

HUMAN SERVICES DEPARTMENT[441]

Notice of Intended Action

Proposing rulemaking related to general provisions and providing an opportunity for public comment

The Department of Health and Human Services hereby proposes to rescind Chapter 130, “General Provisions,” Iowa Administrative Code, and to adopt a new Chapter 130 with the same title.

Legal Authority for Rulemaking

This rulemaking is proposed under the authority provided in Iowa Code section 234.6.

State or Federal Law Implemented

This rulemaking implements, in whole or in part, Iowa Code section 234.6.

Purpose and Summary

This proposed chapter provides general information and guidance related to application and eligibility for, and provision of, services from the Department.

This proposed chapter underwent a Red Tape Review pursuant to Executive Order 10. As a result of the review, the Department replaced restrictive terms and deleted outdated and redundant information.

Regulatory Analysis

A Regulatory Analysis for this rulemaking was published in the Iowa Administrative Bulletin on August 19, 2026. A public hearing was held on the following date(s):

- September 8, 2026

Fiscal Impact

This rulemaking has no fiscal impact to the State of Iowa.

Jobs Impact

After analysis and review of this rulemaking, no impact on jobs has been found.

Waivers

Any person who believes that the application of the discretionary provisions of this rulemaking would result in hardship or injustice to that person may petition the Department for a waiver of the discretionary provisions, if any, pursuant to 441—Chapter 2504.

Public Comment

Any interested person may submit written or oral comments concerning this proposed rulemaking, which must be received by the Department no later than 4:30 p.m. on October 20, 2026. Comments should be directed to:

Victoria L. Daniels
Department of Health and Human Services
Lucas State Office Building
321 East 12th Street
Des Moines, Iowa 50319
Phone: 515.829.6021
Email: compliancerules@hhs.iowa.gov

Public Hearing

Public hearings at which persons may present their views orally or in writing will be held as follows:

October 20, 2026 10 to 10:30 a.m.	Microsoft Teams Meeting ID: 219 881 050 919 125 Passcode: DW7fd9aw
October 20, 2026 2 to 2:30 p.m.	Microsoft Teams Meeting ID: 291 736 521 030 670 Passcode: LC2Pf3Q8

Persons who wish to make oral comments at a public hearing may be asked to state their names for the record and to confine their remarks to the subject of this proposed rulemaking.

Any persons who intend to attend a public hearing and have special requirements, such as those related to hearing or mobility impairments, should contact the Department and advise of specific needs.

Review by Administrative Rules Review Committee

The Administrative Rules Review Committee, a bipartisan legislative committee which oversees rulemaking by executive branch agencies, may, on its own motion or on written request by any individual or group, review this rulemaking at its [regular monthly meeting](#) or at a special meeting. The Committee's meetings are open to the public, and interested persons may be heard as provided in Iowa Code section 17A.8(6).

The following rulemaking action is proposed:

ITEM 1. Rescind 441—Chapter 130 and adopt the following **new** chapter in lieu thereof:

TITLE XIII SERVICE ADMINISTRATION CHAPTER 130 GENERAL PROVISIONS

441—130.1(234) Definitions.

"Family" includes the following members:

1. Legal spouses (including common law) who reside in the same household.
2. Natural, adoptive, or stepmother or stepfather and children who reside in the same household.
3. An individual or a child who lives alone or who resides with a person, or persons, not legally responsible for the child's support.

"Family-centered services" means services provided by the department pursuant to 441—Chapter 172.

"Temporary absence" means:

- a. A medical absence anticipated to be less than three months;
- b. An absence for the purpose of education or employment; or
- c. When a family member is absent and intends to return home within three months.

441—130.2(234) Application.

130.2(1) Application for social services shall be made at any department office on forms prescribed by the department. Application for services shall be made on an Application for All Social Services form.

130.2(2) The application may be filed by the applicant; the applicant's authorized representative; or, where the applicant is incompetent or incapacitated, someone acting responsibly for the applicant.

130.2(3) The date of application is the date a signed application form is received in the department office.

