 18 \$547,982 shall be used as additional funding to leverage
 11 19 federal funding through the federal Ryan White Care Act, Tit.
 11 20 II, AIDS drug assistance program supplemental drug treatment
 11 21 grants.

Allocates \$547,982 to the AIDS Drug Assistance Program (ADAP).

DETAIL: This is no change compared to the FY 2014 allocation. Click [here](#) for more information about the Program.

11 22 d. Of the funds appropriated in this subsection, ~~\$49,942~~
 11 23 \$99,823 shall be used for the public purpose of continuing to
 11 24 contract with an existing national-affiliated organization
 11 25 to provide education, client-centered programs, and client
 11 26 and family support for people living with epilepsy and their
 11 27 families.

Allocates \$99,823 for epilepsy education and support.

DETAIL: This is no change compared to the FY 2014 allocation.

11 28 e. Of the funds appropriated in this subsection, ~~\$392,557~~
 11 29 \$785,114 shall be used for child health specialty clinics.

Allocates \$785,114 for Child Health Specialty Clinics.

DETAIL: This is no change compared to the FY 2014 allocation.

11 30 f. Of the funds appropriated in this subsection,
 11 31 ~~\$200,000~~ \$400,000 shall be used by the regional autism
 11 32 assistance program established pursuant to section 256.35,
 11 33 and administered by the child health specialty clinic located
 11 34 at the university of Iowa hospitals and clinics. The funds
 11 35 shall be used to enhance interagency collaboration and
 12 1 coordination of educational, medical, and other human services
 12 2 for persons with autism, their families, and providers of
 12 3 services, including delivering regionalized services of care
 12 4 coordination, family navigation, and integration of services

Allocates \$400,000 to be used to by the Regional Autism Service Program (RASP) to create autism support programs administered by the child health speciality clinic located at the UIHC.

DETAIL: This is no change compared to the FY 2014 allocation. The University is prohibited from receiving any funds for indirect costs associated with the allocation.

12 5 through the statewide system of regional child health specialty
 12 6 clinics and fulfilling other requirements as specified in
 12 7 chapter 225D, ~~creating the autism support program, as enacted~~
 12 8 ~~in this Act.~~ The university of Iowa shall not receive funds
 12 9 allocated under this paragraph for indirect costs associated
 12 10 with the regional autism assistance program.

12 11 g. Of the funds appropriated in this subsection, ~~\$285,497~~
 12 12 ~~\$570,993~~ shall be used for the comprehensive cancer control
 12 13 program to reduce the burden of cancer in Iowa through
 12 14 prevention, early detection, effective treatment, and ensuring
 12 15 quality of life. Of the funds allocated in this lettered
 12 16 paragraph, ~~\$75,000~~ \$150,000 shall be used to support a melanoma
 12 17 research symposium, a melanoma biorepository and registry,
 12 18 basic and translational melanoma research, and clinical trials.

Allocates \$570,993 for the Iowa Comprehensive Cancer Control (ICCC) Program. Of the total amount, \$150,000 is required to be used to support various efforts in studying, tracking, and researching melanoma.

DETAIL: This is no change compared to the FY 2014 allocation.

12 19 h. Of the funds appropriated in this subsection, ~~\$63,225~~
 12 20 \$126,450 shall be used for cervical and colon cancer screening,
 12 21 and ~~\$250,000~~ \$500,000 shall be used to enhance the capacity
 12 22 of the cervical cancer screening program to include provision
 12 23 of recommended prevention and early detection measures to a
 12 24 broader range of low-income women.

Allocates \$126,450 for cervical and colon cancer screening and \$500,000 for cervical cancer screening for a total of \$626,450.

DETAIL: This is no change compared to the FY 2014 allocation.

12 25 i. Of the funds appropriated in this subsection, ~~\$263,348~~
 12 26 \$526,695 shall be used for the center for congenital and
 12 27 inherited disorders.

Allocates \$526,695 for the Center for Congenital and Inherited Disorders central registry.

DETAIL: This is no change compared to the FY 2014 allocation.

12 28 j. Of the funds appropriated in this subsection, ~~\$64,706~~
 12 29 \$129,411 shall be used for the prescription drug donation
 12 30 repository program created in chapter 135M.

Allocates \$129,411 for the Prescription Drug Donation Repository program.

DETAIL: This is no change compared to the FY 2014 allocation.

12 31 k. Of the funds appropriated in this subsection, ~~\$107,632~~
 12 32 \$175,263 shall be used for the costs of the medical home system
 12 33 advisory council established pursuant to section 135.159
 12 34 including incorporation of the development and implementation
 12 35 of the prevention and chronic care management state initiative.

Allocates \$175,263 for the Medical Home System Advisory Council for the development and implementation of a prevention and chronic care management state initiative.

DETAIL: This is a decrease of \$40,000 compared to the FY 2014 allocation.

13 1 4. COMMUNITY CAPACITY

13 2 For strengthening the health care delivery system at the
 13 3 local level, and for not more than the following full-time
 13 4 equivalent positions:

13 5	\$ 4,281,309
13 6	<u>9,284,436</u>

General Fund appropriation to Community Capacity programs.

DETAIL: This is a net increase of \$721,819 and no change in FTE positions compared to estimated FY 2014. The General Fund changes include:

- An increase of \$293 for the FIND Dental Education Loan

13 7 FTEs 18.25

- Repayment Program.
- A decrease of \$378,474 to eliminate free clinics to assist patients in finding an appropriate medical home.
- An increase of \$1,000,000 for the Medical Residency Training Program.
- An increase of \$100,000 for the implementation of an integrated psychiatric primary care model at the University of Iowa.

13 8 a. Of the funds appropriated in this subsection, ~~\$49,707~~
 13 9 \$99,414 is allocated for continuation of the child vision
 13 10 screening program implemented through the university of Iowa
 13 11 hospitals and clinics in collaboration with early childhood
 13 12 Iowa areas. The program shall submit a report to the
 13 13 individuals identified in this Act for submission of reports
 13 14 regarding the use of funds allocated under this paragraph
 13 15 "a". The report shall include the objectives and results for
 13 16 the program year including the target population and how the
 13 17 funds allocated assisted the program in meeting the objectives;
 13 18 the number, age, and location within the state of individuals
 13 19 served; the type of services provided to the individuals
 13 20 served; the distribution of funds based on service provided;
 13 21 and the continuing needs of the program.

Allocates \$99,414 for the Iowa KidSight Child Vision screening program through the University of Iowa Hospitals and Clinics (UIHC) in collaboration with the Lions Club and Early Childhood Iowa areas.

DETAIL: This is no change compared to the FY 2014 allocation. Requires the Program to submit a report outlining program objectives, target population and locations, services provided, and other details.

13 22 b. Of the funds appropriated in this subsection, ~~\$55,328~~
 13 23 \$110,656 is allocated for continuation of an initiative
 13 24 implemented at the university of Iowa and ~~\$49,952~~ \$99,904
 13 25 is allocated for continuation of an initiative at the state
 13 26 mental health institute at Cherokee to expand and improve the
 13 27 workforce engaged in mental health treatment and services.
 13 28 The initiatives shall receive input from the university of
 13 29 Iowa, the department of human services, the department of
 13 30 public health, and the mental health and disability services
 13 31 commission to address the focus of the initiatives.

Allocates \$110,656 for a University of Iowa initiative to expand and improve the mental health treatment and services workforce. Allocates \$99,904 for a similar initiative at the Mental Health Institute (MHI) at Cherokee.

DETAIL: This is no change compared to the FY 2014 allocation.

13 32 c. Of the funds appropriated in this subsection, ~~\$582,314~~
 13 33 \$1,164,628 shall be used for essential public health services
 13 34 that promote healthy aging throughout the lifespan, contracted
 13 35 through a formula for local boards of health, to enhance health
 14 1 promotion and disease prevention services.

Requires the DPH to use \$1,164,628 for core public health functions, including home health care and public health nursing services.

DETAIL: This is no change compared to the FY 2014 allocation.

14 2 d. Of the funds appropriated in this section, ~~\$49,643~~
 14 3 \$99,286 shall be deposited in the governmental public health
 14 4 system fund created in section 135A.8 to be used for the
 14 5 purposes of the fund.

Allocates \$99,286 to the Governmental Public Health System Fund for activities related to the DPH modernization initiative.

DETAIL: This is no change compared to the FY 2014 allocation.

14 6 e. Of the funds appropriated in this subsection, ~~\$52,724~~

Allocates \$105,448 for the Mental Health Professional Shortage Area

14 7 \$105,448 shall be used to continue to address the shortage of
 14 8 mental health professionals in the state.

Program.

DETAIL: This is no change compared to the FY 2014 allocation.

14 9 f. Of the funds appropriated in this subsection, ~~\$25,000~~
 14 10 \$50,000 shall be used for a grant to a statewide association
 14 11 of psychologists that is affiliated with the American
 14 12 psychological association to be used for continuation of a
 14 13 program to rotate intern psychologists in placements in urban
 14 14 and rural mental health professional shortage areas, as defined
 14 15 in section 135.180.

Allocates \$50,000 for the Psychology Postdoctoral Internship Rotation Program for intern psychologists in urban and rural mental health professional shortage areas.

DETAIL: This is no change compared to the FY 2014 allocation. Click [here](#) for more information about the Program.

14 16 g. Of the funds appropriated in this subsection, the
 14 17 following amounts shall be allocated to the Iowa collaborative
 14 18 safety net provider network established pursuant to section
 14 19 135.153 to be used for the purposes designated. The following
 14 20 amounts allocated under this lettered paragraph shall be
 14 21 distributed to the specified provider and shall not be reduced
 14 22 for administrative or other costs prior to distribution:

Provides allocations totaling \$1,346,345 to the Iowa Collaborative Safety Net Provider Network. Specifies that administrative costs related to the distribution of funding to the Safety Net Provider Network may not be taken out of the allocated funding.

14 23 (1) For distribution to the Iowa primary care association
 14 24 for statewide coordination of the Iowa collaborative safety net
 14 25 provider network:

Allocates \$145,785 to the Iowa Primary Care Association for coordination of the Iowa Collaborative Safety Net Provider Network.

DETAIL: This is no change compared to the FY 2014 allocation.

14 26\$ 72,893
 14 27 145,785

14 28 (2) For distribution to the Iowa primary care association
 14 29 to be used to continue a training program for sexual assault
 14 30 response team (SART) members, including representatives of
 14 31 law enforcement, victim advocates, prosecutors, and certified
 14 32 medical personnel:

Allocates \$50,000 to continue a grant Program in collaboration with Sexual Assault Response Team (SART) members to expand the response room model throughout Iowa.

DETAIL: This is no change compared to the FY 2014 allocation.

14 33\$ 25,000
 14 34 50,000

14 35 (3) For distribution to federally qualified health centers
 15 1 for necessary infrastructure, statewide coordination, provider
 15 2 recruitment, service delivery, and provision of assistance to
 15 3 patients in securing a medical home inclusive of oral health
 15 4 care:

Allocates \$75,000 for distribution to Federally Qualified Health Centers (FQHCs) for infrastructure, coordination, provider recruitment, service delivery, and assistance to patients in determining an appropriate medical home.

DETAIL: This is no change compared to the FY 2014 allocation.

15 5\$ 37,500
 15 6 75,000

15 7 (4) For distribution to the local boards of health that
 15 8 provide direct services for pilot programs in three counties to
 15 9 assist patients in securing a medical home inclusive of oral
 15 10 health care:

Allocates \$77,153 for local board of health pilot programs in three counties to assist patients in finding an appropriate medical home inclusive of dental care.

DETAIL: This is no change compared to the FY 2014 allocation.

15 11\$ 38,577
 15 12 77,153

15 13 (5) For distribution to maternal and child health centers
 15 14 for pilot programs in three service areas to assist patients in
 15 15 securing a medical home inclusive of oral health care:
 15 16\$ 47,563
 15 1795,126

Allocates \$95,126 for three child and maternal health center pilot programs to assist patients in finding an appropriate medical home inclusive of dental care.

DETAIL: This is no change compared to the FY 2014 allocation.

15 18 (6) For distribution to free clinics for necessary
 15 19 infrastructure, statewide coordination, provider recruitment,
 15 20 service delivery, and provision of assistance to patients in
 15 21 securing a medical home inclusive of oral health care:
 15 22\$ 174,161
 15 23348,322

Allocates \$348,322 for free clinics to assist patients with finding an appropriate medical home.

DETAIL: This is no change compared to the FY 2014 allocation.

15 24 (7) For distribution to rural health clinics for necessary
 15 25 infrastructure, statewide coordination, provider recruitment,
 15 26 service delivery, and provision of assistance to patients in
 15 27 securing a medical home inclusive of oral health care:
 15 28\$ 70,772
 15 29141,544

Allocates \$141,544 for rural health clinics to assist patients in finding an appropriate medical home.

DETAIL: This is no change compared to the FY 2014 allocation.

15 30 ~~(8) For continuation of the safety net provider patient~~
 15 31 ~~access to a specialty health care initiative as described in~~
 15 32 ~~2007 Iowa Acts, chapter 218, section 109:~~
 15 33\$ 489,237

Strikes the allocation of \$378,474 to eliminate the safety net provider patient access to specialty care initiative.

DETAIL: This is a decrease of \$378,474 compared to the FY 2014 allocation to eliminate the initiative.

15 34 (9) For continuation of the pharmaceutical infrastructure
 15 35 for safety net providers as described in 2007 Iowa Acts,
 16 1 chapter 218, section 108:
 16 2\$ 206,708
 16 3413,415

Allocates \$413,415 for the pharmaceutical infrastructure for safety net providers.

DETAIL: This is no change compared to the FY 2014 allocation.

16 4 The Iowa collaborative safety net provider network may
 16 5 continue to distribute funds allocated pursuant to this
 16 6 lettered paragraph through existing contracts or renewal of
 16 7 existing contracts.
 16 8 ~~The Iowa collaborative safety net provider network may~~
 16 9 ~~continue to distribute funds allocated pursuant to this~~
 16 10 ~~lettered paragraph through existing contracts or renewal of~~
 16 11 ~~existing contracts.~~

Permits the Iowa Collaborative Safety Net Provider Network to distribute funds through existing contracts.

16 12 h. Of the funds appropriated in this subsection, ~~\$87,950~~
 16 13 ~~\$175,900~~ shall be used for continuation of the work of the
 16 14 direct care worker advisory council established pursuant to
 16 15 2008 Iowa Acts, chapter 1188, section 69, in implementing the
 16 16 recommendations in the final report submitted by the advisory

Allocates \$175,900 and directs the Direct Care Worker Advisory Council to finalize core and advanced statewide curriculum, conduct education and outreach, establish a way to track and evaluate training and retention, and conduct a study of reimbursement rates.

16 17	council to the governor and the general assembly in March 2012.	DETAIL: This is no change compared to the FY 2014 allocation.
16 18 16 19 16 20 16 21 16 22 16 23 16 24 16 25 16 26	i. (1) Of the funds appropriated in this subsection, \$89,438 <u>\$178,875</u> shall be used for allocation to an independent statewide direct care worker organization under continuation of the contract in effect during the fiscal year ending June 30, 2013 <u>2014</u> , with terms determined by the director of public health relating to education, outreach, leadership development, mentoring, and other initiatives intended to enhance the recruitment and retention of direct care workers in health care and long-term care settings.	Allocates \$178,875 and directs a mission change under the supervision of the Department of Public Health (DPH) to create education, outreach, leadership development, mentoring, and other initiatives to enhance recruitment and retention of direct care workers in long-term care settings. DETAIL: This is no change compared to the FY 2014 allocation.
16 27 16 28 16 29 16 30	(2) Of the funds appropriated in this subsection, \$37,500 <u>\$75,000</u> shall be used to provide scholarships or other forms of subsidization for direct care worker educational conferences, training, or outreach activities.	Allocates \$75,000 for scholarships for direct care worker educational conferences, training, or outreach activities. DETAIL: This is no change compared to the FY 2014 allocation.
16 31 16 32 16 33 16 34	j. Of the funds appropriated in this subsection, the department may use up to \$29,088 <u>\$58,175</u> for up to one full-time equivalent position to administer the volunteer health care provider program pursuant to section 135.24.	Permits the Department to utilize up to \$58,175 and 1.00 FTE position for administration of the Voluntary Health Care Provider Program. DETAIL: This is no change compared to the FY 2014 allocation.
16 35 17 1 17 2 17 3 17 4	k. Of the funds appropriated in this subsection, \$24,854 <u>\$50,000</u> shall be used for a matching dental education loan repayment program to be allocated to a dental nonprofit health service corporation to develop the criteria and implement the loan repayment program.	Allocates \$50,000 for the FIND Dental Education Loan Repayment Program. DETAIL: This is an increase of \$293 compared to the FY 2014 allocation. Click here for more information on the Program.
17 5 17 6 17 7 17 8	l. Of the funds appropriated in this subsection, \$52,912 <u>\$105,823</u> is transferred to the college student aid commission for deposit in the rural Iowa primary care trust fund created in section 261.113 to be used for the purposes of the fund.	Transfers \$105,823 to the College Student Aid Commission for deposit in the Rural Iowa Primary Care Loan Repayment Program and Trust Fund Act (PRIMECARRE Trust Fund) to implement a Program to repay education loans of primary health care clinical services located in rural, federally-designated health professional shortage areas. DETAIL: This is no change compared to the FY 2014 allocation.
17 9 17 10 17 11	m. Of the funds appropriated in this subsection, \$75,000 <u>\$150,000</u> shall be used for the purposes of the Iowa donor registry as specified in section 142C.18.	Allocates \$150,000 to the Iowa Donor Registry. DETAIL: This is no change compared to the FY 2014 allocation.
17 12 17 13 17 14 17 15 17 16	n. Of the funds appropriated in this subsection, \$50,000 <u>\$100,000</u> shall be used for continuation of a grant to a nationally affiliated volunteer eye organization that has an established program for children and adults and that is solely dedicated to preserving sight and preventing blindness through	Allocates \$100,000 to Prevent Blindness Iowa for a vision screening and training program. DETAIL: This is no change compared to the FY 2014 allocation. Requires the Program to submit a report outlining program objectives,

17 17 education, nationally certified vision screening and training,
 17 18 and community and patient service programs. The organization
 17 19 shall submit a report to the individuals identified in this
 17 20 Act for submission of reports regarding the use of funds
 17 21 allocated under this paragraph "n". The report shall include
 17 22 the objectives and results for the program year including
 17 23 the target population and how the funds allocated assisted
 17 24 the program in meeting the objectives; the number, age, and
 17 25 location within the state of individuals served; the type of
 17 26 services provided to the individuals served; the distribution
 17 27 of funds based on services provided; and the continuing needs
 17 28 of the program.

target population and locations, services provided, and other details.

17 29 o. Of the funds appropriated in this subsection, ~~\$12,500~~
 17 30 \$25,000 shall be used for the ~~establishment~~ continuation of a
 17 31 wellness council under the direction of the director of public
 17 32 health to increase support for wellness activities in the
 17 33 state.

Allocates \$25,000 for a Wellness Council to increase support for wellness activities.

DETAIL: This is no change compared to the FY 2014 allocation. Click [here](#) for more information on the Council.

17 34 p. Of the funds appropriated in this section, ~~\$579,075~~
 17 35 \$1,158,150 is allocated to the Iowa collaborative safety net
 18 1 provider network established pursuant to section 135.153 to
 18 2 be used for the continued development and implementation of a
 18 3 statewide regionally based network to provide an integrated
 18 4 approach to health care delivery through care coordination
 18 5 that supports primary care providers and links patients with
 18 6 community resources necessary to empower patients in addressing
 18 7 biomedical and social determinants of health to improve health
 18 8 outcomes. The Iowa collaborative safety net provider network
 18 9 shall work in conjunction with the department of human services
 18 10 to align the integrated network with the health care delivery
 18 11 system model developed under the state innovation models
 18 12 initiative grant. The Iowa collaborative safety net provider
 18 13 network shall submit a progress report to the individuals
 18 14 designated in this Act for submission of reports by December
 18 15 31, 2014, including progress in developing and implementing the
 18 16 network, how the funds were distributed and used in developing
 18 17 and implementing the network, and the remaining needs in
 18 18 developing and implementing the network.

Allocates \$1,158,150 to the Iowa Collaborative Safety Net Provider Network to develop and implement a Statewide regionally-based network to provide integrated health care delivery for patients addressing biomedical and social determinants of health. The Collaborative is required to work with DHS and report the progress on December 31, 2014.

DETAIL: This is no change compared to the FY 2014 allocation.

18 19 q. Of the funds appropriated in this subsection, ~~\$1,000,000~~
 18 20 \$3,000,000 shall be deposited in the medical residency training
 18 21 account created in section 135.175, subsection 5, paragraph
 18 22 "a", and is appropriated from the account to the department
 18 23 of public health to be used for the purposes of the medical
 18 24 residency training state matching grants program as specified
 18 25 in section 135.176. However, notwithstanding any provision

Allocates \$3,000,000 for a Medical Residency Training Program. Specifies that grants for new medical residency positions, psychiatric residency positions, and family practice positions have priority within the Program.

DETAIL: This is an increase of \$1,000,000 compared to the FY 2014 allocation.

18 26 to the contrary in section 135.176, priority in the awarding
 18 27 of grants shall be given to the development of new medical
 18 28 residency positions, psychiatric residency positions, and
 18 29 family practice residency positions.

Allocates \$50,000 for a Program entitled "Reach Out and Read" that supports partnerships between medical providers and parents through community health centers to promote reading and encourage literacy skills for children entering school.

DETAIL: This is no change compared to the FY 2014 allocation. Click [here](#) for more information about the Program.

18 30 r. Of the funds appropriated in this section, ~~\$25,000~~
 18 31 ~~\$50,000~~ shall be distributed to a statewide nonprofit
 18 32 organization to be used for the public purpose of supporting
 18 33 a partnership between medical providers and parents through
 18 34 community health centers to promote reading and encourage
 18 35 literacy skills so children enter school prepared for success
 19 1 in reading.

19 2 s. The department shall adopt rules pursuant to chapter 17A
 19 3 to include physical therapists as primary care professionals
 19 4 and to include physical therapy as a primary health service for
 19 5 the purposes of the PRIMECARRE endeavor under section 135.107.

Directs the Department of Public Health to include physical therapists as approved professionals eligible for the Primary Care Recruitment and Retention Endeavor (PRIMECARRE) Program.

19 6 t. Of the funds appropriated in this subsection, \$100,000
 19 7 shall be transferred to the university of iowa hospitals
 19 8 and clinics to implement a collaborative care model between
 19 9 psychiatry and primary care practices that will improve mental
 19 10 health care in iowa. The university of iowa hospitals and
 19 11 clinics shall submit a report by December 15, 2014, to the
 19 12 individuals identified in this Act for submission of reports on
 19 13 the progress of implementation of the collaborative model.

Allocates \$100,000 for the implementation of a Psychiatric Practice Model in the Primary Care Physician Residency Program at the University of Iowa.

DETAIL: This is a new allocation for FY 2015.

19 14 5. HEALTHY AGING
 19 15 To provide public health services that reduce risks and
 19 16 invest in promoting and protecting good health over the
 19 17 course of a lifetime with a priority given to older lowans and
 19 18 vulnerable populations:

General Fund appropriation to Healthy Aging programs.

DETAIL: This is no change compared to the FY 2014 allocation.

19 19 \$ 3,648,571
 19 20 7,297,142

19 21 6. ENVIRONMENTAL HAZARDS
 19 22 For reducing the public's exposure to hazards in the
 19 23 environment, primarily chemical hazards, and for not more than
 19 24 the following full-time equivalent positions:

General Fund appropriation to Environmental Hazard programs.

DETAIL: This is no change compared to estimated FY 2014.

19 25 \$ 401,935
 19 26 803,870
 19 27 FTEs 4.00

19 28 Of the funds appropriated in this subsection, ~~\$268,875~~
 19 29 ~~\$537,750~~ shall be used for childhood lead poisoning provisions.

19 30 7. INFECTIOUS DISEASES
 19 31 For reducing the incidence and prevalence of communicable
 19 32 diseases, and for not more than the following full-time

General Fund appropriation to Infectious Disease programs.

DETAIL: This is no change compared to estimated FY 2014.

19 33	equivalent positions:		
19 34	.....	\$	667,578
19 35	.....		<u>1,335,155</u>
20 1	..... FTEs		4.00

20 2	8. PUBLIC PROTECTION		
20 3	For protecting the health and safety of the public through		
20 4	establishing standards and enforcing regulations, and for not		
20 5	more than the following full-time equivalent positions:		
20 6	.....	\$	1,639,386
20 7	.....		<u>3,420,027</u>
20 8	..... FTEs		131.00

General Fund appropriation to Public Protection programs.

DETAIL: This is an net increase of \$141,256 and a decrease of 0.20 FTE position compared to estimated FY 2014. The General Fund changes include:

- A decrease of \$28,644 due to the Governor's [Senate File 446](#) veto of the Emergency Medical Services (EMS) task force allocation.
- A decrease of \$28,000 due to one-time funding in FY 2014 for transitioning the licensing of orthotists, prosthetists, and pedorthists, to a fee-supported model.
- An increase of \$65,000 for EMS software maintenance.
- An increase of \$75,000 for an EMS benchmarks, indicators, and scoring (BIS) trauma assessment.
- An increase of \$50,000 for community water fluoride education.
- An increase of \$7,900 due to the passage of [House File 2378](#): Psychologist Licensing Requirements.

20 9 a. Of the funds appropriated in this subsection, not more
 20 10 than ~~\$227,350~~ \$454,700 shall be credited to the emergency
 20 11 medical services fund created in section 135.25. Moneys in
 20 12 the emergency medical services fund are appropriated to the
 20 13 department to be used for the purposes of the fund.

Allocates up to \$454,700 for the Emergency Medical Services (EMS) Fund.

DETAIL: This is no change compared to the FY 2014 allocation.

20 14 b. Of the funds appropriated in this subsection, ~~\$101,516~~
 20 15 \$203,032 shall be used for sexual violence prevention
 20 16 programming through a statewide organization representing
 20 17 programs serving victims of sexual violence through the
 20 18 department's sexual violence prevention program. The amount
 20 19 allocated in this lettered paragraph shall not be used to
 20 20 supplant funding administered for other sexual violence
 20 21 prevention or victims assistance programs.

Allocates \$203,032 to provide program funding for sexual violence prevention.

DETAIL: This is no change compared to the FY 2014 allocation.

20 22 c. Of the funds appropriated in this subsection, ~~\$299,376~~
 20 23 \$598,751 shall be used for the state poison control center.
 20 24 At such time as the department of human services receives
 20 25 approval from the centers for Medicare and Medicaid services
 20 26 of the United States department of health and human services
 20 27 to implement a new health services initiative under the
 20 28 federal Children's Health Insurance Program Reauthorization
 20 29 Act of 2009, Pub.L. No.111-3, to provide funding for the

Allocates up to \$598,751 for the State Poison Control Center.

DETAIL: This is no change compared to the FY 2014 allocation. Instructs the DHS to implement a new health services initiative under the Children's Health Insurance Program (CHIP) to provide funding for the Center. Allows the Center to transfer as much funding as needed for the purpose of receiving matching federal funds. Click [here](#) for more information about the Center.

20 30 state poison control center as directed in this 2014 Act,
 20 31 and notifies the department of public health, the department
 20 32 of public health shall transfer from the allocation made in
 20 33 this paragraph "c", an amount sufficient to provide the state
 20 34 matching funds necessary to draw down the maximum federal
 20 35 matching funds available for that purpose.

21 1 d. Of the funds appropriated in this subsection, \$50,000
 21 2 shall be used for community fluoridation education.

Allocates \$50,000 for community fluoridation education.

DETAIL: This is a new allocation for FY 2015.

21 3 9. RESOURCE MANAGEMENT

General Fund appropriation for Resource Management activities.

21 4 For establishing and sustaining the overall ability of the
 21 5 department to deliver services to the public, and for not more
 21 6 than the following full-time equivalent positions:

DETAIL: This is no change compared to estimated FY 2014.

21 7	.....	\$	402,027
21 8			<u>855,072</u>
21 9	.....	FTEs	5.00

21 10 The university of Iowa hospitals and clinics under the
 21 11 control of the state board of regents shall not receive
 21 12 indirect costs from the funds appropriated in this section.
 21 13 The university of Iowa hospitals and clinics billings to the
 21 14 department shall be on at least a quarterly basis.

Prohibits the UIHC from receiving indirect cost reimbursement from General Fund appropriations to the Department. Requires the UIHC to submit billings to the DPH on a quarterly basis each year.

21 15 DIVISION IV
 21 16 VETERANS

21 17 Sec. 4. 2013 Iowa Acts, chapter 138, section 134, is amended
 21 18 to read as follows:

21 19 SEC. 134. DEPARTMENT OF VETERANS AFFAIRS. There is
 21 20 appropriated from the general fund of the state to the
 21 21 department of veterans affairs for the fiscal year beginning
 21 22 July 1, 2014, and ending June 30, 2015, the following amounts,
 21 23 or so much thereof as is necessary, to be used for the purposes
 21 24 designated:

21 25 1. DEPARTMENT OF VETERANS AFFAIRS ADMINISTRATION

General Fund appropriation to the Department of Veteran Affairs.

21 26 For salaries, support, maintenance, and miscellaneous
 21 27 purposes, and for not more than the following full-time
 21 28 equivalent positions:

DETAIL: This is no change compared to estimated FY 2014.

21 29	.....	\$	546,754
21 30			<u>1,095,951</u>
21 31	.....	FTEs	13.00

21 32 2. IOWA VETERANS HOME

General Fund appropriation to the Iowa Veterans Home (IVH).

21 33 For salaries, support, maintenance, and miscellaneous

21 34 purposes:
 21 35\$ 3,762,857
 22 1 7,594,996

DETAIL: This is no change compared to estimated FY 2014.

22 2 a. The Iowa veterans home billings involving the department
 22 3 of human services shall be submitted to the department on at
 22 4 least a monthly basis.

Requires the IVH to submit monthly claims relating to Medicaid to the DHS.

22 5 b. If there is a change in the employer of employees
 22 6 providing services at the Iowa veterans home under a collective
 22 7 bargaining agreement, such employees and the agreement shall
 22 8 be continued by the successor employer as though there had not
 22 9 been a change in employer.

Requires a new employer to honor an existing collective bargaining agreement at the IVH.

22 10 c. Within available resources and in conformance with
 22 11 associated state and federal program eligibility requirements,
 22 12 the Iowa veterans home may implement measures to provide
 22 13 financial assistance to or on behalf of veterans or their
 22 14 spouses who are participating in the community reentry program.

Permits the IVH to provide financial assistance to support participation in the Community Reentry Program within State and federal eligibility requirements.

22 15 e. The Iowa veterans home expenditure report shall be
 22 16 submitted monthly to the legislative services agency.

Requires the Veterans Home to submit a monthly expenditure report to the Legislative Services Agency.

22 17 3. HOME OWNERSHIP ASSISTANCE PROGRAM
 22 18 For transfer to the Iowa finance authority for the
 22 19 continuation of the home ownership assistance program for
 22 20 persons who are or were eligible members of the armed forces of
 22 21 the United States, pursuant to section 16.54:
 22 22\$ 800,000
 22 23 2,500,000

General Fund appropriation for the Home Ownership Assistance Program for military members.

DETAIL: This is an increase of \$900,000 compared to estimated FY 2014. These funds are transferred to the Iowa Finance Authority for the continuation of services in the Home Ownership Assistance Program.

22 24 Sec. 5. 2013 Iowa Acts, chapter 138, section 135, is amended
 22 25 to read as follows:
 22 26 SEC. 135. LIMITATION OF COUNTY COMMISSIONS OF VETERAN
 22 27 AFFAIRS FUND STANDING APPROPRIATIONS. Notwithstanding the
 22 28 standing appropriation in the following designated section for
 22 29 the fiscal year beginning July 1, 2014, and ending June 30,
 22 30 2015, the ~~amounts~~ amount appropriated from the general fund of
 22 31 the state pursuant to that section for the following designated
 22 32 purposes shall not exceed the following amount:
 22 33 For the county commissions of veteran affairs fund under
 22 34 section 35A.16:
 22 35\$ 495,000
 23 1 990,000

General Fund appropriation for the County Commissions of Veterans Affairs Fund.

DETAIL: This is no change compared to estimated net FY 2014.

23 4 Sec. 6. 2013 Iowa Acts, chapter 138, section 136, is amended
 23 5 to read as follows:
 23 6 SEC. 136. TEMPORARY ASSISTANCE FOR NEEDY FAMILIES BLOCK
 23 7 GRANT. There is appropriated from the fund created in section
 23 8 8.41 to the department of human services for the fiscal year
 23 9 beginning July 1, 2014, and ending June 30, 2015, from moneys
 23 10 received under the federal temporary assistance for needy
 23 11 families (TANF) block grant pursuant to the federal Personal
 23 12 Responsibility and Work Opportunity Reconciliation Act of 1996,
 23 13 Pub.L.No.104-193, and successor legislation, the following
 23 14 amounts, or so much thereof as is necessary, to be used for the
 23 15 purposes designated:

23 16 1. To be credited to the family investment program account
 23 17 and used for assistance under the family investment program
 23 18 under chapter 239B:
 23 19 \$ 9,058,474
 23 20 9,879,488

23 21 2. To be credited to the family investment program account
 23 22 and used for the job opportunities and basic skills (JOBS)
 23 23 program and implementing family investment agreements in
 23 24 accordance with chapter 239B:
 23 25 \$ 5,933,220
 23 26 11,091,911

23 27 3. To be used for the family development and
 23 28 self-sufficiency grant program in accordance with section
 23 29 216A.107:
 23 30 \$ 1,449,490
 23 31 2,898,980

23 32 Notwithstanding section 8.33, moneys appropriated in this
 23 33 subsection that remain unencumbered or unobligated at the close
 23 34 of the fiscal year shall not revert but shall remain available
 23 35 for expenditure for the purposes designated until the close of
 24 1 the succeeding fiscal year. However, unless such moneys are
 24 2 encumbered or obligated on or before September 30, 2015, the
 24 3 moneys shall revert.

24 4 4. For field operations:
 24 5 \$ 15,648,116
 24 6 31,296,232

TANF Block Grant Fund appropriations for FY 2015.

DETAIL: The federal government implemented Federal Welfare Reform on August 22, 1996. Federal Welfare Reform changed the funding for the Family Investment Program (FIP) from a matching program to a federal block grant. The TANF Program was reauthorized on February 8, 2006, with work participation rates extended to separate State programs and the elimination of high performance bonuses; however, Iowa's federal grant remains the same at \$131,524,959 per year.

TANF FY 2015 Block Grant appropriation for the FIP Account.

DETAIL: This is a decrease of \$8,237,460 compared to estimated FY 2014. The decrease is due to a declining caseload and a shift in Program funding to the General Fund to meet Maintenance of Effort (MOE) requirements.

TANF FY 2015 Block Grant appropriation for the PROMISE JOBS Program.

DETAIL: This is a decrease of \$774,528 compared to estimated FY 2014. The decrease is due to a declining caseload and a shift in Program funding to the General Fund to meet Maintenance of Effort (MOE) requirements.

TANF FY 2015 Block Grant appropriation for the Family Development and Self Sufficiency (FaDSS) Program.

DETAIL: This is no change compared to estimated FY 2014.

Requires nonreversion of funds allocated for the FaDSS Grant Program.

TANF FY 2015 Block Grant appropriation for Field Operations.

DETAIL: This is no change compared to estimated FY 2014.

<p>24 7 5. For general administration:</p> <p>24 8 \$ 1,872,000</p> <p>24 9 <u>3,744,000</u></p> <p>24 10 6. For state child care assistance:</p> <p>24 11 \$ 12,866,344</p> <p>24 12 <u>34,947,110</u></p> <p>24 13 <u>a.—The Of the funds appropriated in this subsection are,</u></p> <p>24 14 <u>\$26,347,110 is transferred to the child care and development</u></p> <p>24 15 <u>block grant appropriation made by the Eighty-fifth General</u></p> <p>24 16 <u>Assembly, 2013 Session, in 2013 Iowa Acts, chapter 136, section</u></p> <p>24 17 <u>14 for the federal fiscal year beginning October 1, 2014, and</u></p> <p>24 18 <u>ending September 30, 2015. Of this amount, \$100,000 <u>\$200,000</u></u></p> <p>24 19 <u>shall be used for provision of educational opportunities to</u></p> <p>24 20 <u>registered child care home providers in order to improve</u></p> <p>24 21 <u>services and programs offered by this category of providers</u></p> <p>24 22 <u>and to increase the number of providers. The department may</u></p> <p>24 23 <u>contract with institutions of higher education or child care</u></p> <p>24 24 <u>resource and referral centers to provide the educational</u></p> <p>24 25 <u>opportunities. Allowable administrative costs under the</u></p> <p>24 26 <u>contracts shall not exceed 5 percent. The application for a</u></p> <p>24 27 <u>grant shall not exceed two pages in length.</u></p> <p>24 28 <u>b. Any funds appropriated in this subsection remaining</u></p> <p>24 29 <u>unallocated shall be used for state child care assistance</u></p> <p>24 30 <u>payments for individuals enrolled in the family investment</u></p> <p>24 31 <u>program who are employed.</u></p> <p>24 32 7. For distribution to counties and regions through the</p> <p>24 33 property tax relief fund for mental health and disability</p> <p>24 34 services as provided in an appropriation made for this purpose:</p> <p>24 35 \$ 2,447,026</p> <p>25 1 <u>4,894,052</u></p> <p>25 2 8. For child and family services:</p> <p>25 3 \$ 16,042,215</p> <p>25 4 <u>32,084,430</u></p> <p>25 5 9. For child abuse prevention grants:</p> <p>25 6 \$ 62,500</p> <p>25 7 <u>125,000</u></p>	<p>TANF FY 2015 Block Grant appropriation for General Administration.</p> <p>DETAIL: This is no change compared to estimated FY 2014.</p> <p>TANF FY 2015 Block Grant appropriation for Child Care Assistance.</p> <p>DETAIL: This is an increase of \$9,214,423 compared to estimated FY 2014.</p> <p>Requires the DHS to transfer \$26,347,110 to the Child Care and Development Block Grant and to use \$200,000 for training of registered child care home providers. Permits the DHS to contract with colleges or child care resource and referral centers and specifies requirements for funding the Grants and the application form for the Grant. Caps contractor's administrative costs at 5.00%.</p> <p>Specifies that approximately \$8,600,000 will be used for Child Care Assistance for individuals enrolled in the FIP Program who are employed.</p> <p>TANF FY 2015 Block Grant appropriation for Mental Health and Developmental Disabilities Community Services.</p> <p>DETAIL: This is no change compared to estimated FY 2014.</p> <p>TANF FY 2015 Block Grant appropriation for Child and Family Services.</p> <p>DETAIL: This is no change compared to estimated FY 2014.</p> <p>TANF FY 2015 Block Grant appropriation for Child Abuse Prevention Grants.</p> <p>DETAIL: This is no change compared to estimated FY 2014.</p>
--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

25 8 10. For pregnancy prevention grants on the condition that
 25 9 family planning services are funded:
 25 10\$ 965,034
 25 11 1,930,067

TANF FY 2015 Block Grant appropriation for pregnancy prevention grants on the condition that family planning services are funded.

DETAIL: This is no change compared to estimated FY 2014.

25 12 Pregnancy prevention grants shall be awarded to programs
 25 13 in existence on or before July 1, 2014, if the programs have
 25 14 demonstrated positive outcomes. Grants shall be awarded to
 25 15 pregnancy prevention programs which are developed after July
 25 16 1, 2014, if the programs are based on existing models that
 25 17 have demonstrated positive outcomes. Grants shall comply with
 25 18 the requirements provided in 1997 Iowa Acts, chapter 208,
 25 19 section 14, subsections 1 and 2, including the requirement that
 25 20 grant programs must emphasize sexual abstinence. Priority in
 25 21 the awarding of grants shall be given to programs that serve
 25 22 areas of the state which demonstrate the highest percentage of
 25 23 unplanned pregnancies of females of childbearing age within the
 25 24 geographic area to be served by the grant.

Requires the Department to award pregnancy prevention grants that are based on existing models and to programs that 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 should be given to programs in areas of the State that have the highest percentage of unplanned adolescent pregnancies within the geographic area served by the grant.

25 25 11. For technology needs and other resources necessary
 25 26 to meet federal welfare reform reporting, tracking, and case
 25 27 management requirements:
 25 28\$ 518,593
 25 29 1,037,186

TANF FY 2015 Block Grant appropriation for federal welfare reform reporting, tracking, and case management technology and resource needs.

DETAIL: This is no change compared to estimated FY 2014.

25 30 The department shall transfer TANF block grant funding
 25 31 appropriated and allocated in this subsection to the child care
 25 32 and development block grant appropriation in accordance with
 25 33 federal law as necessary to comply with the provisions of this
 25 34 subsection.

25 35 12. For the family investment program share of the costs to
 26 1 continue to develop and maintain a new, integrated eligibility
 26 2 determination system:
 26 3\$ 2,525,226
 26 4 6,549,549

TANF FY 2015 Block Grant appropriation to the DHS to implement the new FIP eligibility system.

DETAIL: This is an increase of \$1,499,098 compared to estimated FY 2014.

26 5 13. a. Notwithstanding any provision to the contrary,
 26 6 including but not limited to requirements in section 8.41 or
 26 7 provisions in 2013 or 2014 Iowa Acts regarding the receipt and
 26 8 appropriation of federal block grants, federal funds from the
 26 9 temporary assistance for needy families block grant received
 26 10 by the state not otherwise appropriated in this section and
 26 11 remaining available for the fiscal year beginning July 1, 2014,
 26 12 are appropriated to the department of human services to the
 26 13 extent as may be necessary to be used in the following priority
 26 14 order:the family investment program, for state child care
 26 15 assistance program payments for individuals enrolled in the

Allows the DHS to carryforward TANF funds.

DETAIL: Funds carried forward may be used for FIP and Child Care Assistance.

26 16 family investment program who are employed, and for the family
 26 17 investment program share of costs to develop and maintain a
 26 18 new, integrated eligibility determination system. The federal
 26 19 funds appropriated in this paragraph "a" shall be expended only
 26 20 after all other funds appropriated in subsection 1 for the
 26 21 assistance under the family investment program, in subsection 6
 26 22 for child care assistance, or in subsection 12 for the family
 26 23 investment program share of the costs to continue to develop
 26 24 and maintain a new, integrated eligibility determination
 26 25 system, as applicable, have been expended.

26 26 b. The department shall, on a quarterly basis, advise the
 26 27 legislative services agency and department of management of
 26 28 the amount of funds appropriated in this subsection that was
 26 29 expended in the prior quarter.

26 30 14. Of the amounts appropriated in this section, ~~\$6,481,004~~
 26 31 \$12,962,008 for the fiscal year beginning July 1, 2014, is
 26 32 transferred to the appropriation of the federal social services
 26 33 block grant made to the department of human services for that
 26 34 fiscal year.

26 35 15. For continuation of the program providing categorical
 27 1 eligibility for the food assistance program as specified for
 27 2 the program in the section of this division of this 2014 Act
 27 3 relating to the family investment program account:
 27 4\$ 12,500
 27 5 25,000

27 6 16. The department may transfer funds allocated in this
 27 7 section to the appropriations made in this division of this Act
 27 8 for the same fiscal year for general administration and field
 27 9 operations for resources necessary to implement and operate the
 27 10 services referred to in this section and those funded in the
 27 11 appropriation made in this division of this Act for the same
 27 12 fiscal year for the family investment program from the general
 27 13 fund of the state.

27 14 Sec. 7. 2013 Iowa Acts, chapter 138, section 137, is amended
 27 15 to read as follows:
 27 16 SEC. 137. FAMILY INVESTMENT PROGRAM ACCOUNT.

27 17 1. Moneys credited to the family investment program (FIP)
 27 18 account for the fiscal year beginning July 1, 2014, and
 27 19 ending June 30, 2015, shall be used to provide assistance in
 27 20 accordance with chapter 239B.

27 21 2. The department may use a portion of the moneys credited

Requires the DHS to submit quarterly reports to the LSA and the Department of Management (DOM) regarding expenditures in this Section.

Requires \$12,962,008 of the federal TANF funds appropriated in this Section to be transferred to the federal Social Services Block Grant appropriation.

DETAIL: This is no change compared to estimated FY 2014.

TANF FY 2015 Block Grant appropriation to the Promoting Healthy Marriage Program.

DETAIL: This is no change compared to estimated FY 2014.

Permits the DHS to transfer funds to General Administration and Field Operations for costs associated with TANF-funded programs and the FIP.

Requires funds credited to the FIP Account for FY 2014 to be used as specified.

Permits the DHS to use FIP funds for various administrative purposes.

27 22 to the FIP account under this section as necessary for
27 23 salaries, support, maintenance, and miscellaneous purposes.

Permits the DHS to transfer funds to General Administration and Field Operations for costs associated with this Section.

27 24 3. The department may transfer funds allocated in this
27 25 section to the appropriations made in this division of this Act
27 26 for the same fiscal year for general administration and field
27 27 operations for resources necessary to implement and operate the
27 28 services referred to in this section and those funded in the
27 29 appropriation made in this division of this Act for the same
27 30 fiscal year for the family investment program from the general
27 31 fund of the state.

Requires the TANF Block Grant funds appropriated to the FIP Account to be allocated as specified.

27 32 4. Moneys appropriated in this division of this Act and
27 33 credited to the FIP account for the fiscal year beginning July
27 34 1, 2014, and ending June 30, 2015, are allocated as follows:

Allocates \$20,000 to the DHS to be used for administrative services.

27 35 a. To be retained by the department of human services to
28 1 be used for coordinating with the department of human rights
28 2 to more effectively serve participants in FIP and other shared
28 3 clients and to meet federal reporting requirements under the
28 4 federal temporary assistance for needy families block grant:
28 5\$ 40,000
28 6 20,000

DETAIL: This is no change compared to estimated FY 2014.

28 7 b. To the department of human rights for staffing,
28 8 administration, and implementation of the family development
28 9 and self-sufficiency grant program in accordance with section
28 10 216A.107:
28 11\$ 3,021,417
28 12 6,042,834

Allocates \$6,042,834 of the FY 2015 General Fund appropriation and TANF funds to the Department of Human Rights for the FaDSS Grant Program.

DETAIL: This is no change compared to estimated FY 2014.

28 13 (1) Of the funds allocated for the family development and
28 14 self-sufficiency grant program in this lettered paragraph,
28 15 not more than 5 percent of the funds shall be used for the
28 16 administration of the grant program.

Specifies that a maximum of 5.00% of the allocation be spent on administration of FaDSS Program grants.

28 17 (2) The department of human rights may continue to implement
28 18 the family development and self-sufficiency grant program
28 19 statewide during fiscal year 2014-2015.

Permits the Department of Human Rights to continue to implement the FaDSS Grant Program in FY 2015.

28 20 c. For the diversion subaccount of the FIP account:
28 21\$ 849,200
28 22 815,000

Allocates \$815,000 of FY 2015 TANF funds for the FIP Diversion Subaccount.

28 23 A portion of the moneys allocated for the subaccount may
28 24 be used for field operations, salaries, data management
28 25 system development, and implementation costs and support
28 26 deemed necessary by the director of human services in order to
28 27 administer the FIP diversion program. To the extent moneys

DETAIL: This is a decrease of \$883,400 compared to estimated FY 2014.

28 28 allocated in this lettered paragraph are not deemed by the
 28 29 department to be necessary to support diversion activities,
 28 30 such moneys may be used for other efforts intended to increase
 28 31 engagement by family investment program participants in work,
 28 32 education, or training activities.

28 33 d. For the food assistance employment and training program:
 28 34\$ 33,294
 28 35 66,588

Allocates \$66,588 of FY 2015 FIP funds to the Food Stamp Employment and Training Program.

DETAIL: This is no change compared to estimated FY 2014.

29 1 (1) The department shall apply the federal supplemental
 29 2 nutrition assistance program (SNAP) employment and training
 29 3 state plan in order to maximize to the fullest extent permitted
 29 4 by federal law the use of the 50 percent federal reimbursement
 29 5 provisions for the claiming of allowable federal reimbursement
 29 6 funds from the United States department of agriculture
 29 7 pursuant to the federal SNAP employment and training program
 29 8 for providing education, employment, and training services
 29 9 for eligible food assistance program participants, including
 29 10 but not limited to related dependent care and transportation
 29 11 expenses.

Requires the Department to amend the Food Stamp Employment and Training State Plan to maximize federal matching funds received.

29 12 (2) The department shall continue the categorical federal
 29 13 food assistance program eligibility at 160 percent of the
 29 14 federal poverty level and continue to eliminate the asset test
 29 15 from eligibility requirements, consistent with federal food
 29 16 assistance program requirements. The department shall include
 29 17 as many food assistance households as is allowed by federal
 29 18 law. The eligibility provisions shall conform to all federal
 29 19 requirements including requirements addressing individuals who
 29 20 are incarcerated or otherwise ineligible.

Requires the DHS to continue Food Assistance Program eligibility to persons with income up to 160.00% of the Federal Poverty Level (FPL). The DHS is to conform to all federal requirements including requirements addressing individuals that are incarcerated.

29 21 e. For the JOBS program:
 29 22\$ 9,845,408
 29 23 18,494,131

Permits the DHS to allocate \$18,494,131 of the FY 2015 General Fund appropriation and TANF funds for the PROMISE JOBS Program.

DETAIL: This is a decrease of \$1,196,685 compared to estimated FY 2014 due to declining caseloads.

29 24 5. Of the child support collections assigned under FIP,
 29 25 an amount equal to the federal share of support collections
 29 26 shall be credited to the child support recovery appropriation
 29 27 made in this division of this Act. Of the remainder of the
 29 28 assigned child support collections received by the child
 29 29 support recovery unit, a portion shall be credited to the FIP
 29 30 account, a portion may be used to increase recoveries, and a
 29 31 portion may be used to sustain cash flow in the child support

Requires the federal share of child support collections recovered by the State to be credited to the Child Support Recovery Unit. The remainder of support collected is credited to the FIP account, and the DHS is permitted to use a portion to increase recoveries and to sustain cash flow in the child support payments account.

29 32 payments account. If as a consequence of the appropriations
 29 33 and allocations made in this section the resulting amounts
 29 34 are insufficient to sustain cash assistance payments and meet
 29 35 federal maintenance of effort requirements, the department
 30 1 shall seek supplemental funding. If child support collections
 30 2 assigned under FIP are greater than estimated or are otherwise
 30 3 determined not to be required for maintenance of effort, the
 30 4 state share of either amount may be transferred to or retained
 30 5 in the child support payment account.

30 6 6. The department may adopt emergency rules for the family
 30 7 investment, JOBS, food assistance, and medical assistance
 30 8 programs if necessary to comply with federal requirements.

30 9 Sec. 8. 2013 Iowa Acts, chapter 138, section 138, is amended
 30 10 to read as follows:
 30 11 SEC. 138. FAMILY INVESTMENT PROGRAM GENERAL FUND. There
 30 12 is appropriated from the general fund of the state to the
 30 13 department of human services for the fiscal year beginning July
 30 14 1, 2014, and ending June 30, 2015, the following amount, or
 30 15 so much thereof as is necessary, to be used for the purpose
 30 16 designated:
 30 17 To be credited to the family investment program (FIP)
 30 18 account and used for family investment program assistance under
 30 19 chapter 239B:
 30 20 \$ 24,218,607
 30 21 48,503,875

30 22 1. Of the funds appropriated in this section, ~~\$3,912,189~~
 30 23 \$7,402,220 is allocated for the JOBS program.

30 24 2. Of the funds appropriated in this section, ~~\$1,581,927~~
 30 25 \$3,163,854 is allocated for the family development and
 30 26 self-sufficiency grant program.

30 27 3. Notwithstanding section 8.39, for the fiscal year
 30 28 beginning July 1, 2014, if necessary to meet federal

Permits the DHS to adopt emergency administrative rules for the FIP, Food Stamp Program, and Medical Assistance (Medicaid) Program.

General Fund appropriation to the DHS for the FIP, to be credited to the FIP Account. The appropriation for the FIP Account also contains funding for the PROMISE JOBS and FaDSS Programs.

DETAIL: This is no net change compared to estimated FY 2014. The changes include:

- An increase of \$3,502,157 for FIP to shift additional funding to the General Fund to meet MOE requirements.
- An increase of \$774,528 for Promise Jobs to shift additional funding to the General Fund to meet MOE requirements.
- An increase of \$422,157 for operation and maintenance costs for a new eligibility system (ELIAS).
- A decrease of \$1,196,685 due to a reduction the Promise Jobs caseload.
- A decrease of \$3,502,157 due to a reduction in FIP caseloads.

The appropriation maintains the current FIP payment levels (maximum grants of \$361 per month for a family with two persons and \$426 for a family with three persons).

General Fund allocation of \$7,402,220 for the PROMISE JOBS Program.

DETAIL: This is a decrease of \$422,157 compared to the FY 2014 allocation.

General Fund allocation of \$3,163,854 for the FaDSS Program.

DETAIL: This is no change compared to the FY 2014 allocation.

Specifies that the DHS has the authority to transfer TANF funds to the Social Services Block Grant as necessary to meet MOE requirements.