130.2(4) The application will be approved or denied within 30 days from the date of application and the applicant notified of the decision. The decision will be mailed or given to the applicant on the date the determination is made, except that for services ordered by the court, the court order provided by the court and the case permanency plan provided by the department shall serve as notification. When individual case management services are being provided, the application will be approved or denied no later than the date that the department service manager, who is part of the interdisciplinary team, signs the individual program plan.

130.2(5) Eligibility will be redetermined in the same manner as an application at least every six months for family-centered services. For all other services, eligibility will be redetermined in the same manner as an application at least every 12 months.

441—130.3(234) Eligibility.

130.3(1) Eligibility factors for services available through the department are individual need for a service and family income except when services are provided without regard to income or when services are directed in a court order.

a. Individual need is established when the service to be provided is directed at and will facilitate an individual in reaching or maintaining one of the goals and objectives in 130.6(1). Except when the court establishes need, the department will establish individual need in accordance with each individual service's rules. The department will determine the number of units to be provided.

b. The block grant service to be provided will be contained in the pre-expenditure report and listed for the specific district and county. Service available through the department and funded by resources other than the social service block grant is identified in rules for that specific service.

c. Service will be provided only when funds are available for service delivery.

d. Persons are financially eligible for services when they are in one of the following categories:

(1) Income maintenance status. They are recipients of the family investment program (FIP), those whose income was taken into account in determining the needs of FIP recipients, recipients of supplemental security income or state supplementary assistance, or those in the 300 percent group as defined in 441—subrule 75.6(4).

(2) Income eligible status. The monthly gross income is based on family size. Family size income levels are found on the department's website.

e. Certain services are provided without regard to income, which means family income is not considered in determining eligibility. The services provided without regard to income are information and referral, child protective assessment, child abuse treatment, child abuse prevention services, including protective child care services, family-centered services, dependent adult abuse evaluation, dependent adult abuse treatment, dependent adult abuse prevention services, and purchased adoption services to individuals and families referred by the department.

f. In certain cases, the department will provide services directed in a court order.

130.3(2) To be eligible for services, the person must be living in the state of Iowa. Living in the state includes those persons living in Iowa for a temporary period, other than for the purpose of vacation.

130.3(3) In determining gross income, all income received by an individual from sources identified by the U.S. Census Bureau in computing median income is considered and includes money wages or salary, net income from nonfarm self-employment, net income from farm self-employment, social security, dividends, interest, income from estates or trusts, net rental income and royalties, public assistance or welfare payments, pensions and annuities, unemployment compensation, worker's compensation, alimony, child support, and veterans pensions. Excluded from the computation of monthly gross income are the following:

a. Per capita payments to or funds held in trust for any individual in satisfaction of a judgment of the Indian claims commission or the court of claims.

b. Payments made pursuant to the Alaska Claims Settlement Act as amended to August 1, 2026, to the extent such payments are exempt from taxation under Section 21(a) of the Act as amended to August 1, 2026.

c. Money received from the sale of property unless the person was engaged in the business of selling such property.

- d. Withdrawals of bank deposits.
- e. Money borrowed.
- f. Tax refunds.
- g. Gifts.
- h. Lump sum inheritances or insurance payments or settlements.
- i. Capital gains.
- j. The value of USDA-donated foods.
- k. The value of supplemental food assistance under the Child Nutrition Act of 1966 as amended to August 1, 2026, and the special food program for children under the National School Lunch Act as amended to August 1, 2026.
- l. Earnings of a child 14 years of age or under.
- m. Loans and grants obtained and used under conditions that preclude their use for current living expenses.
- n. Any grant or loan to any undergraduate student for educational purposes made or insured under the Higher Education Act as amended to August 1, 2026.
- o. Home produce utilized for household consumption.
- p. Stipends received by persons for participating in the foster grandparent program.
- q. The first \$65 plus 50 percent of the remainder of income earned in a sheltered workshop or work activity setting.
- r. Payments from the low-income home energy assistance program (LIHEAP).
- s. In determining eligibility for purchase of local services, one-third of the income of a disabled survivor who is a recipient of child's insurance benefits under the federal old-age, survivors, and disability insurance program established under Title II of the federal Social Security Act as amended to August 1, 2026.
- t. In determining eligibility for purchase of local services, one-third of the income of a person who receives social security permanent disability benefits.
- u. Agent Orange settlement payments.
- v. Rent reimbursement provided under Iowa Code chapter 425.
- w. Moneys received under the federal Social Security Persons Achieving Self-Sufficiency (PASS) program or the Income-Related Work Expense (IRWE) program.