30 29 maintenance of effort requirements or to transfer federal
 30 30 temporary assistance for needy families block grant funding
 30 31 to be used for purposes of the federal social services block
 30 32 grant or to meet cash flow needs resulting from delays in
 30 33 receiving federal funding or to implement, in accordance with
 30 34 this division of this Act, activities currently funded with
 30 35 juvenile court services, county, or community moneys and state
 31 1 moneys used in combination with such moneys, the department
 31 2 of human services may transfer funds within or between any
 31 3 of the appropriations made in this division of this Act and
 31 4 appropriations in law for the federal social services block
 31 5 grant to the department for the following purposes, provided
 31 6 that the combined amount of state and federal temporary
 31 7 assistance for needy families block grant funding for each
 31 8 appropriation remains the same before and after the transfer:
 31 9 a. For the family investment program.
 31 10 b. For child care assistance.
 31 11 c. For child and family services.
 31 12 d. For field operations.
 31 13 e. For general administration.
 31 14 f. For distribution to counties or regions for services to
 31 15 persons with mental illness or an intellectual disability.
 31 16 This subsection shall not be construed to prohibit the use
 31 17 of existing state transfer authority for other purposes. The
 31 18 department shall report any transfers made pursuant to this
 31 19 subsection to the legislative services agency.

31 20 4. Of the funds appropriated in this section, ~~\$97,839~~
 31 21 \$195,678 shall be used for continuation of a grant to an
 31 22 Iowa-based nonprofit organization with a history of providing
 31 23 tax preparation assistance to low-income lowans in order to
 31 24 expand the usage of the earned income tax credit. The purpose
 31 25 of the grant is to supply this assistance to underserved areas
 31 26 of the state.

General Fund allocation of \$195,678 to provide tax preparation assistance for low-income lowans.

DETAIL: This is no change compared to the FY 2014 allocation.

31 27 5. Of the funds appropriated in this section, ~~\$20,000~~
 31 28 \$40,000 shall be used for the continuation of an unfunded
 31 29 pilot project, as defined in 441 IAC 100.1, relating to
 31 30 parental obligations, in which the child support recovery
 31 31 unit participates, to support the efforts of a nonprofit
 31 32 organization committed to strengthening the community through
 31 33 youth development, healthy living, and social responsibility in
 31 34 a county with a population over 350,000. The funds allocated
 31 35 in this subsection shall be used by the recipient organization
 32 1 to develop a larger community effort, through public and
 32 2 private partnerships, to support a broad-based fatherhood
 32 3 initiative that promotes payment of child support obligations,
 32 4 improved family relationships, and full-time employment.

General Fund allocation of \$40,000 for a Fatherhood Initiative Pilot Project.

DETAIL: This is no change compared to the FY 2014 allocation. This is the second year for the Project.

32 5 6. The department may transfer funds appropriated in this
 32 6 section to the appropriations made in this division of this Act
 32 7 for general administration and field operations as necessary
 32 8 to administer this section and the overall family investment
 32 9 program.

Allows the DHS to transfer funds appropriated in this Section for General Administration and Field Operations when necessary to administer the Family Investment Program.

32 10 Sec. 9. 2013 Iowa Acts, chapter 138, section 139, is amended
 32 11 to read as follows:
 32 12 SEC. 139. CHILD SUPPORT RECOVERY. There is appropriated
 32 13 from the general fund of the state to the department of human
 32 14 services for the fiscal year beginning July 1, 2014, and ending
 32 15 June 30, 2015, the following amount, or so much thereof as is
 32 16 necessary, to be used for the purposes designated:
 32 17 For child support recovery, including salaries, support,
 32 18 maintenance, and miscellaneous purposes, and for not more than
 32 19 the following full-time equivalent positions:
 32 20 \$ 7,086,885
 32 21 14,911,230
 32 22 FTEs 464.00

General Fund appropriation to the DHS for the Child Support Recovery Unit.

DETAIL: This is an increase of \$696,149 and 5.00 FTE positions compared to estimated FY 2014. The changes include:

- An increase of \$483,963 to replace lost federal incentives and other one-time funding.
- An increase of \$212,186 due to increased costs of service.
- A general increase of 5.00 FTE positions to match the FY 2014 appropriation.

32 23 1. The department shall expend up to ~~\$12,165~~ \$24,329,
 32 24 including federal financial participation, for the fiscal year
 32 25 beginning July 1, 2014, for a child support public awareness
 32 26 campaign. The department and the office of the attorney
 32 27 general shall cooperate in continuation of the campaign. The
 32 28 public awareness campaign shall emphasize, through a variety
 32 29 of media activities, the importance of maximum involvement of
 32 30 both parents in the lives of their children as well as the
 32 31 importance of payment of child support obligations.

Requires the DHS to expend up to \$24,329 during FY 2015 for a child support public awareness campaign. The funding limitation includes federal funds. The campaign is to be operated in cooperation with the Office of the Attorney General and is to emphasize parental involvement and financial support.

DETAIL: This is no change to the current level of support.

32 32 2. Federal access and visitation grant moneys shall be
 32 33 issued directly to private not-for-profit agencies that provide
 32 34 services designed to increase compliance with the child access
 32 35 provisions of court orders, including but not limited to
 33 1 neutral visitation sites and mediation services.

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

33 2 3. The appropriation made to the department for child
 33 3 support recovery may be used throughout the fiscal year in the
 33 4 manner necessary for purposes of cash flow management, and for
 33 5 cash flow management purposes the department may temporarily
 33 6 draw more than the amount appropriated, provided the amount
 33 7 appropriated is not exceeded at the close of the fiscal year.

Permits the DHS to use the appropriation 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.

33 8 4. With the exception of the funding amount specified, the
 33 9 requirements established under 2001 Iowa Acts, chapter 191,
 33 10 section 3, subsection 5, paragraph "c", subparagraph (3), shall
 33 11 be applicable to parental obligation pilot projects for the
 33 12 fiscal year beginning July 1, 2014, and ending June 30, 2015.

Specifies that the Department is to continue to operate the Child Support Recovery Unit under the guidelines established in [HF 732 \(FY 2002 Health and Human Services Appropriations Act\)](#).

33 13 Notwithstanding 441 IAC 100.8, providing for termination of
 33 14 rules relating to the pilot projects, the rules shall remain
 33 15 in effect until June 30, 2015.

33 16 Sec. 10. 2013 Iowa Acts, chapter 138, section 140, is
 33 17 amended to read as follows:
 33 18 SEC. 140. HEALTH CARE TRUST FUND — MEDICAL ASSISTANCE —
 33 19 FY ~~2013-2014~~ 2014-2015 . Any funds remaining in the health
 33 20 care trust fund created in section 453A.35A for the fiscal
 33 21 year beginning July 1, 2014, and ending June 30, 2015, are
 33 22 appropriated to the department of human services to supplement
 33 23 the medical assistance program appropriations made in this
 33 24 division of this Act, for medical assistance reimbursement and
 33 25 associated costs, including program administration and costs
 33 26 associated with program implementation.

Appropriates the balance of the Health Care Trust Fund (HCTF) to the Medicaid Program for FY 2014.

DETAIL: It is estimated that there will be \$221,790,000 available. This is a decrease of \$2,626,400 compared to estimated FY 2014. The decrease is due to the reduction in collection of tobacco taxes.

33 27 Sec. 11. 2013 Iowa Acts, chapter 138, section 142,
 33 28 unnumbered paragraph 2, is amended to read as follows:
 33 29 For medical assistance program reimbursement and associated
 33 30 costs as specifically provided in the reimbursement
 33 31 methodologies in effect on June 30, 2014, except as otherwise
 33 32 expressly authorized by law, consistent with options under
 33 33 federal law and regulations, and contingent upon receipt of
 33 34 approval from the office of the governor of reimbursement for
 33 35 each abortion performed under the program:

General Fund appropriation to the DHS for the Medicaid Program.

DETAIL: This is a net increase of \$103,808,209 compared to estimated FY 2014. The changes include:

34 1 \$1,143,810,311
 34 2 1,248,017,014

- An increase of \$38,192,881 to replace a funding shortfall in FY 2014.
- An increase of \$35,139,094 to replace federal funds due to a reduction in the Federal Medical Assistance Percentage (FMAP) rate.
- An increase of \$16,191,074 to replace one-time and expiring revenue sources.
- An increase of \$13,366,589 due to program growth for mental health services, enrollment, and FMAP.
- An increase of \$8,076,590 for the Home and Community-Based Services (HCBS) Waiver and Home Health inflation.
- An increase of \$7,385,771 to replace carryforward from FY 2014.
- An increase of \$5,369,431 due to managed care growth.
- An increase of \$4,847,559 to reduce the number of individuals on the HCBS waiver waiting list.
- An increase of \$3,831,362 due to increases in the behavioral health services contract.
- An increase of \$2,696,082 due to fee-for-service enrollment increases.
- An increase of \$2,114,318 due to increases in nursing facility bed days.
- An increase of \$1,872,169 due to increases in Targeted Case Management (TCM).
- An increase of \$1,351,060 due to miscellaneous program growth.
- An increase of \$252,000 due to an increase in eligibility for

<p>34 3 Sec. 12. 2013 Iowa Acts, chapter 138, section 142, 34 4 subsection 18, paragraph a, is amended to read as follows: 34 5 a. The department shall continue to implement the cost 34 6 containment strategies for the medical assistance program in 34 7 the fiscal year beginning July 1, 2014, that were recommended 34 8 by the governor for the fiscal year beginning July 1, 2013, as 34 9 specified in this Act and may adopt emergency rules for such 34 10 implementation. <u>The department shall not implement the cost</u> 34 11 <u>containment strategy that requires transition of the provision</u> 34 12 <u>of personal care under the consumer-directed attendant</u> 34 13 <u>care option to agency-provided personal care services while</u> 34 14 <u>retaining the consumer choice option for those individuals able</u> 34 15 <u>and desiring to self-direct services.</u></p> <p>34 16 Sec. 13. 2013 Iowa Acts, chapter 138, section 142, 34 17 subsection 18, is amended by adding the following new 34 18 paragraph: 34 19 NEW PARAGRAPH 0e. The department shall report the 34 20 implementation of any cost containment strategies under this 34 21 subsection to the individuals specified in this division of 34 22 this Act for submission of reports on a quarterly basis.</p> <p>34 23 Sec. 14. 2013 Iowa Acts, chapter 138, section 142, is 34 24 amended by adding the following new subsections: 34 25 NEW SUBSECTION 22. Of the funds appropriated in this 34 26 section, \$4,847,559 shall be used to implement reductions 34 27 in the waiting lists of all medical assistance home and 34 28 community-based services waivers. The funds shall be expended 34 29 to add an equal number of waiver waiting list slots to each of 34 30 the types of waivers.</p>	<p>Miller Trusts.</p> <ul style="list-style-type: none"> • A decrease of \$200,000 to reflect the Governor's veto of the Chronic Care Consortium. • A decrease of \$2,085,800 due to a funding adjustment to Medicaid. • A decrease of \$4,819,338 due to increased recoveries and offsets. • A decrease of \$8,715,473 to reflect the Governor's veto of the HCBS Waiver waiting list buydown. • A decrease of \$9,135,935 due to savings related to the implementation of Health Homes. • A decrease of \$11,921,225 to eliminate a transfer to the IowaCare Program that expired December 31, 2013. <p>Prohibits the DHS from implementing the cost containment strategy from SF 446 (FY 2014 Health and Human Services Appropriations Act) that requires Consumer-Directed Attendant Care (CDAC) providers to transition to agency provided personal care services or the Consumer Choice Option (CCO).</p> <p>Requires the DHS to report on the implementation of the cost containment strategies in this Division on a quarterly basis to the LSA and the DOM.</p> <p>Allocates \$4,847,559 to reduce the Medicaid HCBS waiver waiting lists.</p> <p>DETAIL: As of February 2014, there were 7,590 individuals on the waiting lists, including:</p> <ul style="list-style-type: none"> • 2,793 on the Health and Disability Waiver waiting list. • 914 on the Brain Injury Waiver waiting list. • 1,644 on the Children's Mental Health Waiver waiting list. • 2,239 on the Physical Disability Waiver waiting list.
----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

34 31 NEW SUBSECTION 23. The department of human services
 34 32 shall perform a detailed analysis regarding the inclusion of
 34 33 the Medicaid program pharmacy benefit in the managed care
 34 34 organization plan for Medicaid members under the MEDIPASS
 34 35 program and the Iowa health and wellness plan in order to
 35 1 enhance the value of the pharmacist-member interaction, utilize
 35 2 the most appropriate and least costly treatment for the member,
 35 3 and more fully integrate the pharmacy benefit into patient care
 35 4 management. The analysis shall include but is not limited to
 35 5 a review of the provider network to be used to ensure network
 35 6 adequacy, patient choice, in-person patient care management,
 35 7 and continuity of care; financial transparency requirements;
 35 8 timely data sharing; formulary, preferred drug list, and prior
 35 9 authorization requirements; provisions for continuing to
 35 10 provide any therapeutic classes of drugs under the traditional
 35 11 Medicaid program; standards for pharmacy reimbursement
 35 12 rates including dispensing fees; the type of reimbursement
 35 13 methodology to be used for the managed care organization to
 35 14 provide the pharmacy benefit including but not limited to a
 35 15 capitation or a shared savings model; outcomes, performance,
 35 16 and reporting requirements; patient protections including but
 35 17 not limited to appeals and grievance processes, emergency
 35 18 refill requirements, and patient transition of care and
 35 19 exceptions to policy provisions; the projected cost or savings;
 35 20 and any federal approval necessary to provide the pharmacy
 35 21 benefit to the specified members through a managed care
 35 22 organization. The department shall report the results of its
 35 23 analysis to the individuals identified in this division of this
 35 24 Act for submission of reports by December 15, 2014, and shall
 35 25 not implement the inclusion of the pharmacy benefit in the
 35 26 managed care organization plan providing coverage to Medicaid
 35 27 members under the MEDIPASS program and the Iowa health and
 35 28 wellness plan without prior approval of the general assembly.

Requires the DHS to perform a detailed analysis of the Medicaid pharmacy benefit in the managed care organization plan for Medicaid members under the MEDIPASS Program and the Iowa Health and Wellness Plan (I-HAWP).

35 29 Sec. 15. 2013 Iowa Acts, chapter 138, section 143, is
 35 30 amended to read as follows:
 35 31 SEC. 143. MEDICAL CONTRACTS. There is appropriated from the
 35 32 general fund of the state to the department of human services
 35 33 for the fiscal year beginning July 1, ~~2013~~ 2014, and ending
 35 34 June 30, ~~2014~~ 2015, the following amount, or so much thereof as
 35 35 is necessary, to be used for the purpose designated:
 36 1 For medical contracts:
 36 2 \$ 6,145,785
 36 3 17,323,366

General Fund appropriation to Medical Contracts.

DETAIL: This an increase of \$5,003,318 compared to estimated FY 2014. The changes include:

- An increase of \$1,597,515 due to increased administrative costs for the Iowa Health and Wellness Program (I-HAWP).
- An increase of \$1,223,367 due to increased contract, operations, and information technology (IT) costs.
- An increase of \$1,182,436 to replace one-time funding from the Pharmaceutical Settlement Account.
- An increase of \$1,000,000 for the Autism Treatment Program.

<p>36 4 1. The department of inspections and appeals shall 36 5 provide all state matching funds for survey and certification 36 6 activities performed by the department of inspections 36 7 and appeals. The department of human services is solely 36 8 responsible for distributing the federal matching funds for 36 9 such activities.</p>	<p>Requires the Department of Inspections and Appeals (DIA) to provide the State matching funds for survey and certification activities.</p>
<p>36 10 2. Of the funds appropriated in this section, \$25,000 36 11 \$50,000 shall be used for continuation of home and 36 12 community-based services waiver quality assurance programs, 36 13 including the review and streamlining of processes and policies 36 14 related to oversight and quality management to meet state and 36 15 federal requirements.</p>	<p>Allocates \$50,000 to be used for an HCBS Waiver Quality Assurance Program to review and streamline processes and policies related to oversight.</p> <p>DETAIL: This is no change compared to the FY 2014 allocation.</p>
<p>36 16 3. Of the amount appropriated in this section, up to 36 17 \$100,000 \$200,000 may be transferred to the appropriation 36 18 for general administration in this division of this Act to 36 19 be used for additional full-time equivalent positions in the 36 20 development of key health initiatives such as cost containment, 36 21 development and oversight of managed care programs, and 36 22 development of health strategies targeted toward improved 36 23 quality and reduced costs in the Medicaid program.</p>	<p>Allows up to \$200,000 to be transferred to the DHS General Administration to hire additional FTE positions to implement cost containment or managed care oversight initiatives.</p> <p>DETAIL: This is no change compared to the FY 2014 allocation.</p>
<p>36 24 4. Of the funds appropriated in this section, \$500,000 36 25 \$1,000,000 shall be used for planning and development, 36 26 in cooperation with the department of public health, of a 36 27 phased-in program to provide a dental home for children.</p>	<p>Allocates \$1,000,000 for the I-Smile Program.</p> <p>DETAIL: This is no change compared to the FY 2014 allocation.</p>
<p>36 28 5. Of the funds appropriated in this section, \$37,500 36 29 \$75,000 shall be used for continued implementation of a uniform 36 30 cost report.</p>	<p>Allocates \$75,000 for the continued implementation of uniform cost reports.</p> <p>DETAIL: This is no change compared to the FY 2014 allocation.</p>
<p>36 31 6. Of the funds appropriated in this section, \$1,000,000 36 32 \$3,000,000 shall be used for the autism support program created 36 33 in chapter 225D, as enacted in this Act.</p>	<p>Allocates \$3,000,000 for an autism treatment program.</p> <p>DETAIL: This is an increase of \$1,000,000 compared to the estimated FY 2014 appropriation. This Program was new in FY 2014, and the funds are to be used to provide Applied Behavioral Analysis and other treatment for children that do not qualify for Medicaid or private insurance autism coverage.</p>
<p>36 34 7. Of the funds appropriated in this section, \$49,895 36 35 \$99,790 shall be used for continued implementation of an 37 1 electronic medical records system. 37 2 Sec. 16. 2013 Iowa Acts, chapter 138, section 144, is 37 3 amended to read as follows:</p>	<p>Allocates \$99,790 for the continued implementation of Electronic Medical Records system.</p> <p>DETAIL: This is no change compared to the FY 2014 allocation.</p>

37 4 SEC. 144. STATE SUPPLEMENTARY ASSISTANCE.
 37 5 1. There is appropriated from the general fund of the
 37 6 state to the department of human services for the fiscal year
 37 7 beginning July 1, 2014, and ending June 30, 2015, the following
 37 8 amount, or so much thereof as is necessary, to be used for the
 37 9 purpose designated:
 37 10 For the state supplementary assistance program:
 37 11\$ 8,256,087
 37 1214,121,154

General Fund appropriation to the DHS for State Supplementary Assistance.

DETAIL: This is an decrease of \$2,395,704 compared to estimated FY 2014 due to lower caseloads.

37 13 2. The department shall increase the personal needs
 37 14 allowance for residents of residential care facilities by the
 37 15 same percentage and at the same time as federal supplemental
 37 16 security income and federal social security benefits are
 37 17 increased due to a recognized increase in the cost of living.
 37 18 The department may adopt emergency rules to implement this
 37 19 subsection.

Requires the DHS to increase the personal needs allowance of residential care facilities residents at the same rate and time as federal Supplemental Security Income (SSI) and Social Security benefits are increased. Permits the DHS to adopt emergency rules for implementation.

37 20 3. If during the fiscal year beginning July 1, 2014,
 37 21 the department projects that state supplementary assistance
 37 22 expenditures for a calendar year will not meet the federal
 37 23 pass-through requirement specified in Tit.XVI of the federal
 37 24 Social Security Act, section 1618, as codified in 42 U.S.C.
 37 25 §1382g, the department may take actions including but not
 37 26 limited to increasing the personal needs allowance for
 37 27 residential care facility residents and making programmatic
 37 28 adjustments or upward adjustments of the residential care
 37 29 facility or in-home health-related care reimbursement rates
 37 30 prescribed in this division of this Act to ensure that federal
 37 31 requirements are met. In addition, the department may make
 37 32 other programmatic and rate adjustments necessary to remain
 37 33 within the amount appropriated in this section while ensuring
 37 34 compliance with federal requirements. The department may adopt
 37 35 emergency rules to implement the provisions of this subsection.

Permits the DHS to adjust rates for State Supplementary Assistance to meet federal MOE requirements. Permits the DHS to adopt emergency rules for implementation.

38 1 Sec. 17. 2013 Iowa Acts, chapter 138, section 145, is
 38 2 amended to read as follows:
 38 3 SEC. 145. CHILDREN'S HEALTH INSURANCE PROGRAM.
 38 4 1. There is appropriated from the general fund of the
 38 5 state to the department of human services for the fiscal year
 38 6 beginning July 1, 2014, and ending June 30, 2015, the following
 38 7 amount, or so much thereof as is necessary, to be used for the
 38 8 purpose designated:
 38 9 For maintenance of the healthy and well kids in Iowa (hawk-i)
 38 10 program pursuant to chapter 514I, including supplemental dental
 38 11 services, for receipt of federal financial participation under
 38 12 Tit.XXI of the federal Social Security Act, which creates the
 38 13 children's health insurance program:

General Fund appropriation to the DHS for the Children's Health Insurance Program, also known as the hawk-i Program.

DETAIL: This is an increase of \$9,060,737 compared to estimated FY 2014. The changes include:

- An increase of \$3,080,838 to replace revenues from the hawk-i Trust Fund.
- An increase of \$3,063,803 due to growth in caseloads.
- An increase of \$1,482,307 due to increases in premiums.
- An increase of \$1,433,789 due to a reduction in the FMAP rate.

38 14 \$ 18,403,051
 38 15 45,877,998

38 16 2. Of the funds appropriated in this section, ~~\$70,725~~
 38 17 \$153,500 is allocated for continuation of the contract for
 38 18 outreach with the department of public health.
 38 19 3. The department of human services shall request approval
 38 20 from the centers for Medicare and Medicaid services of the
 38 21 United States department of health and human services to
 38 22 utilize administrative funding under the federal Children's
 38 23 Health Insurance Program Reauthorization Act of 2009, Pub.
 38 24 L. No.111-3, to provide the maximum federal matching funds
 38 25 available to implement a new health services initiative as
 38 26 provided under section 2105(a)(1)(D)(ii) of the federal Social
 38 27 Security Act, to fund the state poison control center.

Allocates \$153,500 for the continuation of an outreach contract with the DPH.

DETAIL: This is an increase of \$12,050 compared to the estimated FY 2014 allocation. The increase is due the the lower FMAP rate. The total amount of State and federal dollars allocated to this contract will remain unchanged.

38 28 Sec. 18. 2013 Iowa Acts, chapter 138, section 146, is
 38 29 amended to read as follows:
 38 30 SEC. 146. CHILD CARE ASSISTANCE. There is appropriated
 38 31 from the general fund of the state to the department of human
 38 32 services for the fiscal year beginning July 1, 2014, and ending
 38 33 June 30, 2015, the following amount, or so much thereof as is
 38 34 necessary, to be used for the purpose designated:
 38 35 For child care programs:

General Fund appropriation for the DHS for Child Care Assistance.

DETAIL: This is a net decrease of \$17,112,735 compared to estimated FY 2014. The changes include:

39 1 \$ 31,354,897
 39 2 45,622,828

39 3 1. Of the funds appropriated in this section, ~~\$27,377,595~~
 39 4 \$37,903,401 shall be used for state child care assistance in
 39 5 accordance with section 237A.13.

- An increase of \$3,000,000 due to a one-time replacement of funds from TANF.
- An increase of \$1,818,140 due to a one-time replacement of federal carryforward funds.
- An increase of \$472,547 to replace a reduction to the federal CCDF grant.
- An increase of \$318,572 to replace one-time funding for Child Care Facility Fund records checks.
- A decrease of \$2,238,779 due to lower estimated child care expenditures.
- A decrease of \$100,000 due to one time database expenditures in FY 2014.
- A decrease of \$12,214,423 due to increased TANF funding for FY 2015.
- A decrease of \$2,866,414 due to a reduction allowed through available federal surplus funds in FY 2014.
- A decrease of \$5,302,378 due to the carryforward of projected FY 2014 surplus funds.

39 6 2. Nothing in this section shall be construed or is
 39 7 intended as or shall imply a grant of entitlement for services
 39 8 to persons who are eligible for assistance due to an income
 39 9 level consistent with the waiting list requirements of section
 39 10 237A.13. Any state obligation to provide services pursuant to
 39 11 this section is limited to the extent of the funds appropriated
 39 12 in this section.

Specifies that assistance from the Child Care Assistance Program is not an entitlement and the State's obligation to provide services is limited to the funds available.

<p>39 13 3. Of the funds appropriated in this section, \$216,227 39 14 <u>\$432,453</u> is allocated for the statewide <u>grant</u> program for child 39 15 care resource and referral services under section 237A.26. 39 16 A list of the registered and licensed child care facilities 39 17 operating in the area served by a child care resource and 39 18 referral service shall be made available to the families 39 19 receiving state child care assistance in that area.</p>	<p>Allocates \$432,453 for the Statewide Child Care Resource and Referral Program.</p> <p>DETAIL: This is no change compared to the FY 2014 allocation. Requires a list of the registered and licensed child care facilities to be made available by Child Care Resource and Referral Programs to families receiving assistance under the Child Care Assistance Program.</p>
<p>39 20 4. Of the funds appropriated in this section, \$468,487 39 21 <u>\$936,974</u> is allocated for child care quality improvement 39 22 initiatives including but not limited to the voluntary quality 39 23 rating system in accordance with section 237A.30. 39 24 —5. Of the funds appropriated in this section, \$67,589 shall 39 25 be used to conduct fingerprint-based national criminal history 39 26 record checks of home-based child care providers pursuant 39 27 to section 237A.5, subsection 2, through the United States 39 28 department of justice, federal bureau of investigation. 39 29 —6. Of the amount appropriated in this section, up to 39 30 \$12,500 shall be used to continue to implement a searchable 39 31 internet-based application as part of the consumer information 39 32 made available under section 237A.25. The application shall 39 33 provide a listing of the child care providers in this state 39 34 that have received a rating under the voluntary quality rating 39 35 system implemented pursuant to section 237A.30 and information 40 1 on whether a provider specializes in child care for infants, 40 2 school-age children, children with special needs, or other 40 3 populations or provides any other specialized services to 40 4 support family needs.</p>	<p>Allocates \$936,974 for the Quality Rating System (QRS).</p> <p>DETAIL: This is no change compared to the FY 2014 allocation.</p>
<p>40 5 7. Of the funds appropriated in this section, \$3,175,000 40 6 <u>\$6,350,000</u> shall be credited to the early childhood programs 40 7 grants account in the early childhood Iowa fund created 40 8 in section 256I.11. The moneys shall be distributed for 40 9 funding of community-based early childhood programs targeted 40 10 to children from birth through five years of age developed 40 11 by early childhood Iowa areas in accordance with approved 40 12 community plans as provided in section 256I.8.</p>	<p>Transfers \$6,350,000 to the Early Childhood Programs Grant Account in the Early Childhood Iowa Fund.</p> <p>DETAIL: This transfer was also in effect for FY 2014.</p>
<p>40 13 8. The department may use any of the funds appropriated 40 14 in this section as a match to obtain federal funds for use in 40 15 expanding child care assistance and related programs. For 40 16 the purpose of expenditures of state and federal child care 40 17 funding, funds shall be considered obligated at the time 40 18 expenditures are projected or are allocated to the department's 40 19 service areas. Projections shall be based on current and 40 20 projected caseload growth, current and projected provider</p>	<p>Permits funds appropriated for child care to be used as matching funds for federal grants. Specifies that funds are obligated when expenditures are projected or allocated to the DHS regions.</p> <p>DETAIL: This provision was also in effect for FY 2014.</p>

40 21 rates, staffing requirements for eligibility determination
 40 22 and management of program requirements including data systems
 40 23 management, staffing requirements for administration of the
 40 24 program, contractual and grant obligations and any transfers
 40 25 to other state agencies, and obligations for decategorization
 40 26 or innovation projects.

40 27 9. A portion of the state match for the federal child care
 40 28 and development block grant shall be provided as necessary to
 40 29 meet federal matching funds requirements through the state
 40 30 general fund appropriation made for child development grants
 40 31 and other programs for at-risk children in section 279.51.

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.

40 32 10. If a uniform reduction ordered by the governor under
 40 33 section 8.31 or other operation of law, transfer, or federal
 40 34 funding reduction reduces the appropriation made in this
 40 35 section for the fiscal year, the percentage reduction in the
 41 1 amount paid out to or on behalf of the families participating
 41 2 in the state child care assistance program shall be equal to or
 41 3 less than the percentage reduction made for any other purpose
 41 4 payable from the appropriation made in this section and the
 41 5 federal funding relating to it. The percentage reduction to
 41 6 the other allocations made in this section shall be the same as
 41 7 the uniform reduction ordered by the governor or the percentage
 41 8 change of the federal funding reduction, as applicable.
 41 9 If there is an unanticipated increase in federal funding
 41 10 provided for state child care assistance, the entire amount
 41 11 of the increase shall be used for state child care assistance
 41 12 payments. If the appropriations made for purposes of the
 41 13 state child care assistance program for the fiscal year are
 41 14 determined to be insufficient, it is the intent of the general
 41 15 assembly to appropriate sufficient funding for the fiscal year
 41 16 in order to avoid establishment of waiting list requirements.

Requires the DHS to apply any reductions to the child care assistance appropriation, either State or federal, that result in a reduction to subsidy payments to families, in amounts equal to or less than the percentage of the reduction. Also requires any unanticipated increase in federal funding to be used only for the Child Care Assistance Subsidy Program. Specifies that it is the intent of the General Assembly to provide sufficient funding for the Program in FY 2015 to avoid the establishment of a waiting list.

41 17 11. Notwithstanding section 8.33, moneys advanced for
 41 18 purposes of the programs developed by early childhood Iowa
 41 19 areas, advanced for purposes of wraparound child care, or
 41 20 received from the federal appropriations made for the purposes
 41 21 of this section that remain unencumbered or unobligated at the
 41 22 close of the fiscal year shall not revert to any fund but shall
 41 23 remain available for expenditure for the purposes designated
 41 24 until the close of the succeeding fiscal year.

Permits nonreversion of FY 2015 funds advanced for purposes of programs developed by Early Childhood Iowa areas or purposes of wraparound child care, or received from federal appropriations for child care assistance.

41 25 Sec. 19. 2013 Iowa Acts, chapter 138, section 147, is
 41 26 amended to read as follows:

41 27 SEC. 147. JUVENILE INSTITUTIONS. There is appropriated
 41 28 from the general fund of the state to the department of human
 41 29 services for the fiscal year beginning July 1, 2014, and ending

General Fund appropriation to the DHS for Juvenile Institutions.

41 30 June 30, 2015, the following amounts, or so much thereof as is
41 31 necessary, to be used for the purposes designated:

41 32 1. For ~~operation of the costs of security, building and~~
41 33 ~~grounds maintenance, utilities, salary, and support for the~~
41 34 ~~facilities located at the Iowa juvenile home at Toledo and for~~
41 35 ~~salaries, support, maintenance, and miscellaneous purposes, and~~
42 1 ~~for not more than the following full-time equivalent positions:~~

42 2	.....	\$	<u>4,429,678</u>
42 3			<u>788,531</u>
42 4	.....	FTEs	<u>414.00</u>
42 5			<u>15.00</u>

General Fund appropriation to the Iowa Juvenile Home at Toledo.

DETAIL: This is a decrease of \$8,078,590 and 99.00 FTE positions compared to estimated FY 2014. The General Fund changes include:

- A decrease of \$8,859,355 and 99.00 FTE positions to close the facility. Click [here](#) for more information about the Facility's closure.
- An increase of \$780,765 to maintain the facility grounds, security, maintenance, and utilities.

42 6 2. For operation of the state training school at Eldora and
42 7 for salaries, support, maintenance, and miscellaneous purposes,
42 8 and for not more than the following full-time equivalent
42 9 positions:

42 10	.....	\$	<u>5,628,485</u>
42 11			<u>11,500,098</u>
42 12	.....	FTEs	<u>164.30</u>

General Fund appropriation to the State Training School at Eldora.

DETAIL: This is an increase of \$231,896 and no change in FTE positions compared to estimated FY 2014. The General Fund changes include:

- An increase of \$168,140 to meet new federal sexual harassment and abuse prevention standards.
- An increase of \$63,756 due to cost increases for pharmacy, food, transportation, utilities, and Workers' Compensation.

42 13 Of the funds appropriated in this subsection, ~~\$45,575~~
42 14 \$91,150 shall be used for distribution to licensed classroom
42 15 teachers at this and other institutions under the control of
42 16 the department of human services based upon the average student
42 17 yearly enrollment at each institution as determined by the
42 18 department.

General Fund allocation of \$91,150 for licensed classroom teachers in State institutions.

DETAIL: This is no change compared to the FY 2014 allocation.

42 19 3. A portion of the moneys appropriated in this section
42 20 shall be used by the state training school and by the Iowa
42 21 juvenile home for grants for adolescent pregnancy prevention
42 22 activities at the institutions in the fiscal year beginning
42 23 July 1, 2014.

Requires a portion of the funds appropriated for Eldora State Training School to be used for pregnancy prevention activities in FY 2015.

DETAIL: This provision was also in effect for FY 2014.

42 24 Sec. 20. 2013 Iowa Acts, chapter 138, is amended by adding
42 25 the following new section:
42 26 NEW SECTION SEC. 147A. CHILDREN ADJUDICATED AS DELINQUENT
42 27 OR CHILD IN NEED OF ASSISTANCE — IOWA JUVENILE HOME. There
42 28 is appropriated from the general fund of the state to the
42 29 department of human services for the fiscal year beginning July
42 30 1, 2014, and ending June 30, 2015, the following amount, or
42 31 so much thereof as is necessary, to be used for the purposes
42 32 designated:

General Fund appropriation of \$5,110,534 for children adjudicated as delinquent or Children in Need of Assistance (CINA).

DETAIL: This is a new appropriation for FY 2015. General Fund changes include:

- An increase of \$3,892,534 for placements of female children adjudicated as delinquent and male and female CINA children.
- An increase of \$1,218,000 for the compensatory education of

42 33 For the placement costs of female children adjudicated
 42 34 as delinquent and male and female children adjudicated as a
 42 35 child in need of assistance, and for the costs of compensatory
 43 1 education for children formerly placed at the Iowa juvenile
 43 2 home at Toledo:
 43 3 \$ 5,110,534

certain children placed at the Iowa Juvenile Home from October 7 through December 20, 2013.

43 4 1. Of the funds appropriated in this section, \$3,892,534
 43 5 shall be used for the placement costs of female children
 43 6 adjudicated as delinquent and male and female children
 43 7 adjudicated as a child in need of assistance, who are deemed by
 43 8 the department to be eligible for use of the funds.

Allocates \$3,892,534 for placements of female children adjudicated as delinquent and male and female CINA children.

DETAIL: This is a new allocation for FY 2015.

43 9 2. Of the funds appropriated in this section, \$1,218,000
 43 10 shall be used for the costs of compensatory education to
 43 11 address the reviews of special education of certain children
 43 12 placed at the Iowa juvenile home conducted by the department of
 43 13 education in fall 2013 and reported to the department of human
 43 14 services on October 7 and December 20, 2013.

Allocates \$1,218,000 for the compensatory education of certain children placed at the Iowa Juvenile Home from October 7 through December 20, 2013.

DETAIL: This is a new allocation for FY 2015.

43 15 3. By January 1, 2015, the department shall provide a
 43 16 report to the governor and the legislative services agency that
 43 17 includes a description of the status of juvenile delinquent
 43 18 girls in out-of-home placements during the period beginning
 43 19 December 1, 2013, and ending December 1, 2014; identifies
 43 20 their placement histories; provides the reason for placement;
 43 21 provides a status report on educational services and treatment
 43 22 of youth at department facilities; and makes appropriate
 43 23 recommendations for legislation deemed necessary.

Requires the DHS to submit a report to the Governor and the LSA concerning the status of juvenile delinquent girls in out-of-home placements between the dates of December 1, 2013, and December 1, 2014. The report must include placement histories, reasons for placements, education services status, treatment of youth, and recommendations for legislation.

43 24 Sec. 21. 2013 Iowa Acts, chapter 138, section 148, is
 43 25 amended to read as follows:

43 26 SEC. 148. CHILD AND FAMILY SERVICES.

43 27 1. There is appropriated from the general fund of the
 43 28 state to the department of human services for the fiscal year
 43 29 beginning July 1, 2014, and ending June 30, 2015, the following
 43 30 amount, or so much thereof as is necessary, to be used for the
 43 31 purpose designated:

43 32 For child and family services:
 43 33 \$ 45,641,960
 43 34 95,664,831

Allocates \$95,920,906 for Child and Family Services.

DETAIL: This is an increase of \$4,591,479 compared to the FY 2014 appropriation. General Fund changes include:

- An increase of \$433,084 due to the reduction in Iowa's federal medical assistance percentage (FMAP) rate.
- An increase of \$4,158,395 to bring group foster care providers to the 80.00% equalization rate based on the Foster Group

	<p>Care Rate Methodology Workgroup recommendations from December 2012.</p> <ul style="list-style-type: none"> • A decrease of \$50,000 to the System of Care Program in Cerro Gordo and Linn Counties. • A decrease of \$116,075 to the System of Care Program in Polk County. • A decrease of \$250,000 to the Circle of Care grant in Northeast Iowa.
<p>43 35 2. Up to \$2,600,000 <u>\$5,200,000</u> of the amount of federal 44 1 temporary assistance for needy families block grant funding 44 2 appropriated in this division of this Act for child and family 44 3 services shall be made available for purposes of juvenile 44 4 delinquent graduated sanction services.</p>	<p>Allocates up to \$5,200,000 of federal Temporary Assistance for Needy Families (TANF) funds for delinquency programs.</p> <p>DETAIL: This is no change compared to the FY 2014 allocation.</p>
<p>44 5 3. The department may transfer funds appropriated in this 44 6 section as necessary to pay the nonfederal costs of services 44 7 reimbursed under the medical assistance program, state child 44 8 care assistance program, or the family investment program which 44 9 are provided to children who would otherwise receive services 44 10 paid under the appropriation in this section. The department 44 11 may transfer funds appropriated in this section to the 44 12 appropriations made in this division of this Act for general 44 13 administration and for field operations for resources necessary 44 14 to implement and operate the services funded in this section.</p>	<p>Permits the Department to transfer funds appropriated for Child and Family Services to Medicaid, the FIP, General Administration, or Field Operations to pay for costs associated with child welfare services in these areas.</p>
<p>44 15 4. a. Of the funds appropriated in this section, up 44 16 to \$16,421,463 <u>\$36,400,721</u> is allocated as the statewide 44 17 expenditure target under section 232.143 for group foster care 44 18 maintenance and services. If the department projects that such 44 19 expenditures for the fiscal year will be less than the target 44 20 amount allocated in this lettered paragraph, the department may 44 21 reallocate the excess to provide additional funding for shelter 44 22 care or the child welfare emergency services addressed with the 44 23 allocation for shelter care.</p>	<p>Allocates up to \$36,400,721 for group foster care services and maintenance costs. Permits reallocation of excess funds.</p> <p>DETAIL: This an increase of \$4,158,395 compared to the FY 2014 allocation. The increase is meant to bring group foster care providers to the 80.00% equalization rate based on the Foster Group Care Rate Methodology Workgroup recommendations from December 2012.</p>
<p>44 24 b. If at any time after September 30, 2014, annualization 44 25 of a service area's current expenditures indicates a service 44 26 area is at risk of exceeding its group foster care expenditure 44 27 target under section 232.143 by more than 5 percent, the 44 28 department and juvenile court services shall examine all 44 29 group foster care placements in that service area in order to 44 30 identify those which might be appropriate for termination. 44 31 In addition, any aftercare services believed to be needed 44 32 for the children whose placements may be terminated shall be 44 33 identified. The department and juvenile court services shall 44 34 initiate action to set dispositional review hearings for the</p>	<p>Requires the group foster care expenditure target to be reviewed under certain conditions and requires review hearings when appropriate.</p>

44 35 placements identified. In such a dispositional review hearing,
 45 1 the juvenile court shall determine whether needed aftercare
 45 2 services are available and whether termination of the placement
 45 3 is in the best interest of the child and the community.

45 4 5. In accordance with the provisions of section 232.188,
 45 5 the department shall continue the child welfare and juvenile
 45 6 justice funding initiative during fiscal year 2014-2015. Of
 45 7 the funds appropriated in this section, ~~\$858,877~~ \$1,717,753
 45 8 is allocated specifically for expenditure for fiscal year
 45 9 2014-2015 through the decategorization ~~service~~ services funding
 45 10 pools and governance boards established pursuant to section
 45 11 232.188.

Allocates \$1,717,753 for decategorization services.

DETAIL: This is no change compared to the FY 2014 allocation.

45 12 6. A portion of the funds appropriated in this section
 45 13 may be used for emergency family assistance to provide other
 45 14 resources required for a family participating in a family
 45 15 preservation or reunification project or successor project to
 45 16 stay together or to be reunified.

Permits a portion of the Child and Family Services appropriation to be used for emergency family assistance under specified conditions.

45 17 7. Notwithstanding section 234.35 or any other provision
 45 18 of law to the contrary, state funding for shelter care and
 45 19 the child welfare emergency services contracting implemented
 45 20 to provide for or prevent the need for shelter care shall be
 45 21 limited to ~~\$3,808,024~~ \$7,717,822.

Limits State funding for shelter care to \$7,717,822.

DETAIL: This is no change compared to the FY 2014 allocation.

45 22 8. Federal funds received by the state during the fiscal
 45 23 year beginning July 1, 2014, as the result of the expenditure
 45 24 of state funds appropriated during a previous state fiscal
 45 25 year for a service or activity funded under this section are
 45 26 appropriated to the department to be used as additional funding
 45 27 for services and purposes provided for under this section.
 45 28 Notwithstanding section 8.33, moneys received in accordance
 45 29 with this subsection that remain unencumbered or unobligated at
 45 30 the close of the fiscal year shall not revert to any fund but
 45 31 shall remain available for the purposes designated until the
 45 32 close of the succeeding fiscal year.

Requires federal funds received in FY 2015 for the expenditure of State funds in a previous year to be used for child welfare services. Allows nonreversion of funds through FY 2016.

45 33 9. a. Of the funds appropriated in this section, up to
 45 34 ~~\$1,645,000~~ \$3,290,000 is allocated for the payment of the
 45 35 expenses of court-ordered services provided to juveniles who
 46 1 are under the supervision of juvenile court services, which
 46 2 expenses are a charge upon the state pursuant to section
 46 3 232.141, subsection 4. Of the amount allocated in this
 46 4 lettered paragraph, up to ~~\$778,144~~ \$1,556,287 shall be made
 46 5 available to provide school-based supervision of children
 46 6 adjudicated under chapter 232, of which not more than ~~\$7,500~~
 46 7 \$15,000 may be used for the purpose of training. A portion of

Provides the following allocations related to court-ordered services for juveniles:

- Allocates up to \$3,290,000 for court-ordered services provided to children that are under the supervision of juvenile court services. This is no change compared to the FY 2014 allocation. Of this amount, \$1,556,287 is allocated for school-based supervision of delinquent children, limits training funds to \$15,000, and requires a portion of the cost for school-based liaisons to be paid by school districts.

46 8 the cost of each school-based liaison officer shall be paid by
 46 9 the school district or other funding source as approved by the
 46 10 chief juvenile court officer.
 46 11 b. Of the funds appropriated in this section, up to ~~\$374,493~~
 46 12 ~~\$748,985~~ is allocated for the payment of the expenses of
 46 13 court-ordered services provided to children who are under the
 46 14 supervision of the department, which expenses are a charge upon
 46 15 the state pursuant to section 232.141, subsection 4.

Allocates \$748,985 for court-ordered services provided to children that are under the supervision of the DHS.

DETAIL: This is no change compared to FY 2014.

46 16 c. Notwithstanding section 232.141 or any other provision
 46 17 of law to the contrary, the amounts allocated in this
 46 18 subsection shall be distributed to the judicial districts
 46 19 as determined by the state court administrator and to the
 46 20 department's service areas as determined by the administrator
 46 21 of the department's division of child and family services. The
 46 22 state court administrator and the division administrator shall
 46 23 make the determination of the distribution amounts on or before
 46 24 June 15, 2014.

Requires allocations to the judicial districts as determined by the Court Administrator and to the DHS districts as determined by the Division of Child and Family Services Administrator by June 15, 2014.

46 25 d. Notwithstanding chapter 232 or any other provision of
 46 26 law to the contrary, a district or juvenile court shall not
 46 27 order any service which is a charge upon the state pursuant
 46 28 to section 232.141 if there are insufficient court-ordered
 46 29 services funds available in the district court or departmental
 46 30 service area distribution amounts to pay for the service. The
 46 31 chief juvenile court officer and the departmental service area
 46 32 manager shall encourage use of the funds allocated in this
 46 33 subsection such that there are sufficient funds to pay for
 46 34 all court-related services during the entire year. The chief
 46 35 juvenile court officers and departmental service area managers
 47 1 shall attempt to anticipate potential surpluses and shortfalls
 47 2 in the distribution amounts and shall cooperatively request the
 47 3 state court administrator or division administrator to transfer
 47 4 funds between the judicial districts' or departmental service
 47 5 areas' distribution amounts as prudent.

Prohibits a court from ordering any service that is a charge to the State if there are insufficient funds to reimburse the service. Requires the Chief Juvenile Court Officer to use the funds in a manner that will cover the entire fiscal year and permits funds to be transferred between districts.

47 6 e. Notwithstanding any provision of law to the contrary,
 47 7 a district or juvenile court shall not order a county to pay
 47 8 for any service provided to a juvenile pursuant to an order
 47 9 entered under chapter 232 which is a charge upon the state
 47 10 under section 232.141, subsection 4.

Prohibits a court from ordering a county to pay for a service provided to a juvenile that is chargeable to the State.

47 11 f. Of the funds allocated in this subsection, not more
 47 12 than ~~\$41,500~~ ~~\$83,000~~ may be used by the judicial branch for
 47 13 administration of the requirements under this subsection.

Prohibits expenditure of more than \$83,000 by the Judicial Branch for administration related to court-ordered services.

DETAIL: This is no change compared to the FY 2014 allocation.

47 14 g. Of the funds allocated in this subsection, ~~\$8,500~~ \$17,000
 47 15 shall be used by the department of human services to support
 47 16 the interstate commission for juveniles in accordance with
 47 17 the interstate compact for juveniles as provided in section
 47 18 232.173.

Allocates \$17,000 for the DHS to support the Interstate Commission for Juveniles in accordance with the Interstate Compact for Juveniles.

 DETAIL: This is no change compared to the FY 2014 allocation.

47 19 10. Of the funds appropriated in this section, ~~\$4,026,613~~
 47 20 \$8,053,226 is allocated for juvenile delinquent graduated
 47 21 sanctions services. Any state funds saved as a result of
 47 22 efforts by juvenile court services to earn federal Tit.IV-E
 47 23 match for juvenile court services administration may be used
 47 24 for the juvenile delinquent graduated sanctions services.

Allocates \$8,053,226 for juvenile delinquent graduated sanctions services.

 DETAIL: This is no change compared to the FY 2014 allocation. Permits any State funds saved as a result of increasing federal Title IV-E claims for juvenile court services, as indicated by the 2009 Public Works Efficiency Report, to be used for graduated sanctions services.

47 25 11. Of the funds appropriated in this section, ~~\$804,143~~
 47 26 \$1,608,285 is transferred to the department of public health
 47 27 to be used for the child protection center grant program in
 47 28 accordance with section 135.118. The grant amounts under the
 47 29 program shall be equalized so that each center receives a
 47 30 uniform amount of at least ~~\$122,500~~ \$245,000.

Requires \$1,608,285 to be transferred to the DPH for the Child Protection Center (CPC) Grant Program.

 DETAIL: This is no change compared to the FY 2014 allocation.

47 31 12. If the department receives federal approval to
 47 32 implement a waiver under Tit.IV-E of the federal Social
 47 33 Security Act to enable providers to serve children who remain
 47 34 in the children's families and communities, for purposes of
 47 35 eligibility under the medical assistance program through 25
 48 1 years of age, children who participate in the waiver shall be
 48 2 considered to be placed in foster care.

Requires children that receive in-home or community-based services under a federal Title IV-E waiver to be considered placed in foster care to remain eligible for Medicaid, if the DHS receives federal approval to implement the waiver.

48 3 13. Of the funds appropriated in this section, ~~\$1,628,490~~
 48 4 \$3,256,980 is allocated for the preparation for adult living
 48 5 program pursuant to section 234.46.

Allocates \$3,256,980 for the Preparation for Adult Living (PALs) Program.

 DETAIL: This is no change compared to the FY 2014 allocation.

48 6 14. Of the funds appropriated in this section, ~~\$260,075~~
 48 7 \$520,150 shall be used for juvenile drug courts. The amount
 48 8 allocated in this subsection shall be distributed as follows:
 48 9 To the judicial branch for salaries to assist with the
 48 10 operation of juvenile drug court programs operated in the
 48 11 following jurisdictions:

Allocates a total of \$520,150 for Judicial Branch staffing costs relating to juvenile drug courts and specifies the distribution of the funds.

DETAIL: This is no change compared to the FY 2014 allocation.

- 48 12 a. Marshall county:
- 48 13 \$ 31,354
- 48 14 62,708
- 48 15 b. Woodbury county:
- 48 16 \$ 62,844
- 48 17 125,682
- 48 18 c. Polk county:

48 19	.....	\$	97,946
48 20			<u>195,892</u>
48 21	d. The third judicial district:		
48 22	.....	\$	33,967
48 23			<u>67,934</u>
48 24	e. The eighth judicial district:		
48 25	.....	\$	33,967
48 26			<u>67,934</u>

48 27 15. Of the funds appropriated in this section, ~~\$143,669~~
 48 28 \$227,337 shall be used for the public purpose of continuing
 48 29 a grant to a nonprofit human services organization providing
 48 30 services to individuals and families in multiple locations in
 48 31 southwest Iowa and Nebraska for support of a project providing
 48 32 immediate, sensitive support and forensic interviews, medical
 48 33 exams, needs assessments, and referrals for victims of child
 48 34 abuse and their nonoffending family members.

Allocates \$227,337 for Project Harmony for support of victims of child abuse and the nonoffending family members.

DETAIL: This is no change compared to the FY 2014 allocation.

48 35 16. Of the funds appropriated in this section, ~~\$100,295~~
 49 1 \$210,260 is allocated for the foster care youth council
 49 2 approach of providing a support network to children placed in
 49 3 foster care.

Allocates \$210,260 to provide support for foster care youth councils.

DETAIL: This is an increase of \$9,670 compared to the FY 2014 allocation.

49 4 17. Of the funds appropriated in this section, ~~\$101,000~~
 49 5 \$202,000 is allocated for use pursuant to section 235A.1 for
 49 6 continuation of the initiative to address child sexual abuse
 49 7 implemented pursuant to 2007 Iowa Acts, chapter 218, section
 49 8 18, subsection 21.

Allocates \$202,000 for an initiative to address child sexual abuse.

DETAIL: This is no change compared to the FY 2014 allocation.

49 9 18. Of the funds appropriated in this section, ~~\$315,120~~
 49 10 \$630,240 is allocated for the community partnership for child
 49 11 protection sites.

Allocates \$630,240 for the child welfare Community Partnerships for Child Protection sites.

DETAIL: This is no change compared to the FY 2014 allocation.

49 12 19. Of the funds appropriated in this section, ~~\$185,625~~
 49 13 \$371,250 is allocated for the department's minority youth and
 49 14 family projects under the redesign of the child welfare system.

Allocates \$371,250 for minority youth and family projects included in the child welfare redesign.

DETAIL: This is no change compared to the FY 2014 allocation.

49 15 20. Of the funds appropriated in this section, ~~\$718,298~~
 49 16 \$1,186,595 is allocated for funding of the community circle of
 49 17 care collaboration for children and youth in northeast Iowa.

Allocates \$1,186,595 for the Circle of Care grant in Northeast Iowa.

DETAIL: This is a decrease of \$250,000 compared to the FY 2014 allocation.

49 18 21. Of the funds appropriated in this section, at least
 49 19 ~~\$73,579~~ \$147,158 shall be used for the child welfare training

Allocates \$147,158 for the child welfare provider online training academy.

49 20 academy.

DETAIL: This is no change compared to the FY 2014 allocation.

49 21 22. Of the funds appropriated in this section, ~~\$12,500~~
 49 22 \$25,000 shall be used for the public purpose of continuation
 49 23 of a grant to a child welfare services provider headquartered
 49 24 in a county with a population between 205,000 and 215,000 in
 49 25 the latest certified federal census that provides multiple
 49 26 services including but not limited to a psychiatric medical
 49 27 institution for children, shelter, residential treatment, after
 49 28 school programs, school-based programming, and an Asperger's
 49 29 syndrome program, to be used for support services for children
 49 30 with autism spectrum disorder and their families.

Allocates \$25,000 to Four Oaks for various autism spectrum disorder services.

DETAIL: This is no change compared to the FY 2014 allocation.

49 31 23. Of the funds appropriated in this section, ~~\$12,500~~
 49 32 \$25,000 shall be used for the public purpose of continuing a
 49 33 grant to a hospital-based provider headquartered in a county
 49 34 with a population between 90,000 and 95,000 in the latest
 49 35 certified federal census that provides multiple services
 50 1 including but not limited to diagnostic, therapeutic, and
 50 2 behavioral services to individuals with autism spectrum
 50 3 disorder across the lifespan. The grant recipient shall
 50 4 utilize the funds to continue the pilot project to determine
 50 5 the necessary support services for children with autism
 50 6 spectrum disorder and their families to be included in the
 50 7 children's disabilities services system. The grant recipient
 50 8 shall submit findings and recommendations based upon the
 50 9 results of the pilot project to the individuals specified in
 50 10 this division of this Act for submission of reports by December
 50 11 31, 2014.

Allocates \$25,000 to a hospital-based provider in Dubuque County for support services for children with autism spectrum disorder and their families.

DETAIL: This is no change compared to the FY 2014 allocation.

50 12 24. Of the funds appropriated in this section, ~~\$163,974~~
 50 13 \$211,872 shall be used for continuation of the central Iowa
 50 14 system of care program grant through June 30, 2015.