130.3(4) Temporary absence. The composition of the family group does not change when one, or more, of the group members is temporarily absent from the household.

441—130.4(234) Adverse service actions.

130.4(1) *Denial.* Services will be denied when it is determined by the department that:

- a. The client is not in need of service;
- b. The client is not financially eligible;
- c. The service to be provided is not in the Social Services Block Grant Pre-Expenditure Report;
- d. There is another community resource available to provide the service or a similar service free of charge to the client that will meet the client's needs;
- e. In cases other than protective service investigation, the client, parent, or representative refuses to sign the application form;
- f. The service for which the client is eligible is currently not available; or
- g. Funding is not available to provide the service.

130.4(2) *Termination.* A particular service may be terminated when the department determines any one or combination of the following factors:

- a. The specific need to attain the goals and objectives to which the service was directed has been achieved;
- b. After repeated assessment, it is evident that the family or individual is unable to achieve or maintain the goals set forth in the individual client service plan;
- c. After repeated efforts, it is evident that the family or individual is unwilling to accept further service;

- d. The client's income or resources exceed the financial guidelines, or the client no longer meets other eligibility criteria established by the department for the service;
- e. The service is no longer offered or available from the department;
- f. Another community resource is available to provide the service or a similar service free of charge to the client that will meet the client's needs;
- g. The client refuses to allow documentation of eligibility as to need, income, and resources; or
- h. Funding is not available to provide the service.

130.4(3) Reduction. A particular service may be reduced when the department determines one of the following:

- a. Continued provision of service at its current level is not necessary. The department will determine the level to which the service may be reduced without jeopardizing the client's continued progress toward achieving or maintaining the goal.
- b. Another community resource is available to provide the same or similar service to the client at no financial cost to the client, that will meet the client's needs.
- c. Funding is not available to continue the service at the current level. The client will be reassessed to determine the level of service to be provided.

130.4(4) Pending changes. The department will endeavor to make clients aware of pending changes in services to be provided by social services block grant from one program year to the next, particularly for those services that will no longer be available. This requirement also applies to time-limited services.

130.4(5) Notice and appeal. Notice of adverse service actions will be issued in accordance with 441—Chapter 16 and may be appealed pursuant to 441—Chapter 2506.

441—130.5(234) Social casework. For each active service case, when service is provided directly, purchased, or by a combination of methods, the department will:

130.5(1) Determine eligibility.

130.5(2) Ensure there is a department case plan for each individual or family based on assessment of strengths and needs. The department will furnish appropriate sections of the initial plan and of all updated department case plans to the provider agency when services are purchased for an individual. When individual case management services are being provided, the individual case management services provider shall distribute the case plans.

130.5(3) Refer the client to other agencies through proper channels and coordinate all people involved in the case. When individual case management services are being provided, the individual case management services provider shall be responsible for making referrals and coordinating workers as specified in the individual program plan.

130.5(4) Enter information to the service reporting system.

130.5(5) Monitor the case to ensure that eligibility continues, services are received, plans are adjusted as needed, services reporting system reporting is correct, and the case is canceled when appropriate, according to these rules.

130.5(6) Ensure that services are unavailable elsewhere without cost to the client.