Allocates \$211,872 for continuation of a System of Care Program in Polk County.

DETAIL: This is a decrease of \$116,075 compared to the FY 2014 allocation.

50 15 25. Of the funds appropriated in this section, ~~\$80,000~~
 50 16 \$110,000 shall be used for the public purpose of the
 50 17 continuation of a system of care grant implemented in Cerro
 50 18 Gordo and Linn counties.

Allocates \$110,000 for continuation of a System of Care Program in Cerro Gordo and Linn Counties.

DETAIL: This is a decrease of \$50,000 compared to the FY 2014 allocation.

50 19 26. Of the funds appropriated in this section, at least
 50 20 ~~\$12,500~~ \$25,000 shall be used to continue and to expand the
 50 21 foster care respite pilot program in which postsecondary

Allocates at least \$25,000 to continue and expand to additional counties the Foster Care Respite Pilot Program at Wartburg College for students in social work and other human service-related programs.

50 22 students in social work and other human services-related
50 23 programs receive experience by assisting family foster care
50 24 providers with respite and other support.

DETAIL: This is no change compared to the FY 2014 allocation.

50 25 27. Of the funds appropriated in this section, \$160,000
50 26 shall be used for the public purpose of funding child welfare
50 27 services with a system of care approach through a nonprofit
50 28 provider of child welfare services that has been in existence
50 29 for more than 115 years, is located in a county with a
50 30 population of more than 200,000 but less than 220,000 according
50 31 to the latest census information issued by the United States
50 32 census bureau provider, is licensed as a psychiatric medical
50 33 institution for children, and has not been a system of care
50 34 grantee prior to July 1, 2014.

Allocates \$160,000 to the Tanager Place Mental Health Clinic.

DETAIL: This is a new allocation for FY 2015.

50 35 Sec. 22. 2013 Iowa Acts, chapter 138, section 149, is
51 1 amended to read as follows:
51 2 SEC. 149. ADOPTION SUBSIDY.
51 3 1. There is appropriated from the general fund of the
51 4 state to the department of human services for the fiscal year
51 5 beginning July 1, 2014, and ending June 30, 2015, the following
51 6 amount, or so much thereof as is necessary, to be used for the
51 7 purpose designated:
51 8 For adoption subsidy payments and services:
51 9 \$ 20,364,644
51 10 42,580,749

General Fund appropriation to the Adoption Subsidy Program.

DETAIL: This is an increase of \$1,851,467 compared to estimated net FY 2014. The changes include:

- A increase of \$595,511 to fund caseload growth.
- An increase of \$1,255,956 due to the reduction in Iowa's FMAP rate.

51 11 2. The department may transfer funds appropriated in
51 12 this section to the appropriation made in this division of
51 13 this Act for general administration for costs paid from the
51 14 appropriation relating to adoption subsidy.

Permits the DHS to transfer funds for adoption recruitment and retention. Allows the DHS to transfer funds to Child and Family Services to ensure equitable rate increases for adoption and foster care programs.

51 15 3. Federal funds received by the state during the
51 16 fiscal year beginning July 1, 2014, as the result of the
51 17 expenditure of state funds during a previous state fiscal
51 18 year for a service or activity funded under this section are
51 19 appropriated to the department to be used as additional funding
51 20 for the services and activities funded under this section.
51 21 Notwithstanding section 8.33, moneys received in accordance
51 22 with this subsection that remain unencumbered or unobligated
51 23 at the close of the fiscal year shall not revert to any fund
51 24 but shall remain available for expenditure for the purposes
51 25 designated until the close of the succeeding fiscal year.

Requires federal funds received in FY 2015 for the expenditure of State funds in a previous fiscal year to be used for adoption subsidies. Permits nonreversion of federal funds in this Subsection until the close of FY 2016.

51 26 Sec. 23. 2013 Iowa Acts, chapter 138, section 151, is
51 27 amended to read as follows:
51 28 SEC. 151. FAMILY SUPPORT SUBSIDY PROGRAM.
51 29 1. There is appropriated from the general fund of the

General Fund appropriation for the Family Support Program.

DETAIL: This is a net decrease of \$13,549 compared to estimated FY 2014. The changes include:

51 30 state to the department of human services for the fiscal year
 51 31 beginning July 1, 2014, and ending June 30, 2015, the following
 51 32 amount, or so much thereof as is necessary, to be used for the
 51 33 purpose designated:
 51 34 For the family support subsidy program subject to the
 51 35 enrollment restrictions in section 225C.37, subsection 3:
 52 1 \$ 546,478
 52 2 1,079,739

- A decrease of \$62,549 due to a reduction in expenses as a result of children aging out of the program.
- An increase of \$49,000 to expand the Children-at-Home Program to a new areas.

52 3 2. The department shall use at least ~~\$241,750~~ \$532,500
 52 4 of the moneys appropriated in this section for the family
 52 5 support center component of the comprehensive family support
 52 6 program under section 225C.47. Not more than ~~\$42,500~~ \$25,000
 52 7 of the amount allocated in this subsection shall be used for
 52 8 administrative costs.

Allocates \$532,500 to continue the Children-at-Home Program in current counties.

DETAIL: This is an increase of \$49,000 to expand the program to one new area. Permits the DHS to expand the Program to an additional county if funds are available. Administrative funding is limited to \$25,000.

52 9 3. If at any time during the fiscal year, the amount of
 52 10 funding available for the family support subsidy program
 52 11 is reduced from the amount initially used to establish the
 52 12 figure for the number of family members for whom a subsidy
 52 13 is to be provided at any one time during the fiscal year,
 52 14 notwithstanding section 225C.38, subsection 2, the department
 52 15 shall revise the figure as necessary to conform to the amount
 52 16 of funding available.

Requires the Department to revise funding available to participants in the Family Support Subside Program if available funds are less than anticipated.

52 17 Sec. 24. 2013 Iowa Acts, chapter 138, section 152, is
 52 18 amended to read as follows:
 52 19 SEC. 152. CONNER DECREE. There is appropriated from the
 52 20 general fund of the state to the department of human services
 52 21 for the fiscal year beginning July 1, 2014, and ending June 30,
 52 22 2015, the following amount, or so much thereof as is necessary,
 52 23 to be used for the purpose designated:
 52 24 For building community capacity through the coordination
 52 25 and provision of training opportunities in accordance with the
 52 26 consent decree of Conner v.Branstad, No.4-86-CV-30871(S.D.
 52 27 Iowa, July 14, 1994):
 52 28 \$ 46,814
 52 29 33,632

General Fund appropriation to the DHS for Conner Decree training requirements.

DETAIL: This is no change compared to estimated FY 2014. The funds are used for training purposes to comply with the Conner v. Branstad court decision mandating placement of persons in the least restrictive setting.

52 30 Sec. 25. 2013 Iowa Acts, chapter 138, section 153, is
 52 31 amended to read as follows:
 52 32 SEC. 153. MENTAL HEALTH INSTITUTES. There is appropriated
 52 33 from the general fund of the state to the department of human
 52 34 services for the fiscal year beginning July 1, 2014, and ending
 52 35 June 30, 2015, the following amounts, or so much thereof as is
 53 1 necessary, to be used for the purposes designated:

53 2 1. For the state mental health institute at Cherokee for
 53 3 salaries, support, maintenance, and miscellaneous purposes, and
 53 4 for not more than the following full-time equivalent positions:
 53 5 \$ 2,977,232
 53 6 6,031,934
 53 7 FTEs 169.20

General Fund appropriation to the MHI at Cherokee.

DETAIL: This is an increase of \$67,197 and no change in FTE positions compared to estimated FY 2014. The increase is for the increased cost of food, pharmaceuticals, transportation, and utilities.

53 8 2. For the state mental health institute at Clarinda for
 53 9 salaries, support, maintenance, and miscellaneous purposes, and
 53 10 for not more than the following full-time equivalent positions:
 53 11 \$ 3,375,934
 53 12 6,787,309
 53 13 FTEs 86.10

General Fund appropriation to the MHI at Clarinda.

DETAIL: This is an increase of \$29,620 and no change in FTE positions compared to estimated FY 2014. The increase is for the increased cost of food, pharmaceuticals, transportation, and utilities.

53 14 3. For the state mental health institute at Independence for
 53 15 salaries, support, maintenance, and miscellaneous purposes, and
 53 16 for not more than the following full-time equivalent positions:
 53 17 \$ 5,159,389
 53 18 10,484,386
 53 19 FTEs 233.00

General Fund appropriation to the MHI at Independence.

DETAIL: This is an increase of \$150,304 and no change in FTE positions compared to estimated FY 2014. The changes include:

- An increase of \$114,665 for the increased cost of food, pharmaceuticals, transportation, and utilities.
- An increase of \$35,639 due to a reduction in the federal FMAP rate.

53 20 4. For the state mental health institute at Mount Pleasant
 53 21 for salaries, support, maintenance, and miscellaneous purposes,
 53 22 and for not more than the following full-time equivalent
 53 23 positions:
 53 24 \$ 683,343
 53 25 1,417,796
 53 26 FTEs 97.92

General Fund appropriation to the MHI at Mt. Pleasant.

DETAIL: This is an increase of \$43,735 and no change in FTE positions compared to estimated FY 2014. The increase is for the increased cost of food, pharmaceuticals, transportation and utilities.

53 27 Sec. 26. 2013 Iowa Acts, chapter 138, section 154, is
 53 28 amended to read as follows:
 53 29 SEC. 154. STATE RESOURCE CENTERS.
 53 30 1. There is appropriated from the general fund of the
 53 31 state to the department of human services for the fiscal year
 53 32 beginning July 1, 2014, and ending June 30, 2015, the following
 53 33 amounts, or so much thereof as is necessary, to be used for the
 53 34 purposes designated:

53 35 a. For the state resource center at Glenwood for salaries,
 54 1 support, maintenance, and miscellaneous purposes:
 54 2 \$ 40,137,236
 54 3 21,695,266

General Fund appropriation to the State Resource Center at Glenwood.

DETAIL: This is an increase of \$1,346,144 compared to estimated FY 2014 due to a reduction in the federal FMAP rate.

54 4 b. For the state resource center at Woodward for salaries,
 54 5 support, maintenance, and miscellaneous purposes:
 54 6 \$ 7,110,232
 54 7 14,855,693

General Fund appropriation to the State Resource Center at Woodward.

DETAIL: This is an increase of \$569,502 compared to estimated FY 2014 due to a reduction in the federal FMAP rate.

54 8 2. The department may continue to bill for state resource
 54 9 center services utilizing a scope of services approach used for
 54 10 private providers of ICFID services, in a manner which does not
 54 11 shift costs between the medical assistance program, counties,
 54 12 or other sources of funding for the state resource centers.

Permits the DHS to continue billing practices that do not include cost shifting.

54 13 3. The state resource centers may expand the time-limited
 54 14 assessment and respite services during the fiscal year.

Permits the State Resource Centers to expand time-limited assessment and respite services.

DETAIL: Time-limited assessments include analysis of patient conditions and development of therapy plans to assist families in caring for individuals with intellectual disabilities or developmental disabilities. Respite services provide care for special needs individuals for a limited duration to provide families with a temporary reprieve from caretaking responsibilities.

54 15 4. If the department's administration and the department
 54 16 of management concur with a finding by a state resource
 54 17 center's superintendent that projected revenues can reasonably
 54 18 be expected to pay the salary and support costs for a new
 54 19 employee position, or that such costs for adding a particular
 54 20 number of new positions for the fiscal year would be less
 54 21 than the overtime costs if new positions would not be added,
 54 22 the superintendent may add the new position or positions. If
 54 23 the vacant positions available to a resource center do not
 54 24 include the position classification desired to be filled, the
 54 25 state resource center's superintendent may reclassify any
 54 26 vacant position as necessary to fill the desired position. The
 54 27 superintendents of the state resource centers may, by mutual
 54 28 agreement, pool vacant positions and position classifications
 54 29 during the course of the fiscal year in order to assist one
 54 30 another in filling necessary positions.

Specifies that FTE positions may be added at the two State Resource Centers if projected revenues are sufficient to pay the salary and support costs of the additional positions.

54 31 5. If existing capacity limitations are reached in
 54 32 operating units, a waiting list is in effect for a service or
 54 33 a special need for which a payment source or other funding
 54 34 is available for the service or to address the special need,
 54 35 and facilities for the service or to address the special need
 55 1 can be provided within the available payment source or other
 55 2 funding, the superintendent of a state resource center may
 55 3 authorize opening not more than two units or other facilities

Permits a State Resource Center to open certain facilities if a service waiting list exists and funding is available.

55 4 and begin implementing the service or addressing the special
55 5 need during fiscal year 2014-2015.

55 6 Sec. 27. 2013 Iowa Acts, chapter 138, section 155, is
55 7 amended to read as follows:

55 8 SEC. 155. SEXUALLY VIOLENT PREDATORS.

55 9 1. There is appropriated from the general fund of the
55 10 state to the department of human services for the fiscal year
55 11 beginning July 1, 2014, and ending June 30, 2015, the following
55 12 amount, or so much thereof as is necessary, to be used for the
55 13 purpose designated:

55 14 For costs associated with the commitment and treatment of
55 15 sexually violent predators in the unit located at the state
55 16 mental health institute at Cherokee, including costs of legal
55 17 services and other associated costs, including salaries,
55 18 support, maintenance, and miscellaneous purposes, and for not
55 19 more than the following full-time equivalent positions:

55 20	.....	\$	4,708,485
55 21	.....		<u>9,923,563</u>
55 22	.....	FTEs	424.50
55 23	.....		<u>132.50</u>

55 24 2. Unless specifically prohibited by law, if the amount
55 25 charged provides for recoupment of at least the entire amount
55 26 of direct and indirect costs, the department of human services
55 27 may contract with other states to provide care and treatment
55 28 of persons placed by the other states at the unit for sexually
55 29 violent predators at Cherokee. The moneys received under
55 30 such a contract shall be considered to be repayment receipts
55 31 and used for the purposes of the appropriation made in this
55 32 section.

55 33 Sec. 28. 2013 Iowa Acts, chapter 138, section 156, is
55 34 amended to read as follows:

55 35 SEC. 156. FIELD OPERATIONS. There is appropriated from the
56 1 general fund of the state to the department of human services
56 2 for the fiscal year beginning July 1, 2014, and ending June 30,
56 3 2015, the following amount, or so much thereof as is necessary,
56 4 to be used for the purposes designated:

56 5 For field operations, including salaries, support,
56 6 maintenance, and miscellaneous purposes, and for not more than
56 7 the following full-time equivalent positions:

56 8	.....	\$	33,261,194
56 9	.....		<u>66,670,976</u>
56 10	.....	FTEs	1,837.00

56 11 1A. As a condition of this appropriation, the department
56 12 shall make every possible effort to fill the entire number of
56 13 positions authorized by this section and, unless specifically

General Fund appropriation to the DHS for the Sexual Predator
Commitment Program.

DETAIL: This is an increase of \$497,995 and 8.00 FTE positions
compared to estimated FY 2014. The changes include:

- An increase of \$312,469 for five additional court-ordered sex offenders.
- An increase of \$185,526 to annualize the cost of the FY 2014 increase in offenders.
- An increase of 8.00 FTE positions to provide the appropriate staffing level for the increase.

General Fund appropriation to the DHS for Field Operations staff and
support.

DETAIL: This is no change in funding and an increase of 27.00 FTE
positions compared to the FY 2014 appropriation. The increase in FTE
positions is to match the FY 2014 appropriation.

Specifies that it is the intent of the General Assembly that the
Department make every possible effort to fill authorized vacant Field
Operations positions, that the Department is not subject to any external

56 14 provided otherwise by an applicable collective bargaining
 56 15 agreement, the department is not subject to any approval
 56 16 requirement external to the department to fill a field
 56 17 operations vacancy within the number of full-time equivalent
 56 18 positions authorized by this section. The department shall
 56 19 report on the first of each month to the chairpersons and
 56 20 ranking members of the appropriations committees of the senate
 56 21 and house of representatives, and the persons designated by
 56 22 this Act for submission of reports concerning the status of
 56 23 filling the positions.

Department approval within the number of FTE equivalent positions authorized for Field Operations, and that the Department must report to the Chairpersons and Ranking Members of the Appropriations Committees on the first of each month.

56 24 2. Priority in filling full-time equivalent positions
 56 25 shall be given to those positions related to child protection
 56 26 services and eligibility determination for low-income families.
 56 27 Sec. 29. 2013 Iowa Acts, chapter 138, section 157, is
 56 28 amended to read as follows:

Requires priority to be given to filling positions related to child protection services and eligibility determination for low-income families.

56 29 SEC. 157. GENERAL ADMINISTRATION. There is appropriated
 56 30 from the general fund of the state to the department of human
 56 31 services for the fiscal year beginning July 1, 2014, and ending
 56 32 June 30, 2015, the following amount, or so much thereof as is
 56 33 necessary, to be used for the purpose designated:

General Fund appropriation for General Administration.

56 34 For general administration, including salaries, support,
 56 35 maintenance, and miscellaneous purposes, and for not more than
 57 1 the following full-time equivalent positions:
 57 2 \$ 8,152,386
 57 3 16,304.602
 57 4 FTEs 309.00

DETAIL: This is a decrease of \$25,000 and 21.06 FTE positions compared to estimated FY 2014. The changes include:

- A decrease of \$25,000 due to the elimination of the Prevention of Disabilities Council summit.
- A decrease of 21.06 FTE positions to match the FY 2014 appropriation.

57 5 1. Of the funds appropriated in this section, ~~\$31,772~~
 57 6 \$38,543 is allocated for the prevention of disabilities policy
 57 7 council established in section 225B.3.

Allocates \$38,543 for the Prevention of Disabilities Policy Council.

DETAIL: This is a reduction of \$25,000 compared to the FY 2014 allocation due to the elimination of an FY 2014 one-time conference expenditure.

57 8 2A. The department shall report at least monthly to the
 57 9 legislative services agency concerning the department's
 57 10 operational and program expenditures.

Requires the DHS to submit monthly expenditure reports to the LSA.

57 11 3. Of the funds appropriated in this section, ~~\$66,150~~
 57 12 \$132,300 shall be used to continue the contract for the
 57 13 provision of a program to provide technical assistance,
 57 14 support, and consultation to providers of habilitation services
 57 15 and home and community-based services waiver services for
 57 16 adults with disabilities under the medical assistance program.

Allocates \$132,300 to continue the existing contract for technical assistance for providers of habilitation services under the Home and Community-Based Services (HCBS) Waiver Program.

DETAIL: This is no change compared to the FY 2014 allocation.

57 17 4. Of the funds appropriated in this section, ~~\$25,000~~
 57 18 \$50,000 is transferred to the Iowa finance authority to be

Transfers \$50,000 to the Iowa Finance Authority (IFA) to be used for support of the Council on Homelessness.

57 19 used for administrative support of the council on homelessness
 57 20 established in section 16.100A and for the council to fulfill
 57 21 its duties in addressing and reducing homelessness in the
 57 22 state.

DETAIL: This is no change compared to the FY 2014 allocation.

57 23 5A. Of the funds appropriated in this section \$250,000 is
 57 24 transferred to the department of inspections and appeals to be
 57 25 used to implement a new mental health advocate division in the
 57 26 department in accordance with this 2014 Act.

Allocates \$250,000 to be transferred to the DIA to implement a new mental health advocate division.

DETAIL: This is a new allocation for FY 2015.

57 27 Sec. 30. 2013 Iowa Acts, chapter 138, section 158, is
 57 28 amended to read as follows:
 57 29 SEC. 158. VOLUNTEERS. There is appropriated from the
 57 30 general fund of the state to the department of human services
 57 31 for the fiscal year beginning July 1, 2014, and ending June 30,
 57 32 2015, the following amount, or so much thereof as is necessary,
 57 33 to be used for the purpose designated:
 57 34 For development and coordination of volunteer services:
 57 35 \$ 42,330
 58 1 84,686

General Fund appropriation to the DHS for the development and coordination of the Volunteer Services Program.

DETAIL: This is no change compared to estimated net FY 2014.

58 2 Sec. 31. 2013 Iowa Acts, chapter 138, section 159,
 58 3 subsection 1, paragraph a, subparagraph (1), is amended to read
 58 4 as follows:
 58 5 (1) For the fiscal year beginning July 1, 2014, the total
 58 6 state funding amount for the nursing facility budget shall not
 58 7 exceed ~~\$268,712,514~~ \$282,878,824.

Caps nursing facility reimbursements at \$282,878,824 and requires the DHS to adjust the inflation factor in the case-mix reimbursement rate if expenditures exceed the cap.

58 8 Sec. 32. 2013 Iowa Acts, chapter 138, section 159,
 58 9 subsection 1, paragraph b, is amended to read as follows:
 58 10 b. (1) For the fiscal year beginning July 1, 2014,
 58 11 the department shall continue the pharmacy dispensing fee
 58 12 reimbursement at \$10.12 per prescription until a cost of
 58 13 dispensing survey is completed. The actual dispensing fee
 58 14 shall be determined by a cost of dispensing survey performed
 58 15 by the department and required to be completed by all medical
 58 16 assistance program participating pharmacies every two years
 58 17 beginning in FY 2014-2015.

Requires a reimbursement rate of \$10.12 per prescription until a cost of dispensing survey is completed for pharmacist services for FY 2015. The fee is to be determined by a dispensing survey.

DETAIL: This is no change compared to FY 2014 rate.

58 18 (2) The department shall utilize an average acquisition
 58 19 cost reimbursement methodology for all drugs covered under the
 58 20 medical assistance program in accordance with 2012 Iowa Acts,
 58 21 chapter 1133, section 33.

Requires the DHS to continue an Average Acquisition Cost (AAC) reimbursement methodology for all drugs covered under the Medicaid Program. The methodology is to utilize a survey of pharmacy invoices to determine the AAC. The Department is to provide a process for pharmacies to address average acquisition cost prices that are not reflective of the actual drug cost.

58 22 (3) Notwithstanding subparagraph (2), if the centers for

Specifies that if CMS implements an aggregate federal upper payment

58 23 Medicare and Medicaid services of the United States department
 58 24 of health and human services (CMS) requires, as a condition
 58 25 of federal Medicaid funding, that the department implement an
 58 26 aggregate federal upper limit (FUL) for drug reimbursement
 58 27 based on the average manufacturer's price (AMP), the department
 58 28 may utilize a reimbursement methodology for all drugs covered
 58 29 under the Medicaid program based on the national average drug
 58 30 acquisition cost (NADAC) methodology published by CMS, in order
 58 31 to assure compliance with the aggregate FUL, minimize outcomes
 58 32 of drug reimbursements below pharmacy acquisition costs, limit
 58 33 administrative costs, and minimize any change in the aggregate
 58 34 reimbursement for drugs. The department may adopt emergency
 58 35 rules to implement this subparagraph.

limit for drug reimbursement, the DHS may use a reimbursement methodology based on the National Average Drug Acquisition Cost (NADAC).

59 1 Sec. 33. 2013 Iowa Acts, chapter 138, section 159,
 59 2 subsection 1, paragraph n, is amended to read as follows:
 59 3 n. For the fiscal year beginning July 1, 2014, the
 59 4 reimbursement rates for inpatient mental health services
 59 5 provided at hospitals shall remain at the rates in effect
 59 6 on June 30, 2014, subject to Medicaid program upper payment
 59 7 limit rules; ~~community mental health centers and providers~~
 59 8 ~~of mental health services to county residents pursuant to a~~
 59 9 ~~waiver approved under section 225C.7, subsection 3, shall be~~
 59 10 ~~reimbursed at 100 percent of the reasonable costs for the~~
 59 11 ~~provision of services to recipients of medical assistance; and~~
 59 12 psychiatrists shall be reimbursed at the medical assistance
 59 13 program fee for service rate.

Strikes Community Mental Health Centers (CMHC) from the reimbursement paragraph. The paragraph is replaced in the next Section.

59 14 Sec. 34. 2013 Iowa Acts, chapter 138, section 159,
 59 15 subsection 1, is amended by adding the following new paragraph:
 59 16 NEW PARAGRAPH 0o. For the fiscal year beginning July
 59 17 1, 2014, community mental health centers may choose to be
 59 18 reimbursed for the services provided to recipients of medical
 59 19 assistance through either of the following options:
 59 20 (1) For 100 percent of the reasonable costs of the services.
 59 21 (2) In accordance with the alternative reimbursement rate
 59 22 methodology established by the medical assistance program's
 59 23 managed care contractor for mental health services and approved
 59 24 by the department of human services.

Allows Community Mental Health Centers (CMHC) to choose between two different methodologies for reimbursement. The first option allows CMHCs to be reimbursed at 100.00% of reasonable cost of service, and uses a cost settlement methodology. The second option is based on a fee schedule methodology through Magellan.

59 25 Sec. 35. 2013 Iowa Acts, chapter 138, section 159,
 59 26 subsection 6, is amended to read as follows:
 59 27 6. For the fiscal year beginning July 1, 2014, the
 59 28 reimbursement rates for family-centered service providers,
 59 29 family foster care service providers, ~~group foster care service~~
 59 30 ~~providers~~, and the resource family recruitment and retention
 59 31 contractor shall remain at the rates in effect on June 30,
 59 32 2014.

59 33 Sec. 36. 2013 Iowa Acts, chapter 138, section 159, is
 59 34 amended by adding the following new subsection:
 59 35 NEW SUBSECTION 6A. a. For the purposes of this
 60 1 subsection, "combined reimbursement rate" means the combined
 60 2 service and maintenance reimbursement rate for a service level
 60 3 under the department's reimbursement methodology.
 60 4 b. For the fiscal year beginning July 1, 2014, the combined
 60 5 reimbursement rate for the department's group foster care
 60 6 service levels, community - D1, comprehensive - D2, and
 60 7 enhanced - D3, shall be 80 percent of the patient-day weighted
 60 8 statewide average cost of group foster care cost reports
 60 9 that were verified and used for the foster group care rate
 60 10 methodology workgroup final report submitted to the general
 60 11 assembly in December 2012, as adjusted for utilization in the
 60 12 fiscal year beginning July 1, 2014.

Provides for group foster care providers to receive the patient-day weighted statewide 80.00% average equalization rate increase based on the Foster Group Care Rate Methodology Workgroup recommendations from December 2012, as adjusted for utilization in FY 2015.

60 13 Sec. 37. 2013 Iowa Acts, chapter 138, section 159,
 60 14 subsection 9, is amended to read as follows:
 60 15 9. For the fiscal year beginning July 1, ~~2013~~ 2014, the
 60 16 department shall calculate reimbursement rates for intermediate
 60 17 care facilities for persons with intellectual disabilities at
 60 18 the 80th percentile. Beginning July 1, ~~2013~~ 2014, the rate
 60 19 calculation methodology shall utilize the consumer price index
 60 20 inflation factor applicable to the fiscal year beginning July
 60 21 1, 2013.

Requires the DHS to calculate reimbursement rates for Intermediate Care Facilities for persons with Intellectual Disabilities (ICF/IDs) at the 80th percentile for FY 2015 using the Consumer Price Index (CPI) inflation factor applicable for FY 2014.

60 22 Sec. 38. 2013 Iowa Acts, chapter 138, section 160, is
 60 23 amended to read as follows:
 60 24 SEC. 160. EMERGENCY RULES.
 60 25 1. If specifically authorized by a provision of this
 60 26 division of this Act for the fiscal year beginning July 1, ~~2013~~
 60 27 2014, the department of human services or the mental health
 60 28 and disability services commission may adopt administrative
 60 29 rules under section 17A.4, subsection 3, and section 17A.5,
 60 30 subsection 2, paragraph "b", to implement the provisions and
 60 31 the rules shall become effective immediately upon filing or
 60 32 on a later effective date specified in the rules, unless the
 60 33 effective date is delayed by the administrative rules review
 60 34 committee. Any rules adopted in accordance with this section
 60 35 shall not take effect before the rules are reviewed by the
 61 1 administrative rules review committee. The delay authority
 61 2 provided to the administrative rules review committee under
 61 3 section 17A.4, subsection 7, and section 17A.8, subsection 9,
 61 4 shall be applicable to a delay imposed under this section;
 61 5 ~~notwithstanding a provision in those sections making them~~
 61 6 ~~inapplicable to section 17A.5, subsection 2, paragraph "b".~~
 61 7 Any rules adopted in accordance with the provisions of this
 61 8 section shall also be published as notice of intended action

Permits the DHS and the Mental Health and Disability Services Commission to adopt emergency rules when authorized.

61 9 as provided in section 17A.4.

61 10 2. If during the fiscal year beginning July 1, ~~2013~~
61 11 2014, the department of human services is adopting rules in
61 12 accordance with this section or as otherwise directed or
61 13 authorized by state law, and the rules will result in an
61 14 expenditure increase beyond the amount anticipated in the
61 15 budget process or if the expenditure was not addressed in
61 16 the budget process for the fiscal year, the department shall
61 17 notify the persons designated by this division of this Act for
61 18 submission of reports, the chairpersons and ranking members
61 19 of the committees on appropriations, and the department of
61 20 management concerning the rules and the expenditure increase.
61 21 The notification shall be provided at least 30 calendar days
61 22 prior to the date notice of the rules is submitted to the
61 23 administrative rules coordinator and the administrative code
61 24 editor.

Requires the DHS to report to the Chairpersons and Ranking Members of the Appropriations Committees, the LSA, and the DOM at least 30 days prior to submitting rules that have a fiscal impact that was not addressed in the budget process.

61 25 Sec. 39. 2013 Iowa Acts, chapter 138, section 161, is
61 26 amended to read as follows:
61 27 SEC. 161. REPORTS. Any reports or other information
61 28 required to be compiled and submitted under this Act during
61 29 the fiscal year beginning July 1, ~~2013~~ 2014, shall be
61 30 submitted to the chairpersons and ranking members of the joint
61 31 appropriations subcommittee on health and human services, the
61 32 legislative services agency, and the legislative caucus staffs
61 33 on or before the dates specified for submission of the reports
61 34 or information.

Requires any reports required by this Bill to be submitted to the Chairpersons and Ranking Members of the Health and Human Services Appropriations Subcommittee, Legislative Caucus Staffs, and the LSA.

61 35 DIVISION VI
62 1 HEALTH CARE ACCOUNTS AND FUNDS

62 2 Sec. 40. 2013 Iowa Acts, chapter 138, section 162, is
62 3 amended to read as follows:
62 4 SEC. 162. PHARMACEUTICAL SETTLEMENT ACCOUNT. There is
62 5 appropriated from the pharmaceutical settlement account created
62 6 in section 249A.33 to the department of human services for the
62 7 fiscal year beginning July 1, 2014, and ending June 30, 2015,
62 8 the following amount, or so much thereof as is necessary, to be
62 9 used for the purpose designated:
62 10 Notwithstanding any provision of law to the contrary, to
62 11 supplement the appropriations made in this Act for medical
62 12 contracts under the medical assistance program for the fiscal
62 13 year beginning July 1, ~~2013~~ 2014, and ending June 30, ~~2014~~
62 14 2015:
62 15 \$ 3,325,000
62 16 5,467,564

Pharmaceutical Settlement Account appropriation to the DHS for medical contracts in Medicaid.

DETAIL: This is an decrease of \$1,182,436 compared to estimated FY 2014.

62 17 Sec. 41. 2013 Iowa Acts, chapter 138, section 163, is
 62 18 amended to read as follows:
 62 19 SEC. 163. QUALITY ASSURANCE TRUST FUND — DEPARTMENT OF
 62 20 HUMAN SERVICES. Notwithstanding any provision to the contrary
 62 21 and subject to the availability of funds, there is appropriated
 62 22 from the quality assurance trust fund created in section
 62 23 249L.4 to the department of human services for the fiscal year
 62 24 beginning July 1, 2014, and ending June 30, 2015, the following
 62 25 amounts, or so much thereof as is necessary, for the purposes
 62 26 designated:
 62 27 To supplement the appropriation made in this Act from the
 62 28 general fund of the state to the department of human services
 62 29 for medical assistance for the same fiscal year:
 62 30 \$ 28,788,917
 62 31 29,195,653

Quality Assurance Trust Fund appropriation to supplement Nursing Facilities under the Medicaid Program.

 DETAIL: This is an increase of \$406,736 compared to estimated FY 2014. The increase is due to more revenue available in the Fund.

62 32 DIVISION VII
 62 33 PERSONNEL SETTLEMENT AGREEMENTS
 62 34 Sec. 42. PERSONNEL SETTLEMENT AGREEMENT PAYMENTS. As a
 62 35 condition of the appropriations in this 2014 Act, the moneys
 63 1 appropriated and any other moneys available shall not be used
 63 2 for payment of a personnel settlement agreement that contains a
 63 3 confidentiality provision intended to prevent public disclosure
 63 4 of the agreement or any terms of the agreement.

Specifies that no money appropriated in this Bill, or any other funds available, are to be used for the payment of personnel settlement agreements that contain confidentiality provisions intended to prevent public disclosure of the agreement or any terms.

63 5 DIVISION VIII
 63 6 PRIOR YEAR APPROPRIATIONS
 63 7 MEDICAL RESIDENCY

63 8 Sec. 43. 2013 Iowa Acts, chapter 138, section 3, subsection
 63 9 4, paragraph r, is amended to read as follows:
 63 10 r. Of the funds appropriated in this subsection, \$2,000,000
 63 11 shall be deposited in the medical residency training account
 63 12 created in section 135.175, subsection 5, paragraph "a", and
 63 13 is appropriated from the account to the department of public
 63 14 health to be used for the purposes of the medical residency
 63 15 training state matching grants program as specified in section
 63 16 135.176. However, notwithstanding any provision to the
 63 17 contrary in section 135.176, priority in the awarding of grants
 63 18 shall be given to the development of new medical residency
 63 19 positions, psychiatric residency positions, and family practice
 63 20 residency positions.

Allows the the DPH to use the medical residency training account for the purposes of the Medical Residency Training Program. Specifies that grants for new medical residency positions, psychiatric residency positions, and family practice positions, have priority.

63 21 CONSUMER-DIRECTED ATTENDANT CARE

63 22 Sec. 44. 2013 Iowa Acts, chapter 138, section 12, subsection
 63 23 19, paragraph a, subparagraph (6), is amended to read as
 63 24 follows:

Strikes the cost containment strategy from SF 446 that requires Consumer-Directed Attendant Care (CDAC) providers to transition to agency provided personal care services or the Consumer Choice

63 25 ~~—(6) The department shall require transition of the~~
 63 26 ~~provision by individual providers of personal care under the~~
 63 27 ~~consumer-directed attendant care option to agency-provided~~
 63 28 ~~personal care services and shall retain the consumer-choice~~
 63 29 ~~option for those individuals able and desiring to self-direct~~
 63 30 ~~services.~~

Option (CCO).

63 31 AUTISM

63 32 Sec. 45. 2013 Iowa Acts, chapter 138, section 13, subsection
 63 33 10, is amended to read as follows:

Permits the DHS to carryforward any unspent funding from the Autism Treatment Program to FY 2015. It is anticipated there will be \$1,000,000 in carryforward.

63 34 10. Of the funds appropriated in this section, \$2,000,000
 63 35 shall be used for the autism support program created in
 64 1 chapter 225D, as enacted in this Act, beginning January 1,
 64 2 2014. Notwithstanding section 8.33, moneys allocated in this
 64 3 subsection that remain unencumbered or unobligated at the close
 64 4 of the fiscal year shall not revert but shall remain available
 64 5 for expenditure for the purposes designated until the close of
 64 6 the succeeding fiscal year.

64 7 FOSTER CARE RESPITE

64 8 Sec. 46. 2013 Iowa Acts, chapter 138, section 18, subsection
 64 9 26, is amended to read as follows:

Allocates \$25,000 for the Iowa Foster Care Respite Pilot Program to continue and expand operations.

64 10 26. Of the funds appropriated in this section, at least
 64 11 \$25,000 shall be used to continue and to expand the foster
 64 12 care respite pilot program in which postsecondary students in
 64 13 social work and other human services-related programs receive
 64 14 experience by assisting family foster care providers with
 64 15 respite and other support. Notwithstanding section 8.33,
 64 16 moneys allocated in this subsection that remain unencumbered or
 64 17 unobligated at the close of the fiscal year shall not revert
 64 18 but shall remain available for expenditure for the purposes
 64 19 designated until the close of the succeeding fiscal year.

DETAIL: Permits the DHS to carryforward any unspent funding from the Iowa Foster Care Respite Pilot Program.

64 20 COMMUNITY MENTAL HEALTH CENTER REIMBURSEMENT

64 21 Sec. 47. 2013 Iowa Acts, chapter 138, section 29, subsection
 64 22 1, paragraph n, is amended to read as follows:

Strikes Community Mental Health Centers from the reimbursement paragraph for FY 2014.

64 23 n. For the fiscal year beginning July 1, 2013, the
 64 24 reimbursement rates for inpatient mental health services
 64 25 provided at hospitals shall be increased by 1 percent over the
 64 26 rates in effect on June 30, 2013, subject to Medicaid program
 64 27 upper payment limit rules; ~~community mental health centers~~
 64 28 ~~and providers of mental health services to county residents~~
 64 29 ~~pursuant to a waiver approved under section 225C.7, subsection~~

64 30 ~~3, shall be reimbursed at 100 percent of the reasonable~~
 64 31 ~~costs for the provision of services to recipients of medical~~
 64 32 ~~assistance~~; and psychiatrists shall be reimbursed at the
 64 33 medical assistance program fee-for-service rate.

64 34 Sec. 48. 2013 Iowa Acts, chapter 138, section 29, subsection
 64 35 1, is amended by adding the following new paragraph:
 65 1 NEW PARAGRAPH 0o. For the fiscal year beginning July
 65 2 1, 2013, community mental health centers may choose to be
 65 3 reimbursed for the services provided to recipients of medical
 65 4 assistance through either of the following options:
 65 5 (1) For 100 percent of the reasonable costs of the services.
 65 6 (2) In accordance with the alternative reimbursement rate
 65 7 methodology established by the medical assistance program's
 65 8 managed care contractor for mental health services and approved
 65 9 by the department of human services.

Allows CMHCs to choose between two different methodologies for reimbursement beginning in FY 2014. The first option allows CMHCs to be reimbursed at 100.00% of reasonable cost of service, and uses a cost settlement methodology. The second option is based on a fee schedule methodology through Magellan.

65 10 Sec. 49. EMERGENCY RULES. The department of human services
 65 11 may adopt emergency rules under section 17A.4, subsection 3,
 65 12 and section 17A.5, subsection 2, paragraph "b", to implement
 65 13 the section of this division of this Act amending 2013 Iowa
 65 14 Acts, chapter 138, section 29, subsection 1, paragraph "n" and
 65 15 enacting "0o", and the rules shall be effective immediately
 65 16 upon filing unless a later date is specified in the rules. Any
 65 17 rules adopted in accordance with this section shall also be
 65 18 published as a notice of intended action as provided in section
 65 19 17A.4.

Allows the DHS to adopt emergency rules to implement the changes in reimbursement for CMHCs.

65 20 Sec. 50. EFFECTIVE UPON ENACTMENT. This division of this
 65 21 Act, being deemed of immediate importance, takes effect upon
 65 22 enactment.

This Division making changes to the Medical Residency Program, the Consumer-Directed Attendant Care (CDAC) Program under Medicaid, the Autism Program, the Foster Care Respite Program, and Community Mental Health Center (CMHC) reimbursement takes effect upon enactment.

65 23 Sec. 51. RETROACTIVE APPLICABILITY. The section of this
 65 24 division of this Act amending 2013 Iowa Acts, chapter 138,
 65 25 section 12, subsection 19, paragraph "a", subparagraph (6),
 65 26 applies retroactively to July 1, 2013.

The Section relating to CDAC is retroactive to July 1, 2013.

65 27 Sec. 52. RETROACTIVE APPLICABILITY. The sections of this
 65 28 division of this Act amending 2013 Iowa Acts, chapter 138,
 65 29 section 29, subsection 1, paragraph "n" and enacting new
 65 30 paragraph "0o", apply retroactively to July 1, 2013.

The Sections relating to CMHC reimbursement are retroactive to July 1, 2013.

65 31 DIVISION IX
 65 32 MENTAL HEALTH AND DISABILITY SERVICES
 65 33 Sec. 53. MENTAL HEALTH AND DISABILITY SERVICES —
 65 34 EQUALIZATION PAYMENTS TRANSFER AND APPROPRIATION.

65 35 1. There is transferred from the general fund of the
 66 1 state to the department of human services for the fiscal year
 66 2 beginning July 1, 2014, and ending June 30, 2015, the following
 66 3 amount, or so much thereof as is necessary, to be used for the
 66 4 purposes designated:
 66 5 For deposit in the property tax relief fund created in
 66 6 section 426B.1, for distribution as provided in this section:
 66 7 \$ 30,555,823

Provides an FY 2015 General Fund appropriation to the Property Tax Relief Fund for Mental Health and Disability Services equalization payments to counties.

DETAIL: This is an increase of \$735,345 compared to estimate FY 2014.

66 8 2. The moneys credited to the property tax relief fund in
 66 9 accordance with this section are appropriated to the department
 66 10 of human services for distribution of equalization payments for
 66 11 counties in the amounts specified in section 426B.3, subsection
 66 12 4, for the fiscal year beginning July 1, 2014. If the county
 66 13 is part of a region that has been approved by the department in
 66 14 accordance with section 331.389, to commence partial or full
 66 15 operations, the county's equalization payment shall be remitted
 66 16 to the region for expenditure as approved by the region's
 66 17 governing board.

Specifies the moneys credited to the Property Tax Relief Fund are appropriated to the DHS to make an equalization payment to the counties. Funds are to be distributed based on the \$47.28 equalization plan enacted in SF 2315 (FY 2013 Adult Mental Health and Disability Services System Redesign Act).

66 18 3. a. For the purposes of this subsection, "payment
 66 19 obligation" means an outstanding obligation for payment to
 66 20 the department of human services for the undisputed cost of
 66 21 services provided under the medical assistance program prior
 66 22 to July 1, 2012, or for the undisputed cost of non-Medicaid
 66 23 services provided prior to July 1, 2013.

Defines "payment obligation" as an outstanding obligation to the DHS related to Medicaid services provided prior to July 1, 2012, or non-Medicaid services provided prior to July 1, 2013.

66 24 b. Unless a county has entered into an agreement as provided
 66 25 in paragraph "c", if a county receiving an equalization payment
 66 26 under this section has a payment obligation, the county shall
 66 27 remit to the department any unpaid portion of the payment
 66 28 obligation prior to June 30, 2015, from moneys available to the
 66 29 county that meet federal match requirements for the medical
 66 30 assistance program and for the child enrollment contingency
 66 31 fund under the federal Children's Health Insurance Program
 66 32 Reauthorization Act of 2009.

Specifies that if a county receiving an equalization payment has an outstanding debt to the DHS the county is required to remit that obligation to the Department by June 30, 2015.

66 33 c. A county that has not paid the county's payment
 66 34 obligation in full as provided in paragraph "b" shall enter
 66 35 into an agreement with the department for remittance of
 67 1 any unpaid portion of the county's payment obligation. An
 67 2 agreement entered into under this lettered paragraph shall
 67 3 provide for remittance of any unpaid portion by the end of
 67 4 the fiscal year beginning July 1, 2014. The equalization
 67 5 payment for a county subject to this lettered paragraph shall
 67 6 be remitted as provided by the county's agreement with the
 67 7 department.

Specifies that any county that has not paid its outstanding debt to the DHS is required to enter into an agreement with the DHS for the remittance of any unpaid portion by the end of FY 2015.

67 8 d. The equalization payment for a county that is not subject
67 9 to paragraph "c" shall be remitted on or before July 15, 2014.

Requires equalization payments to the county that are not subject to the repayment agreement above to be made by July 15, 2014.

67 10 Sec. 54. STATE PAYMENT PROGRAM REMITTANCE APPROPRIATION.

67 11 The moneys transferred to the property tax relief fund for the
67 12 fiscal year beginning July 1, 2014, from the federal social
67 13 services block grant pursuant to 2013 Iowa Acts, chapter 136,
67 14 section 11, subsection 3, paragraph "e", and from the federal
67 15 temporary assistance for needy families block grant, totaling
67 16 at least \$11,774,275, are appropriated to the department of
67 17 human services for the fiscal year beginning July 1, 2014, to
67 18 be used for distribution of state payment program remittances
67 19 to counties for the fiscal year in accordance with this
67 20 section. The state payment program remittance shall be an
67 21 amount equal to the amount paid to a county of residence under
67 22 the program for state case services known as the state payment
67 23 program, implemented pursuant to section 331.440, subsection
67 24 5, Code 2013, during the most recently available twelve-month
67 25 period.

Allocates \$11,774,275 in funding that was previously appropriated to the State Payment Program to counties in the same amount counties received over the previous 12 months.

DETAIL: The State Payment Program was to pay for individuals without a county of legal settlement. County of legal settlement has been eliminated and payment is now based on county of residency.

67 26 Sec. 55. VOCATIONAL REHABILITATION SERVICES —
67 27 EMPLOYMENT. The department of human services and the division
67 28 of vocational rehabilitation services of the department of
67 29 education shall jointly develop protocols and program models to
67 30 integrate the employment-related services and other supports
67 31 provided to persons with disabilities through federal match
67 32 funding administered by the department and the division.
67 33 The department and the division shall report on or before
67 34 December 15, 2014, to the individuals identified in this Act
67 35 for submission of reports and to the chairpersons and ranking
68 1 members of the joint appropriations subcommittee on education
68 2 on the expenditure of such funding in the previous fiscal year
68 3 along with findings and recommendations.

Requires the DHS and the Department of Education Vocational Rehabilitation Division to jointly develop protocols and program models to integrate employment-related services for persons with disabilities through federal matching Vocational Rehabilitation funds. The two agencies are to report to the Chairpersons and Ranking Members of the Health and Human Services Appropriations Subcommittee, Legislative Caucus Staffs, and the LSA on findings and recommendations by December 15, 2014.

68 4 Sec. 56. BED AVAILABILITY TRACKING SYSTEM PROPOSAL. The
68 5 department of human services shall continue and expand upon
68 6 the study regarding the possible development of a psychiatric
68 7 and substance-related disorder treatment hospital bed tracking
68 8 system as documented in its report submitted in December
68 9 2013 pursuant to 2013 Iowa Acts, chapter 130, section 56.
68 10 In addition to representatives of magistrates and the Iowa
68 11 hospital association, the expanded study shall include
68 12 representatives of the regional mental health and disability
68 13 services system, state mental health institutes, and the Iowa
68 14 association of community providers. The study shall identify
68 15 options for implementing a bed tracking system in the fiscal
68 16 year beginning July 1, 2015, and include a detailed proposal

Requires the DHS to expand on the study regarding a hospital bed tracking system for psychiatric and substance-related placements. The new study is to include regional Mental Health and Disability Services representatives and the Iowa Association of Community providers. The DHS is to submit the updated proposal to the Chairpersons and Ranking Members of the Health and Human Services Appropriations Subcommittee, Legislative Caucus Staffs, and the LSA by December 15, 2014.

68 17 for the option preferred by the study group. The content of
 68 18 the detailed proposal shall include a budget, identification
 68 19 of how bed availability and related data would be entered
 68 20 into the system and verified, how privacy information would
 68 21 be protected, preferred options and rationales for addressing
 68 22 implementation issues, a preferred administrative structure,
 68 23 and other operational provisions. The results of the expanded
 68 24 study shall be submitted on or before December 15, 2014, along
 68 25 with findings and recommendations to the governor and the
 68 26 persons designated by this Act for submission of reports.

68 27 Sec. 57. STUDY OF COMMUNITY-BASED SERVICE OPTIONS FOR
 68 28 PERSONS WITH SERIOUS MENTAL ILLNESS. The department of
 68 29 human services shall engage representatives of the department
 68 30 of inspections and appeals, the regional mental health and
 68 31 disability services system, the Iowa association of community
 68 32 providers and other service providers, and other stakeholders
 68 33 to study community-based placement options for persons with
 68 34 serious mental illness to divert them from or end their need
 68 35 for an institutional placement. The study shall consider
 69 1 both services currently available and services that should
 69 2 be developed to meet the needs of persons with serious
 69 3 mental illness. The system elements addressed by the study
 69 4 shall include but are not limited to regulatory, liability,
 69 5 and funding issues, and other barriers to maintaining
 69 6 current community-based services options and developing new
 69 7 options. The results of the study, including findings and
 69 8 recommendations shall be reported on or before December 15,
 69 9 2014, to the governor and the persons designated by this Act
 69 10 for submission of reports.

Requires the DHS to convene a group to study community-based placement options for persons with serious mental illness to divert them from institutional placements. The group is to look at regulations, liability, funding issues, and other barriers to developing new options. The Group must submit their findings to the Chairpersons and Ranking Members of the Health and Human Services Appropriations Subcommittee, Legislative Caucus Staffs, and the LSA by December 15, 2014.

69 11 Sec. 58. Section 331.388, subsection 3, Code 2014, is
 69 12 amended to read as follows:
 69 13 3. "Population" means, as of July 1 of the fiscal year
 69 14 preceding the fiscal year in which the population figure is
 69 15 applied, the population shown by the latest preceding certified
 69 16 federal census or the latest applicable population estimate
 69 17 issued by the United States census bureau, whichever is most
 69 18 recent.

CODE: Amends the population definition used to distribute the Mental Health and Disability Services equalization payment. The estimate that will be used is the one from the preceding fiscal year.

69 19 Sec. 59. Section 331.391, Code 2014, is amended by adding
 69 20 the following new subsection:
 69 21 NEW SUBSECTION 4. If a region is meeting the financial
 69 22 obligations for implementation of its regional service system
 69 23 management plan for a fiscal year and residual funding is
 69 24 anticipated, the regional administrator shall reserve an
 69 25 adequate amount for cash flow of expenditure obligations in
 69 26 the next fiscal year. The cash flow amount shall not exceed

CODE: Requires a region to reserve up to 25.00% of funds needed to meet projected expenditures if the region is meeting all obligations of the management plan. Any residual funding remaining is to be used to expand the regions core services.

69 27 twenty-five percent of the gross expenditures budgeted for the
 69 28 combined account or for all regional accounts for the fiscal
 69 29 year in progress. Residual funding remaining after the cash
 69 30 flow amount is reserved shall be used to expand the region's
 69 31 core services under section 331.397, subsection 4, and then to
 69 32 make additional core service domains available in the region as
 69 33 enumerated in section 331.397, subsection 6.

69 34 Sec. 60. Section 331.397, subsection 4, paragraph d,
 69 35 unnumbered paragraph 1, Code 2014, is amended to read as
 70 1 follows:
 70 2 Support for employment or for activities leading to
 70 3 employment providing an appropriate match with an individual's
 70 4 abilities, including but not limited to all of the following:

CODE: Adds "or activities leading to employment providing an appropriate match with and individual's abilities" to the Mental Health and Disability Services Core Service Domain for employment.

70 5 Sec. 61. Section 331.424A, Code 2014, is amended by adding
 70 6 the following new subsection:
 70 7 NEW SUBSECTION 3A. An amount shall be reserved in the
 70 8 county services fund to address cash flow obligations in the
 70 9 next fiscal year. The cash flow amount shall not exceed
 70 10 twenty-five percent of the gross expenditures budgeted from the
 70 11 county services fund for the fiscal year in progress. The cash
 70 12 flow amount for a county's services fund shall be specified in
 70 13 the regional governance agreement entered into by the county
 70 14 under section 331.392.

CODE: Specifies county cash reserves are not to exceed 25.00% of gross expenditures.

70 15 Sec. 62. Section 426B.3, subsection 4, Code 2014, is amended
 70 16 to read as follows:
 70 17 4. a. For the fiscal years beginning July 1, 2013,
 70 18 ~~and July 1, 2014, and July 1, 2015~~, a county with a county
 70 19 population expenditure target amount that exceeds the amount
 70 20 of the county's base year expenditures for mental health and
 70 21 disabilities services shall receive an equalization payment for
 70 22 the difference.
 70 23 b. The equalization payments determined in accordance
 70 24 with this subsection shall be made by the department of human
 70 25 services for each fiscal year as provided in appropriations
 70 26 made from the property tax relief fund for this purpose. If
 70 27 the county is part of a region that has been approved by the
 70 28 department in accordance with section 331.389, to commence
 70 29 partial or full operations, the county's equalization payment
 70 30 shall be remitted to the region or the county, as appropriate,
 70 31 for expenditure as approved by the region's governing board or
 70 32 in accordance with the county's service management plan, as
 70 33 appropriate. The payment for a county that has been approved
 70 34 by the department to operate as an individual county region
 70 35 shall be remitted to the county for expenditure as approved by
 71 1 the county board of supervisors. For the fiscal year beginning

CODE: Extends the Mental Health and Disability Services equalization payment through FY 2016.

71 2 July 1, 2013, and succeeding fiscal years, the payment shall
 71 3 be remitted ~~on or before December 31~~ only for those counties
 71 4 approved to operate as an individual county region or to be
 71 5 part of a region. Remittance of the payment for a county
 71 6 without such approval shall be deferred until such approval is
 71 7 granted.