441—130.6(234) Case plan. The department will develop a case plan with or on behalf of persons approved to receive services. However, a case plan is not required (1) for child or adult protective assessment, (2) for foster care cases in which the department does not have custody, guardianship or a voluntary placement agreement, or (3) when child care is the only service. A case plan will be developed with or on behalf of every other person approved to receive services unless the person has a case manager as specified in 441—Chapter 24. When department services are provided before an individual program plan in compliance with 441—Chapter 24 is approved, a department case plan will be developed according to the requirements of this rule. When individual case management services are being provided, the rules in 441—Chapter 24 on time limits, plan format and on who develops the plan will apply for adults and for children whose services are not under court jurisdiction. The department will determine eligibility for those services provided by the department; however, a separate department case plan need not be developed. If the individual program plan does not include sufficient

information to meet department service requirements or the requirements in this chapter, the person providing department social casework will complete either a case plan or addendum and coordinate distribution to the persons who receive the individual program plan with the case manager.

The case plan will become part of the client's case record. The client shall participate in the development of this plan to the extent possible. The case plan will be consistent with other service or program plans. A copy of the case plan will be provided to the client or, when indicated, to the parent or representative of the client. For adult services, the case plan will be recorded using an individual service plan. For children's services, the case plan will be known as the case permanency plan and will be prepared using a family case plan.

130.6(1) Services will be directed toward the social services block grant goals of:

- a. Achieving or maintaining self-support to prevent, reduce or eliminate dependency.
- b. Achieving or maintaining self-sufficiency, including reduction or prevention of dependency.
- c. Preventing or remedying neglect, abuse or exploitation of children or adults unable to protect their own interest or preserving, rehabilitating or reuniting families.
- d. Preventing or reducing inappropriate institutional care by providing for community-based care, home-based care, or other forms of less intensive care.
- e. Securing referral or admission for institutional care when other forms of care are not appropriate or providing services to individuals in institutions.

130.6(2) The recorded case plan will contain but not be limited to the following:

- a. The goal and objective to which the plan is directed, stated in a clear manner indicating the specific services required to achieve or maintain the goals to meet the needs of the particular client.
- b. Activities of clients and others involved in the plan related to specific services. These will be measurable and have time frames for completion.
- c. A summary of all pertinent information relating to the client and the client's situation relative to need, containing but not limited to the following:
 - (1) Emotional behavior.
 - (2) Social aspects.
 - (3) Historical perspective.
 - (4) Reasons for success or lack of success.
 - (5) Safety-related information indicating whether a child has behaved in a manner that threatened the safety of another person, has committed a violent act causing bodily injury to another person, or has been a victim or perpetrator of sexual abuse. The safety-related information will be withheld only if ordered by the court or if the department or the agency developing the service plan determines that providing the information would be detrimental to the child or to the family with whom the child is living.
- (6) An assessment of whether continued breastfeeding by a child's mother is in the best interest of the child and a plan to support the mother's breastfeeding efforts, if appropriate.
- d. Information on case entries that will substantiate the client's eligibility for service.
- e. A target date for reevaluation of the case plan based on assessment of need that shall not exceed six months.
- f. A review of financial eligibility in accordance with 130.2(5).
- g. The reason for termination or reduction of any or all services.

130.6(3) The case plan will be developed and filed in the case record as follows:

a. In child welfare cases, the case plan will be developed in partnership with the child, the family, and the caregiver.

(1) The recommendations from the child protective assessment and the safety plan developed with the family will be considered an initial case plan.

(2) A case permanency plan that meets the requirements of Iowa Code section 232.2 will be filed within 60 days from the date the child enters foster care or the date the department opens a child welfare service case, whichever occurs first.

b. For all other cases, the case plan shall be developed before services begin unless there is an unanticipated provision of service for the protection and well-being of a client. In that case, the case plan will be filed within 45 days from the date that services begin.

130.6(4) The reevaluation of the case plan will include all components listed under 130.6(2) and will be filed at least every six months or more often when there are significant changes, when required by the court, or when required according to the rules of the service.

130.6(5) The case plan may be amended between evaluation periods. Participants in the plan will receive a copy of the amendment.

441—130.7(234) Entitlement. There is no automatic right to ongoing service in any service category from one fiscal year to the next.

These rules are intended to implement Iowa Code section 234.6.