71 8 Sec. 63. Section 426B.3, subsection 5, paragraph b, Code
 71 9 2014, is amended to read as follows:
 71 10 b. (1) For the fiscal year beginning July 1, 2013, and
 71 11 succeeding fiscal years, the department of human services shall
 71 12 calculate a Medicaid offset amount for each county for the
 71 13 fiscal year. The department shall adopt rules in consultation
 71 14 with the county finance committee specifying the information
 71 15 to be used in calculating a Medicaid offset amount. The
 71 16 information shall include but is not limited to identification
 71 17 of the amount expended for specific services and supports that
 71 18 would otherwise be payable by the county for persons eligible
 71 19 under a county's approved service management plan but are were
 71 20 instead paid by the Iowa health and wellness plan. The amount
 71 21 calculated for a county shall be subject to review by the
 71 22 auditor of that county or subject to independent audit. The
 71 23 Medicaid offset amounts calculated for the counties are subject
 71 24 to review by the auditor of state prior to their certification.
 71 25 The Medicaid offset amounts calculated by the department for a
 71 26 county for a fiscal year are not official until certified by
 71 27 the director of human services and submitted to the governor
 71 28 and general assembly by ~~October 15~~ December 1 immediately
 71 29 following the end of the fiscal year for which the offset
 71 30 amounts were calculated.
 71 31 (2) In implementing subparagraph (1), a county's offset
 71 32 amount for the fiscal year beginning July 1, 2013, shall be
 71 33 calculated by first identifying the actual amounts expended
 71 34 from the county's services fund during the base period of July
 71 35 1, 2013, through December 31, 2013, for services and supports
 72 1 provided to persons who became eligible for the Iowa health
 72 2 and wellness plan during the implementation period of January
 72 3 1, 2014, and June 30, 2014. For purposes of calculating the
 72 4 offset amount, it shall be assumed that the expenditures for
 72 5 the same services and supports provided under the plan during
 72 6 the implementation period are equal to the amount expended by
 72 7 the county for those services and supports for the comparable
 72 8 time during the base period.

72 9 Sec. 64. 2013 Iowa Acts, chapter 136, section 11, subsection
 72 10 3, paragraph e, is amended to read as follows:
 72 11 e. To be credited to the property tax relief fund created
 72 12 in section 426B.1:

CODE: Makes various changes to the Medicaid clawback of savings due to the shift of funding from the counties to the the new Iowa Health and Wellness Plan (I-HAWP) including:

- Requires rules for the clawback to include the amount expended for specific services and supports.
- The Medicaid offset amounts calculated for the counties are subject to review by the Auditor of State prior to certification.
- The offset amount is to be certified by and submitted to the Governor and General Assembly by December 1, annually.
- Requires the offset amount certified in FY 2014 to be based on actual expenditures for the second half of the fiscal year subtracted from the actual expenditures from the first half of the fiscal year.

Amends HF 614 (FY 2014 Federal Block Grant Appropriations Act) to allow up to \$600,000 to be used by the DHS for distribution to counties for State Case Services. This continues current practice.

72 13 (1) FY 2013-2014
 72 14 \$ 7,480,233
 72 15 Of the amount allocated in this subparagraph, up to
 72 16 \$600,000 may be used by the department of human services for
 72 17 distribution to counties for state case services provided
 72 18 in prior fiscal years for persons with mental illness,
 72 19 intellectual disability, or a developmental disability in
 72 20 accordance with section 331.440, Code 2013.
 72 21 (2) FFY 2014-2015
 72 22 \$ 7,480,233
 72 23 Of the amount allocated in this subparagraph, up to
 72 24 \$600,000 may be used by the department of human services for
 72 25 distribution to counties for state case services provided for
 72 26 persons with mental illness, intellectual disability, or a
 72 27 developmental disability in accordance with section 331.440,
 72 28 Code 2013, or in accordance with a dispute resolution process
 72 29 implemented in accordance with section 331.394, subsection 5
 72 30 or 6.

72 31 DIVISION X
 72 32 FAMILY SUPPLEMENTATION

72 33 Sec. 65. Section 249A.4, subsection 10, paragraph b,
 72 34 subparagraph (6), Code 2014, is amended to read as follows:
 72 35 (6) Supplementation shall not be applicable if the
 73 1 facility's occupancy rate is less than ~~eighty~~ eighty five percent.

CODE: Lowers the nursing facility occupancy rate to 50.00% to allow families to supplement nursing facility residents for a private room.

73 2 DIVISION XI
 73 3 MISCELLANEOUS

73 4 Sec. 66. Section 217.32, Code 2014, is amended to read as
 73 5 follows:
 73 6 217.32 OFFICE SPACE IN COUNTY.
 73 7 Where the department of human services assigns personnel to
 73 8 an office located in a county for the purpose of performing in
 73 9 that county designated duties and responsibilities assigned by
 73 10 law to the department, it shall be the responsibility of the
 73 11 county to provide and maintain the necessary office space and
 73 12 office supplies and equipment for the personnel so assigned
 73 13 in the same manner as if they were employees of the county.
 73 14 The department shall at least annually, or more frequently if
 73 15 the department so elects, reimburse the county for a portion,
 73 16 designated by law, of the cost of maintaining office space and
 73 17 providing supplies and equipment as required by this section,
 73 18 and also for a similar portion of the cost of providing the
 73 19 necessary office space if in order to do so it is necessary
 73 20 for the county to lease office space outside the courthouse or
 73 21 any other building owned by the county. The portion of the

CODE: Requires the DHS to report annually to the Auditor of State, on or before November 1, detailing the charges and costs incurred by each county for office space and for providing supplies and equipment and the amounts reimbursed by the DHS. The Auditor is required to analyze the information and issue an opinion on the reasonableness of the expenditures.

73 22 foregoing costs reimbursed to the county under this section
 73 23 shall be equivalent to the proportion of those costs which
 73 24 the federal government authorizes to be paid from available
 73 25 federal funds, unless the general assembly directs otherwise
 73 26 when appropriating funds for support of the department. The
 73 27 department shall annually report to the auditor of state, on
 73 28 or before November 1, detailing for the preceding fiscal year
 73 29 the charges to and costs incurred by each county for office
 73 30 space and for providing supplies and equipment and the amounts
 73 31 reimbursed by the department in accordance with this section.
 73 32 The auditor of state shall analyze the information and publicly
 73 33 issue an opinion as to whether the charges and costs incurred
 73 34 and reimbursement amounts are reasonable, as compared to cost
 73 35 limitations and reimbursement amounts applied by the department
 74 1 to private providers, to federal cost guidelines, and to other
 74 2 standards identified by the auditor of state.

74 3 Sec. 67. Section 256I.8, subsection 3, Code 2014, is amended
 74 4 to read as follows:

74 5 3. An area board shall not be a provider of services to or
 74 6 for the area board except as authorized by a waiver granted
 74 7 by the state board. The state board shall adopt criteria
 74 8 for granting a waiver based upon cost effectiveness, service
 74 9 quality improvement or maintenance, or other appropriate basis
 74 10 identified by the state board.

74 11 DIVISION XII
 74 12 ASSET VERIFICATION

74 13 Sec. 68. MEDICAID PROGRAM — ASSET, INCOME, AND IDENTITY
 74 14 VERIFICATION. The department of human services shall contract
 74 15 with a third-party vendor to establish an electronic asset,
 74 16 income, and identity eligibility verification system for the
 74 17 purposes of determining or redetermining the eligibility of
 74 18 an individual who is an applicant for or recipient of medical
 74 19 assistance under the Medicaid state plan on the basis of
 74 20 being aged, blind, or disabled in accordance with 42 U.S.C.
 74 21 §1396w. The third-party vendor shall be able to demonstrate in
 74 22 writing its current relationships or contracts with financial
 74 23 institutions in the state and nationally. Participation by
 74 24 financial institutions in providing account balances for asset
 74 25 verification shall remain voluntary. The department of human
 74 26 services shall submit by September 1, 2014, a progress report
 74 27 to the individuals identified in this 2014 Act for submission
 74 28 of reports.

74 29 Sec. 69. EFFECTIVE UPON ENACTMENT. This division of this
 74 30 Act, being deemed of immediate importance, takes effect upon
 74 31 enactment.

CODE: Prohibits an Early Childhood Iowa Board from providing services to or for the Area Board unless a waiver is granted by the State Board. The State Board is to adopt criteria for granting waivers.

Requires the DHS to contract with a third-party vendor to establish an electronic asset, income and identity eligibility verification system for individuals that apply for Medicaid on the basis of being aged, blind, or disabled. The DHS is required to submit a progress report by September 1, 2014, to the Chairpersons and Ranking Members of the Health and Human Services Appropriations Subcommittee, Legislative Caucus Staffs, and the LSA.

FISCAL IMPACT: This change is estimated to cost the General Fund \$686,000 in FY 2015 and be budget neutral in FY 2016. Additional savings in excess of the ongoing operational costs may be realized in FY 2016 and beyond but it is difficult to estimate the number of denials due to excess income and the level of cooperation from financial institutions.

The Division creating a third-party Medicaid asset, income, and identity verification system is effective on enactment.

74 32 DIVISION XIII
 74 33 INTERDEPARTMENTAL COORDINATION — INDIVIDUALS RELEASED FROM
 74 34 CORRECTIONAL SYSTEM
 74 35 Sec. 70. INTERDEPARTMENTAL COORDINATION — INDIVIDUALS
 75 1 RELEASED FROM THE CORRECTIONAL SYSTEM.
 75 2 1. The department of human services, the department
 75 3 of public health, and the department of corrections shall
 75 4 implement an interagency collaborative effort to provide an
 75 5 integrated approach to address the medical and psychosocial
 75 6 needs of individuals upon release from a correctional facility.
 75 7 The collaboration shall provide for all of the following:
 75 8 a. Coordination between the departments of policies and
 75 9 procedures to facilitate information sharing, during the
 75 10 prerelease, transitional, and postrelease phases, including the
 75 11 development of protocols to share health and other personal
 75 12 information of an individual between departmental personnel
 75 13 involved in providing the individual's prerelease, transition,
 75 14 and postrelease services and support.
 75 15 b. Cross-disciplinary prerelease preparation that includes
 75 16 application for medical assistance, social security disability,
 75 17 and other supports for which the individual may be eligible;
 75 18 assessment of the holistic clinical and social needs of the
 75 19 individual including but not limited those relating to health
 75 20 and medical care, housing, education and training, employment
 75 21 assistance, and legal assistance; and identification of
 75 22 community-based services and providers necessary to address
 75 23 identified needs, including but not limited those necessary to
 75 24 address mental health and substance-related disorders.
 75 25 c. Transitional and postrelease interagency communication
 75 26 and coordination to ensure a more seamless transition
 75 27 of the individual to the community, ongoing linkages to
 75 28 community-based services, and continuity of care.
 75 29 2. The departments shall submit by December 15, 2014, a
 75 30 report to the individuals identified in this 2014 Act for
 75 31 submission of reports describing the details of the approach
 75 32 developed and implemented, any barriers to the development
 75 33 and implementation, any recommendations for changes in
 75 34 statute or rules to facilitate the approach, and any other
 75 35 recommendations.

Requires the DHS, the DPH, and the Department of Corrections (DOC), to implement an interagency collaborative effort to provide an integrated approach to address the medical and psychosocial needs of individuals released from correctional facilities. The Departments are to submit a report to the Chairpersons and Ranking Members of the Health and Human Services Appropriations Subcommittee, Legislative Caucus Staffs, and the LSA with the details of approaches developed and implemented, recommendations for changes to rules or statute, or any other recommendations requiring action by the General Assembly.

76 1 DIVISION XIV
 76 2 DEPARTMENTAL RESPONSIBILITY FOR MENTAL HEALTH ADVOCATES
 76 3 Sec. 71. NEW SECTION 10A.901 DEFINITIONS.
 76 4 As used in this article, unless the context otherwise
 76 5 requires:
 76 6 1. "Administrator" means the person coordinating the
 76 7 administration of the division.

CODE: Establishes a new Division of Mental Health Advocate in the DIA and specifies duties for the administrator of the office. A transition provision directs the DIA to commence organizational activities during FY 2015 as necessary to fully implement the new Division and all of the Bill's provisions on July 1, 2015.

FISCAL IMPACT: The Bill provides \$250,000 under the DHS General

76 8 2. "Division" means the mental health advocate division of
76 9 the department of inspections and appeals.
76 10 Sec. 72.NEW SECTION 10A.902 DUTIES OF ADMINISTRATOR.
76 11 The administrator shall administer the division's conduct
76 12 of the mental health advocate program as provided by section
76 13 229.19 and other applicable law. The person appointed as
76 14 administrator must meet the qualifications to be appointed as a
76 15 mental health advocate. The administrator's duties may include
76 16 but are not limited to all of the following:
76 17 1. a. Approving the appointment of persons to serve as
76 18 mental health advocates and identifying qualifications for
76 19 persons serving as mental health advocates. A mental health
76 20 advocate serving as of June 30, 2015, shall be deemed to be
76 21 qualified. The minimum qualifications for a mental health
76 22 advocate whose initial appointment commences on or after July
76 23 1, 2015, shall be a bachelor's degree from an accredited
76 24 school, college, or university in social work, counseling,
76 25 human services, health, nursing, or psychology, and one year
76 26 of experience in the provision of mental health services. A
76 27 person who is a licensed registered nurse pursuant to chapter
76 28 152 who is current with applicable continuing education
76 29 requirements shall be deemed to have met the minimum experience
76 30 requirement.
76 31 b. The administrator shall contract with the state board of
76 32 regents to employ persons appointed to serve as mental health
76 33 advocates.
76 34 2. Training persons appointed to serve as mental health
76 35 advocates.
77 1 3. Implementing procedures for the responsibilities
77 2 performed by persons appointed to serve as mental health
77 3 advocates and for reassigning advocate responsibilities based
77 4 on the location of the patient's placement or other patient
77 5 need. The court shall be notified of any reassignment. The
77 6 procedures for appointing a person to a vacant mental health
77 7 advocate position assigned to a geographic area shall require
77 8 the person appointed to the vacant position to reside within
77 9 the assigned geographic area.
77 10 4. Administering program additions and expansions,
77 11 including providing advocate services for persons with a
77 12 substance-related disorder and persons found not guilty
77 13 by reason of insanity, if such additions or expansions are
77 14 authorized and funded.
77 15 5. Developing and implementing a case weight system for use
77 16 in appointing and compensating advocates.
77 17 6. Administering case reviews and audits.
77 18 7. Implementing a uniform description of the duties
77 19 of mental health advocates, based upon the best practices
77 20 developed and promulgated by the judicial council pursuant to

Administration appropriation for FY 2015. There are currently 41 mental health advocates working across the State and it is assumed that an additional \$1,000,000 will be needed to fund mental health advocates statewide in FY 2016.

77 21 section 229.19, subsection 1, paragraph “c”.
 77 22 Sec. 73. TRANSITION.
 77 23 1. The department of inspections and appeals shall commence
 77 24 organizational activities during the fiscal year beginning July
 77 25 1, 2014, as necessary to fully implement this division and
 77 26 assume responsibility for mental health advocates as provided
 77 27 in this division and division II of this Act on July 1, 2015.
 77 28 2. If necessary for the purposes of subsection 1, the
 77 29 department of inspections and appeals may adopt emergency
 77 30 rules under section 17A.4, subsection 3, and section 17A.5,
 77 31 subsection 2, paragraph “b”, to implement the provisions of
 77 32 division II of this Act on July 1, 2015, and the rules shall
 77 33 be effective immediately upon filing unless a later date is
 77 34 specified in the rules. Any rules adopted in accordance with
 77 35 this section shall also be published as a notice of intended
 78 1 action as provided in section 17A.4.

78 2 DIVISION XV
 78 3 IMPLEMENTATION — MENTAL HEALTH ADVOCATES

78 4 Sec. 74. Section 225C.4, subsection 1, paragraph m, Code
 78 5 2014, is amended to read as follows:

78 6 m. Provide consultation and technical assistance to
 78 7 ~~patients'~~ mental health advocates appointed pursuant to
 78 8 section 229.19, in cooperation with the judicial branch and the
 78 9 department of inspections and appeals, and to the certified
 78 10 volunteer long-term care ombudsmen certified pursuant to
 78 11 section 231.45.

78 12 Sec. 75. Section 226.31, Code 2014, is amended to read as
 78 13 follows:

78 14 226.31 EXAMINATION BY COURT — NOTICE.

78 15 Before granting the order authorized in section 226.30
 78 16 the court or judge shall investigate the allegations of the
 78 17 petition and before proceeding to a hearing on the allegations
 78 18 shall require notice to be served on the attorney who
 78 19 represented the patient in any prior proceedings under sections
 78 20 229.6 to 229.15 ~~or the~~ and to any mental health advocate
 78 21 appointed for the patient under section 229.19, or in the case
 78 22 of a patient who entered the hospital voluntarily, on any
 78 23 relative, friend, or guardian of the person in question of the
 78 24 filing of the application. At the hearing the court or judge
 78 25 shall appoint a guardian ad litem for the person, if the court
 78 26 or judge deems such action necessary to protect the rights
 78 27 of the person. The guardian ad litem shall be a practicing
 78 28 attorney.

78 29 Sec. 76. Section 229.2, subsection 1, paragraph b,
 78 30 subparagraph (6), Code 2014, is amended to read as follows:

78 31 (6) Upon approval of the admission of a minor over the
 78 32 minor's objections, the juvenile court shall appoint an

CODE: Implements the new Division of Mental Health Advocates and makes conforming Code changes to shift the Advocates under the new Division beginning July 1, 2015.

78 33 individual to act as an advocate representing the interests
78 34 of the minor in the same manner as ~~an a mental health~~
78 35 advocate representing the interests of patients involuntarily
79 1 hospitalized pursuant to in accordance with section 229.19.

79 2 Sec. 77. Section 229.9A, Code 2014, is amended to read as
79 3 follows:

79 4 ~~229.9A—ADVOCATE~~ MENTAL HEALTH ADVOCATE INFORMED _____
79 5 ~~HEARINGS~~ shall direct the clerk to furnish the mental health
79 6 ~~advocate of the respondent's county of residence designated for~~
79 7 ~~the court by the department of inspections and appeals~~ with a
79 8 copy of application and any order issued pursuant to section
79 9 229.8, subsection 3. The mental health advocate designated for
79 10 the court may attend ~~the hospitalization~~ any court hearing of
79 11 ~~any involving the~~ respondent for whom the advocate has received
79 12 ~~notice of a hospitalization hearing.~~

79 13 Sec. 78. Section 229.12, subsection 2, Code 2014, is amended
79 14 to read as follows:

79 15 2. All persons not necessary for the conduct of the
79 16 proceeding shall be excluded, except that the court may admit
79 17 persons having a legitimate interest in the proceeding and
79 18 shall permit the mental health advocate ~~from the respondent's~~
79 19 ~~county of residence designated for the court by the department~~
79 20 ~~of inspections and appeals~~ to attend the hearing. Upon motion
79 21 of the county attorney, the judge may exclude the respondent
79 22 from the hearing during the testimony of any particular witness
79 23 if the judge determines that witness's testimony is likely to
79 24 cause the respondent severe emotional trauma.

79 25 Sec. 79. Section 229.14A, subsection 1, Code 2014, is
79 26 amended to read as follows:

79 27 1. With respect to a chief medical officer's report made
79 28 pursuant to section 229.14, subsection 1, paragraph "b", "c",
79 29 or "d", or any other provision of this chapter related to
79 30 involuntary commitment for which the court issues a placement
79 31 order or a transfer of placement is authorized, the court shall
79 32 provide notice to the respondent, ~~and~~ the respondent's attorney
79 33 ~~or, and any~~ mental health advocate appointed for the respondent
79 34 pursuant to section 229.19 concerning the placement order
79 35 and the respondent's right to request a placement hearing to
80 1 determine if the order for placement or transfer of placement
80 2 is appropriate.

80 3 Sec. 80. Section 229.14A, subsection 5, paragraph c, Code
80 4 2014, is amended to read as follows:

80 5 c. If the respondent's attorney has withdrawn pursuant to
80 6 ~~section 229.19~~, the court shall appoint an attorney for the
80 7 respondent in the manner described in section 229.8, subsection
80 8 1.

80 9 Sec. 81. Section 229.15, subsection 6, Code 2014, is amended
80 10 to read as follows:

80 11 6. Upon receipt of any report required or authorized by
80 12 this section the court shall furnish a copy to the patient's
80 13 attorney, ~~or alternatively~~ and to the mental health advocate
80 14 appointed ~~as required by section 229.19 for the patient~~. The
80 15 court shall examine the report and take the action thereon
80 16 which it deems appropriate. Should the court fail to receive
80 17 any report required by this section or section 229.14 at the
80 18 time the report is due, the court shall investigate the reason
80 19 for the failure to report and take whatever action may be
80 20 necessary in the matter.

80 21 Sec. 82. Section 229.19, Code 2014, is amended to read as
80 22 follows:

80 23 ~~229.19—ADVOCATES~~ MENTAL HEALTH ADVOCATES — DUTIES —
80 24 ~~—COMPENSATION—~~ STATE AND COUNTY LIABILITY .

80 25 1. a. ~~In each county with a population of three hundred~~
80 26 ~~thousand or more inhabitants the board of supervisors shall~~
80 27 ~~appoint an individual who has demonstrated by prior activities~~
80 28 ~~an informed concern for the welfare and rehabilitation of~~
80 29 ~~persons with mental illness, and who is not an officer or~~
80 30 ~~employee of the department of human services nor of any agency~~
80 31 ~~or facility providing care or treatment to persons with mental~~
80 32 ~~illness, to act as an advocate representing the interests of~~
80 33 ~~patients involuntarily hospitalized by the court, in any matter~~
80 34 ~~relating to the patients' hospitalization or treatment under~~
80 35 ~~section 229.14 or 229.15. In each county with a population of~~
81 1 ~~under three hundred thousand inhabitants, the chief judge of~~
81 2 ~~the judicial district encompassing the county shall appoint~~
81 3 ~~the advocate. For the purposes of this section, "division"~~
81 4 means the mental health advocate division of the department of
81 5 inspections and appeals.

81 6 ~~b. The court or, if the advocate is appointed by the county~~
81 7 ~~board of supervisors, the board shall assign the advocate~~
81 8 ~~appointed from a patient's county of residence to represent~~
81 9 ~~the interests of the patient. If a patient has no county of~~
81 10 ~~residence or the patient is a state case, the court or, if the~~
81 11 ~~advocate is appointed by the county board of supervisors, the~~
81 12 ~~board shall assign the advocate appointed from the county where~~
81 13 ~~the hospital or facility is located to represent the interests~~
81 14 ~~of the patient.~~

81 15 ~~c. The advocate's responsibility with respect to any patient~~
81 16 ~~shall begin at whatever time the attorney employed or appointed~~
81 17 ~~to represent that patient as respondent in hospitalization~~
81 18 ~~proceedings, conducted under sections 229.6 to 229.13, reports~~
81 19 ~~to the court that the attorney's services are no longer~~
81 20 ~~required and requests the court's approval to withdraw as~~
81 21 ~~counsel for that patient. However, if~~

81 22 b. ~~If the patient is found to be seriously mentally impaired~~
81 23 ~~at the hospitalization hearing, the attorney representing the~~

81 24 ~~patient shall automatically be relieved of responsibility in~~
81 25 ~~the case and an a mental health~~ advocate shall be assigned to
81 26 appointed for the patient at the conclusion of the hearing
81 27 ~~unless the attorney indicates an intent to continue the~~
81 28 ~~attorney's services and.~~ The court shall notify the division
81 29 of the court's finding and the division shall appoint an
81 30 advocate for the patient. The advocate's responsibility with
81 31 respect to a patient shall begin when the advocate is appointed
81 32 for the patient. The attorney representing the patient shall
81 33 automatically be relieved of responsibility at the conclusion
81 34 of the hearing unless the attorney requests to continue
81 35 representation and the court so directs ~~authorizes the attorney~~
82 1 to remain on the case. If the court directs the attorney to
82 2 remain on the case, the attorney shall ~~assume all the duties~~
82 3 ~~of an advocate~~ cooperate with the advocate appointed for the
82 4 patient. The clerk shall furnish the advocate with a copy of
82 5 the court's order approving the withdrawal or continuation of
82 6 the attorney and shall inform the patient of the name of the
82 7 patient's advocate.

82 8 ~~d. c.~~ c. With regard to each patient ~~whose interests the~~
82 9 ~~for whom a mental health~~ advocate is ~~required to represent~~
82 10 appointed pursuant to this section, the advocate's duties shall
82 11 include all of the following:

82 12 (1) To review each report submitted pursuant to sections
82 13 229.14 and 229.15.

82 14 (2) ~~If the advocate is not an attorney, to~~ To advise the
82 15 court at any time it appears that the services of an attorney
82 16 are required to properly safeguard the patient's interests.

82 17 (3) To be readily accessible to communications from the
82 18 patient and to originate communications with the patient within
82 19 five days of the patient's commitment.

82 20 (4) To visit the patient within fifteen days of the
82 21 patient's commitment and periodically thereafter.

82 22 (5) To communicate with medical personnel treating the
82 23 patient and to review the patient's medical records pursuant
82 24 to section 229.25.

82 25 (6) To file with the court and the division quarterly
82 26 reports, and additional reports as the advocate feels necessary
82 27 or as required by the ~~court~~ division, in a form prescribed by
82 28 the ~~court~~ division. The reports shall state what actions the
82 29 advocate has taken with respect to each patient and the amount
82 30 of time spent.

82 31 (7) To utilize the related best practices for the duties
82 32 identified in this paragraph ~~"d"~~ "c" developed and promulgated
82 33 by the judicial council.

82 34 ~~e. d.~~ d. ~~An~~ Subject to the availability of funding
82 35 appropriated for this purpose, a mental health advocate may
83 1 also be appointed pursuant to this section for an individual

83 2 who has been diagnosed with a co-occurring mental illness and
83 3 substance-related disorder.

83 4 2. The hospital or facility to which a patient is committed
83 5 shall grant all reasonable requests of the patient's mental
83 6 health advocate to visit the patient, to communicate with
83 7 medical personnel treating the patient, and to review the
83 8 patient's medical records pursuant to section 229.25. An
83 9 advocate shall not disseminate information from a patient's
83 10 medical records to any other person unless done for official
83 11 purposes in connection with the advocate's duties pursuant to
83 12 this chapter or when required by law.

83 13 3. ~~The court or, if the advocate is appointed by the county~~
83 14 ~~board of supervisors, the board~~ division shall prescribe
83 15 provide reasonable compensation for the services of the
83 16 advocate in accordance with section 10A.902. ~~The compensation~~
83 17 ~~shall be based upon the reports filed by the advocate with~~
83 18 ~~the court. The advocate's compensation shall be paid by the~~
83 19 ~~county in which the court is located, either on order of the~~
83 20 ~~court or, if the advocate is appointed by the county board of~~
83 21 ~~supervisors, on the direction of the board. If the advocate~~
83 22 ~~is appointed by the court, the advocate is an employee of~~
83 23 ~~the state for purposes of chapter 669. If the advocate is~~
83 24 ~~appointed by the county board of supervisors, the advocate is~~
83 25 ~~an employee of the county for purposes of chapter 670. If the~~
83 26 ~~patient or the person who is legally liable for the patient's~~
83 27 ~~support is not indigent, the board~~ division shall recover
83 28 the costs of compensating the advocate from that person. ~~If~~
83 29 ~~that person has an income level as determined pursuant to~~
83 30 ~~section 815.9 greater than one hundred percent but not more~~
83 31 ~~than one hundred fifty percent of the poverty guidelines,~~
83 32 ~~at least one hundred dollars of the advocate's compensation~~
83 33 ~~shall be recovered in the manner prescribed by the county~~
83 34 ~~board of supervisors. If that person has an income level as~~
83 35 ~~determined pursuant to section 815.9 greater than one hundred~~
84 1 ~~fifty percent of the poverty guidelines, at least two hundred~~
84 2 ~~dollars of the advocate's compensation shall be recovered in~~
84 3 ~~substantially the same manner prescribed by the county board of~~
84 4 ~~supervisors as provided in section 815.9.~~

84 5 Sec. 83. Section 229.25, subsection 1, paragraph a,
84 6 subparagraph (1), Code 2014, is amended to read as follows:

84 7 (1) The information is requested by a licensed physician,
84 8 attorney, or the mental health advocate ~~who provides~~ appointed
84 9 for the person. The requester must provide the chief medical
84 10 officer with a written waiver signed by the person about whom
84 11 the information is sought.

84 12 Sec. 84. APPOINTMENT OF MENTAL HEALTH ADVOCATES. The
84 13 persons appointed to provide mental health advocate services
84 14 under section 229.19 immediately prior to July 1, 2015, shall

84 15 be appointed as mental health advocates pursuant to section
84 16 10A.902, effective July 1, 2015.

84 17 Sec. 85. EFFECTIVE DATE. This division of this Act takes
84 18 effect July 1, 2015.

This Division implementing the new Division of Mental Health
Advocates is effective July 1, 2015.

84 19 DIVISION XVI
84 20 PRIOR AUTHORIZATION

84 21 Sec. 86. NEW SECTION 505.26 PRIOR AUTHORIZATION FOR
84 22 PRESCRIPTION DRUG BENEFITS — STANDARD PROCESS AND FORM.

CODE: The Commissioner of Insurance is required to develop a
standard form to obtain prior authorization for prescription drug benefits
under a health benefit plan by January 1, 2015. Before developing the
process and form, the Commissioner is required to hold at least one
public hearing to obtain input from interested parties. The form must
not exceed two pages in length and must be available and
transmissible in an electronic format.

84 23 1. As used in this section:

84 24 a. "Facility" means an institution providing health care
84 25 services or a health care setting, including but not limited
84 26 to hospitals and other licensed inpatient centers, ambulatory
84 27 surgical or treatment centers, skilled nursing centers,
84 28 residential treatment centers, diagnostic, laboratory, and
84 29 imaging centers, and rehabilitation and other therapeutic
84 30 health settings.

Health care providers are required to use and submit the standard prior
authorization form, beginning July 1, 2015. The standard prior
authorization process must include the capability of electronic
submissions, 180-day prior authorization approvals, substitution of
generic drugs, internet access to prior authorization requirements, such
as listing of drugs and understandable clinical criteria for authorization
and reauthorization, and an appeal process.

84 31 b. "Health benefit plan" means a policy, contract,
84 32 certificate, or agreement offered or issued by a health carrier
84 33 to provide, deliver, arrange for, pay for, or reimburse any of
84 34 the costs of health care services.

84 35 c. "Health care professional" means a physician or other
85 1 health care practitioner licensed, accredited, registered, or
85 2 certified to perform specified health care services consistent
85 3 with state law.

85 4 d. "Health care provider" means a health care professional
85 5 or a facility.

85 6 e. "Health care services" means services for the diagnosis,
85 7 prevention, treatment, cure, or relief of a health condition,
85 8 illness, injury, or disease.

85 9 f. "Health carrier" means an entity subject to the insurance
85 10 laws of this state, or subject to the jurisdiction of the
85 11 commissioner, including an insurance company offering sickness
85 12 and accident plans, a health maintenance organization, a
85 13 nonprofit health service corporation, a plan established
85 14 pursuant to chapter 509A for public employees, or any other
85 15 entity providing a plan of health insurance, health care
85 16 benefits, or health care services. "Health carrier" includes,
85 17 for purposes of this section, an organized delivery system.

85 18 g. "Pharmacy benefits manager" means the same as defined in
85 19 section 510B.1.

85 20 2. The commissioner shall develop, by rule, a standard prior
85 21 authorization process and form for use by health carriers and
85 22 pharmacy benefits managers that require prior authorization for
85 23 prescription drug benefits pursuant to a health benefit plan,

85 24 by January 1, 2015.

85 25 3. Prior to development of the standard prior authorization
85 26 process and form, the commissioner shall hold at least one
85 27 public hearing to gather input in developing the standard
85 28 process and form from interested parties.

85 29 4. The standard prior authorization process shall meet all
85 30 of the following requirements:

85 31 a. Health carriers and pharmacy benefits managers shall
85 32 allow health care providers to submit a prior authorization
85 33 request electronically.

85 34 b. Health carriers and pharmacy benefits managers shall
85 35 provide that approval of a prior authorization request shall be
86 1 valid for a minimum of one hundred eighty days.

86 2 c. Health carriers and pharmacy benefits managers shall
86 3 ensure that the prior authorization process allows a health
86 4 carrier or pharmacy benefits manager to substitute a generic
86 5 drug for a previously approved brand-name drug with the health
86 6 care provider's approval and the patient's consent.

86 7 d. Health carriers and pharmacy benefits managers shall make
86 8 the following available and accessible on their internet sites:

86 9 (1) Prior authorization requirements and restrictions,
86 10 including a list of drugs that require prior authorization.

86 11 (2) Clinical criteria that are easily understandable
86 12 to health care providers, including clinical criteria for
86 13 reauthorization of a previously approved drug after the prior
86 14 authorization period has expired.

86 15 (3) Standards for submitting and considering requests,
86 16 including evidence-based guidelines, when possible, for making
86 17 prior authorization determinations.

86 18 e. Health carriers and pharmacy benefits managers shall
86 19 provide a process for health care providers to appeal a prior
86 20 authorization determination.

86 21 5. In adopting an electronic prior authorization standard,
86 22 the commissioner shall consider national standards pertaining
86 23 to electronic prior authorization, such as those developed by
86 24 the national council for prescription drug programs.

86 25 6. The standard prior authorization form shall meet all of
86 26 the following requirements:

86 27 a. Not exceed two pages in length.

86 28 b. Be available in an electronic format.

86 29 c. Be transmissible in an electronic format.

86 30 7. Health carriers and pharmacy benefits managers shall use
86 31 and accept the standard prior authorization form beginning on
86 32 July 1, 2015. Health care providers shall use and submit the
86 33 standard prior authorization form, when prior authorization is
86 34 required by a health benefit plan, beginning on July 1, 2015.

86 35 8. a. If a health carrier or pharmacy benefits manager
87 1 fails to use or accept the standard prior authorization form

87 2 or to respond to a health care provider's request for prior
87 3 authorization of prescription drug benefits within seventy-two
87 4 hours of the health care provider's submission of the form,
87 5 the request for prior authorization shall be considered to be
87 6 approved.
87 7 b. However, if the prior authorization request is
87 8 incomplete, the health carrier or pharmacy benefits manager may
87 9 request the additional information within the seventy-two-hour
87 10 period and once the additional information is provided the
87 11 provisions of paragraph "a" shall again apply.

Summary Data

General Fund

	<u>Actual FY 2013 (1)</u>	<u>Estimated FY 2014 (2)</u>	<u>Gov Rec FY 2015 (3)</u>	<u>House Approp FY 2015 (4)</u>	<u>House Approp vs. Est 2014 (5)</u>	<u>Page and Line # (6)</u>
Health and Human Services	\$ 1,730,727,409	\$ 1,750,974,923	\$ 1,859,303,019	\$ 1,858,353,019	\$ 107,378,096	
Grand Total	<u>\$ 1,730,727,409</u>	<u>\$ 1,750,974,923</u>	<u>\$ 1,859,303,019</u>	<u>\$ 1,858,353,019</u>	<u>\$ 107,378,096</u>	

Health and Human Services General Fund

	Actual FY 2013 (1)	Estimated FY 2014 (2)	Gov Rec FY 2015 (3)	House Approp FY 2015 (4)	House Approp vs. Est 2014 (5)	Page and Line # (6)
<u>Aging, Dept. on</u>						
Aging, Dept. on						
Aging Programs	\$ 10,342,086	\$ 10,606,066	\$ 10,931,066	\$ 10,606,066	\$ 0	PG 1 LN 5
Office of Long-Term Care Resident's Advocate	0	1,021,707	929,315	821,707	-200,000	PG 3 LN 6
Total Aging, Dept. on	\$ 10,342,086	\$ 11,627,773	\$ 11,860,381	\$ 11,427,773	\$ -200,000	
<u>Public Health, Dept. of</u>						
Public Health, Dept. of						
Addictive Disorders	\$ 23,863,690	\$ 27,163,690	\$ 27,088,690	\$ 27,088,690	\$ -75,000	PG 4 LN 2
Healthy Children and Families	2,603,559	3,653,559	3,628,559	3,671,602	18,043	PG 8 LN 16
Chronic Conditions	3,905,429	5,080,692	5,040,692	5,040,692	-40,000	
Community Capacity	4,869,980	8,562,617	9,562,617	9,284,436	721,819	PG 13 LN 1
Healthy Aging	7,297,142	7,297,142	7,297,142	7,297,142	0	PG 19 LN 14
Environmental Hazards	803,870	803,870	803,870	803,870	0	PG 19 LN 21
Infectious Diseases	1,335,155	1,335,155	1,335,155	1,335,155	0	PG 19 LN 30
Public Protection	2,779,127	3,278,771	3,297,127	3,420,027	141,256	PG 20 LN 2
Resource Management	804,054	855,072	920,072	855,072	0	PG 21 LN 3
Iowa Youth Suicide Prevention	50,000	0	0	0	0	
Total Public Health, Dept. of	\$ 48,312,006	\$ 58,030,568	\$ 58,973,924	\$ 58,796,686	\$ 766,118	
<u>Veterans Affairs, Dept. of</u>						
Veterans Affairs, Department of						
General Administration	\$ 1,025,819	\$ 1,095,951	\$ 1,095,951	\$ 1,095,951	\$ 0	PG 21 LN 25
War Orphans Educational Assistance	12,416	0	0	0	0	
Vets Home Ownership Program	1,600,000	1,600,000	2,500,000	2,500,000	900,000	PG 22 LN 17
Veterans County Grants	990,000	990,000	990,000	990,000	0	PG 22 LN 24
Total Veterans Affairs, Department of	\$ 3,628,235	\$ 3,685,951	\$ 4,585,951	\$ 4,585,951	\$ 900,000	
Veterans Affairs, Dept. of						
Iowa Veterans Home	\$ 8,025,714	\$ 7,594,996	\$ 7,594,996	\$ 7,594,996	\$ 0	PG 21 LN 32
Total Veterans Affairs, Dept. of	\$ 11,653,949	\$ 11,280,947	\$ 12,180,947	\$ 12,180,947	\$ 900,000	

Health and Human Services General Fund

	Actual FY 2013 (1)	Estimated FY 2014 (2)	Gov Rec FY 2015 (3)	House Approp FY 2015 (4)	House Approp vs. Est 2014 (5)	Page and Line # (6)
Human Services, Dept. of						
Assistance						
Family Investment Program/JOBS	\$ 48,397,214	\$ 48,503,875	\$ 48,503,875	\$ 48,503,875	\$ 0	PG 30 LN 9
Medical Assistance	975,993,421	1,144,208,805	962,091,053	1,248,017,014	103,808,209	PG 33 LN 27
Medical Contracts	5,791,994	12,320,048	16,323,366	17,323,366	5,003,318	PG 35 LN 29
State Supplementary Assistance	15,450,747	16,516,858	14,121,154	14,121,154	-2,395,704	PG 37 LN 4
State Children's Health Insurance	36,806,102	36,817,261	45,877,998	45,877,998	9,060,737	PG 38 LN 1
Child Care Assistance	62,264,342	62,735,563	57,925,206	45,622,828	-17,112,735	PG 38 LN 28
Child and Family Services	81,231,561	91,329,427	91,762,511	95,664,831	4,335,404	PG 43 LN 32
Adoption Subsidy	37,743,429	40,729,282	42,580,749	42,580,749	1,851,467	PG 50 LN 35
Family Support Subsidy	1,096,784	1,093,288	1,079,739	1,079,739	-13,549	PG 51 LN 26
Conners Training	33,622	33,632	33,632	33,632	0	PG 52 LN 17
MI/MR/DD State Cases	11,150,820	0	0	0	0	
MH/DD Community Services	14,211,100	0	0	0	0	
Volunteers	84,660	84,686	84,686	84,686	0	PG 57 LN 27
MH/DD Growth Factor	74,697,893	0	0	0	0	
Juvenile CINA/Female Adjudicated Delinquent Pla	0	0	5,110,534	5,110,534	5,110,534	PG 42 LN 24
MH Property Tax Relief	81,199,911	0	0	0	0	
Mental Health Redesign	40,000,000	0	279,826,402	0	0	
MHDS Equalization	0	29,820,478	29,820,478	30,555,823	735,345	PG 65 LN 35
Food Bank Assistance	1,000,000	0	0	0	0	
Total Assistance	\$ 1,487,153,600	\$ 1,484,193,203	\$ 1,595,141,383	\$ 1,594,576,229	\$ 110,383,026	
Toledo Juvenile Home						
Toledo Juvenile Home	\$ 8,297,765	\$ 8,867,121	\$ 788,531	\$ 788,531	\$ -8,078,590	PG 41 LN 32
Eldora Training School						
Eldora Training School	\$ 10,680,143	\$ 11,268,202	\$ 11,500,098	\$ 11,500,098	\$ 231,896	PG 42 LN 6
Cherokee						
Cherokee MHI	\$ 5,535,738	\$ 5,964,737	\$ 6,031,934	\$ 6,031,934	\$ 67,197	PG 53 LN 2
Clarinda						
Clarinda MHI	\$ 6,442,688	\$ 6,757,689	\$ 6,787,309	\$ 6,787,309	\$ 29,620	PG 53 LN 8
Independence						
Independence MHI	\$ 9,738,520	\$ 10,334,082	\$ 10,484,386	\$ 10,484,386	\$ 150,304	PG 53 LN 14
Mt Pleasant						
Mt Pleasant MHI	\$ 885,459	\$ 1,374,061	\$ 1,417,796	\$ 1,417,796	\$ 43,735	PG 53 LN 20

Health and Human Services General Fund

	Actual FY 2013 <u>(1)</u>	Estimated FY 2014 <u>(2)</u>	Gov Rec FY 2015 <u>(3)</u>	House Approp FY 2015 <u>(4)</u>	House Approp vs. Est 2014 <u>(5)</u>	Page and Line # <u>(6)</u>
Glenwood						
Glenwood Resource Center	\$ 18,866,116	\$ 20,349,122	\$ 21,695,266	\$ 21,695,266	\$ 1,346,144	PG 53 LN 35
Woodward						
Woodward Resource Center	\$ 13,033,115	\$ 14,286,191	\$ 14,855,693	\$ 14,855,693	\$ 569,502	PG 54 LN 4
Cherokee CCUSO						
Civil Commitment Unit for Sexual Offenders	\$ 8,899,686	\$ 9,425,568	\$ 9,923,563	\$ 9,923,563	\$ 497,995	PG 55 LN 6
Field Operations						
Child Support Recoveries	\$ 13,149,541	\$ 14,215,081	\$ 14,911,230	\$ 14,911,230	\$ 696,149	PG 32 LN 10
Field Operations	61,636,313	66,670,976	66,670,976	66,670,976	0	PG 55 LN 33
Total Field Operations	<u>\$ 74,785,854</u>	<u>\$ 80,886,057</u>	<u>\$ 81,582,206</u>	<u>\$ 81,582,206</u>	<u>\$ 696,149</u>	
General Administration						
General Administration	\$ 16,100,684	\$ 16,329,602	\$ 16,079,602	\$ 16,304,602	\$ -25,000	PG 56 LN 29
Total Human Services, Dept. of	<u>\$ 1,660,419,368</u>	<u>\$ 1,670,035,635</u>	<u>\$ 1,776,287,767</u>	<u>\$ 1,775,947,613</u>	<u>\$ 105,911,978</u>	
Total Health and Human Services	<u><u>\$ 1,730,727,409</u></u>	<u><u>\$ 1,750,974,923</u></u>	<u><u>\$ 1,859,303,019</u></u>	<u><u>\$ 1,858,353,019</u></u>	<u><u>\$ 107,378,096</u></u>	

Summary Data

Other Funds

	<u>Actual FY 2013 (1)</u>	<u>Estimated FY 2014 (2)</u>	<u>Gov Rec FY 2015 (3)</u>	<u>House Approp FY 2015 (4)</u>	<u>House Approp vs. Est 2014 (5)</u>	<u>Page and Line # (6)</u>
Health and Human Services	\$ 401,397,067	\$ 474,751,524	\$ 423,398,034	\$ 431,656,222	\$ -43,095,302	
Grand Total	<u>\$ 401,397,067</u>	<u>\$ 474,751,524</u>	<u>\$ 423,398,034</u>	<u>\$ 431,656,222</u>	<u>\$ -43,095,302</u>	

Health and Human Services Other Funds

	Actual FY 2013 <u>(1)</u>	Estimated FY 2014 <u>(2)</u>	Gov Rec FY 2015 <u>(3)</u>	House Approp FY 2015 <u>(4)</u>	House Approp vs. Est 2014 <u>(5)</u>	Page and Line # <u>(6)</u>
Human Services, Dept. of						
General Administration						
FIP-TANF	\$ 19,790,365	\$ 18,116,948	\$ 14,231,391	\$ 9,879,488	\$ -8,237,460	PG 23 LN 16
Promise Jobs-TANF	12,411,528	11,866,439	11,091,911	11,091,911	-774,528	PG 23 LN 21
FaDDS-TANF	2,898,980	2,898,980	2,898,980	2,898,980	0	PG 23 LN 27
Field Operations-TANF	31,296,232	31,296,232	31,296,232	31,296,232	0	PG 24 LN 4
General Administration-TANF	3,744,000	3,744,000	3,744,000	3,744,000	0	PG 24 LN 7
Child Care Assistance -TANF	16,382,687	25,732,687	27,947,110	34,947,110	9,214,423	PG 24 LN 10
MH/DD Comm. Services-TANF	4,894,052	4,894,052	4,894,052	4,894,052	0	PG 24 LN 32
Child & Family Services-TANF	32,084,430	32,084,430	32,084,430	32,084,430	0	PG 25 LN 2
Child Abuse Prevention-TANF	125,000	125,000	125,000	125,000	0	PG 25 LN 5
Training & Technology-TANF	1,037,186	1,037,186	1,037,186	1,037,186	0	PG 25 LN 25
0-5 Children-TANF	6,350,000	0	0	0	0	
FIP Eligibility System-TANF	0	5,050,451	939,458	6,549,549	1,499,098	PG 25 LN 35
Total General Administration	\$ 131,014,460	\$ 136,846,405	\$ 130,289,750	\$ 138,547,938	\$ 1,701,533	

Health and Human Services Other Funds

	Actual FY 2013 (1)	Estimated FY 2014 (2)	Gov Rec FY 2015 (3)	House Approp FY 2015 (4)	House Approp vs. Est 2014 (5)	Page and Line # (6)
Assistance						
Pregnancy Prevention-TANF	\$ 1,930,067	\$ 1,930,067	\$ 1,930,067	\$ 1,930,067	\$ 0	PG 25 LN 8
Promoting Healthy Marriage - TANF	25,000	25,000	25,000	25,000	0	PG 26 LN 35
Medical Assistance - HCTF	106,046,400	224,446,400	221,790,000	221,790,000	-2,656,400	PG 33 LN 16
Medical Contracts-Pharm Settlement - PhSA	4,805,804	6,650,000	5,467,564	5,467,564	-1,182,436	PG 62 LN 2
Broadlawns Hospital - ICA	71,000,000	35,500,000	0	0	-35,500,000	
Regional Provider Network - ICA	4,986,366	2,993,183	0	0	-2,993,183	
Nonparticipating Providers - NPPR	2,000,000	1,000,000	0	0	-1,000,000	
Medical Information Hotline - HCTA	100,000	0	0	0	0	
Health Partnership Activities - HCTA	600,000	0	0	0	0	
Audits, Performance Eval., Studies - HCTA	125,000	0	0	0	0	
IowaCare Admin. Costs - HCTA	1,132,412	0	0	0	0	
Dental Home for Children - HCTA	1,000,000	0	0	0	0	
MH/DD Workforce Development - HCTA	50,000	0	0	0	0	
Medical Contracts - HCTA	2,400,000	0	0	0	0	
Broadlawns Admin - HCTA	540,000	0	0	0	0	
Medical Assistance - QATF	26,500,000	28,788,917	29,195,653	29,195,653	406,736	PG 62 LN 17
Medical Assistance - HHCAT	33,898,400	34,288,000	34,700,000	34,700,000	412,000	
Nonparticipating Provider Reimb Fund - HHCAT	801,600	412,000	0	0	-412,000	
Electronic Medical Records - HCTA	100,000	0	0	0	0	
Medical Assistance - HCTA	8,360,000	0	0	0	0	
IowaCare Fund - Admin	0	371,552	0	0	-371,552	
Care Coordination - ICA	500,000	0	0	0	0	
Lab Test & Radiology Pool - ICA	2,500,000	1,500,000	0	0	-1,500,000	
Uniform Cost Report - HCTA	150,000	0	0	0	0	
Health Care Access Council - HCTA	134,214	0	0	0	0	
Accountable Care Pilot - HCTA	100,000	0	0	0	0	
DPH Transfer e-Health - HCTA	363,987	0	0	0	0	
DPH Transfer Medical Home - HCTA	233,357	0	0	0	0	
Total Assistance	\$ 270,382,607	\$ 337,905,119	\$ 293,108,284	\$ 293,108,284	\$ -44,796,835	
Total Human Services, Dept. of	\$ 401,397,067	\$ 474,751,524	\$ 423,398,034	\$ 431,656,222	\$ -43,095,302	
Total Health and Human Services	\$ 401,397,067	\$ 474,751,524	\$ 423,398,034	\$ 431,656,222	\$ -43,095,302	

Summary Data

FTE Positions

	<u>Actual FY 2013 (1)</u>	<u>Estimated FY 2014 (2)</u>	<u>Gov Rec FY 2015 (3)</u>	<u>House Approp FY 2015 (4)</u>	<u>House Approp vs. Est 2014 (5)</u>	<u>Page and Line # (6)</u>
Health and Human Services	<u>4,909.33</u>	<u>5,344.07</u>	<u>5,117.61</u>	<u>5,266.86</u>	<u>-77.21</u>	
Grand Total	<u><u>4,909.33</u></u>	<u><u>5,344.07</u></u>	<u><u>5,117.61</u></u>	<u><u>5,266.86</u></u>	<u><u>-77.21</u></u>	

Health and Human Services FTE Positions

	Actual FY 2013 <u>(1)</u>	Estimated FY 2014 <u>(2)</u>	Gov Rec FY 2015 <u>(3)</u>	House Approp FY 2015 <u>(4)</u>	House Approp vs. Est 2014 <u>(5)</u>	Page and Line # <u>(6)</u>
<u>Aging, Dept. on</u>						
Aging, Dept. on						
Aging Programs	32.15	25.10	28.00	28.00	2.90	PG 1 LN 5
Office of Long-Term Care Resident's Advocate	0.00	10.90	12.00	11.00	0.10	PG 3 LN 6
Total Aging, Dept. on	<u>32.15</u>	<u>36.00</u>	<u>40.00</u>	<u>39.00</u>	<u>3.00</u>	
<u>Public Health, Dept. of</u>						
Public Health, Dept. of						
Addictive Disorders	6.69	13.00	10.00	13.00	0.00	PG 4 LN 2
Healthy Children and Families	8.29	14.00	12.00	14.00	0.00	PG 8 LN 16
Chronic Conditions	1.89	6.00	5.00	6.00	0.00	
Community Capacity	9.18	18.25	11.00	18.25	0.00	PG 13 LN 1
Environmental Hazards	3.52	4.00	4.00	4.00	0.00	PG 19 LN 21
Infectious Diseases	1.53	4.00	4.00	4.00	0.00	PG 19 LN 30
Public Protection	123.49	131.15	131.00	131.00	-0.15	PG 20 LN 2
Resource Management	4.00	5.00	4.00	5.00	0.00	PG 21 LN 3
Total Public Health, Dept. of	<u>158.59</u>	<u>195.40</u>	<u>181.00</u>	<u>195.25</u>	<u>-0.15</u>	
<u>Human Services, Dept. of</u>						
Assistance						
Medical Contracts	2.99	0.00	0.00	0.00	0.00	PG 35 LN 29
Toledo Juvenile Home						
Toledo Juvenile Home	108.35	114.00	2.00	15.00	-99.00	PG 41 LN 32
Eldora Training School						
Eldora Training School	159.70	164.30	164.30	164.30	0.00	PG 42 LN 6
Cherokee						
Cherokee MHI	170.65	169.20	169.20	169.20	0.00	PG 53 LN 2
Clarinda						
Clarinda MHI	79.13	86.10	86.10	86.10	0.00	PG 53 LN 8
Independence						
Independence MHI	223.64	233.00	233.00	233.00	0.00	PG 53 LN 14

Health and Human Services FTE Positions

	Actual FY 2013 <u>(1)</u>	Estimated FY 2014 <u>(2)</u>	Gov Rec FY 2015 <u>(3)</u>	House Approp FY 2015 <u>(4)</u>	House Approp vs. Est 2014 <u>(5)</u>	Page and Line # <u>(6)</u>
Mt Pleasant						
Mt Pleasant MHI	89.61	97.92	97.92	97.92	0.00	PG 53 LN 20
Glenwood						
Glenwood Resource Center	828.66	859.12	859.12	859.12	0.00	PG 53 LN 35
Woodward						
Woodward Resource Center	648.65	652.47	652.47	652.47	0.00	PG 54 LN 4
Cherokee CCUSO						
Civil Commitment Unit for Sexual Offenders	88.94	124.50	128.50	132.50	8.00	PG 55 LN 6
Field Operations						
Child Support Recoveries	443.47	459.00	459.00	464.00	5.00	PG 32 LN 10
Field Operations	1,601.01	1,810.00	1,727.00	1,837.00	27.00	PG 55 LN 33
Total Field Operations	<u>2,044.48</u>	<u>2,269.00</u>	<u>2,186.00</u>	<u>2,301.00</u>	<u>32.00</u>	
General Administration						
General Administration	261.27	330.06	305.00	309.00	-21.06	PG 56 LN 29
Total Human Services, Dept. of	<u>4,706.09</u>	<u>5,099.67</u>	<u>4,883.61</u>	<u>5,019.61</u>	<u>-80.06</u>	
<u>Veterans Affairs, Dept. of</u>						
Veterans Affairs, Department of						
General Administration	12.51	13.00	13.00	13.00	0.00	PG 21 LN 25
Total Veterans Affairs, Dept. of	<u>12.51</u>	<u>13.00</u>	<u>13.00</u>	<u>13.00</u>	<u>0.00</u>	
Total Health and Human Services	<u><u>4,909.33</u></u>	<u><u>5,344.07</u></u>	<u><u>5,117.61</u></u>	<u><u>5,266.86</u></u>	<u><u>-77.21</u></u>	