Senate Amendment to House File 2463

H-8289 1 Amend House File 2463, as amended, passed, and 2 reprinted by the House, as follows: 1. Page 1, line 22, by striking <10,606,066> and 3 4 inserting <11,531,066> 2. Page 1, line 23, by striking <28.00> and 5 6 inserting <28.00 31.00> 3. Page 3, line 1, by striking <subsection> and 7 8 inserting <subsection section> Page 3, after line 4 by inserting: 9 4. 10 Of the funds appropriated in this section, <7. 11 \$325,000 shall be used to fund the initial 12 reestablishment of the office of substitute decision 13 maker pursuant to chapter 231E. 14 8. Of the funds appropriated in this section, 15 \$600,000 shall be distributed equally to the area 16 agencies on aging to administer the prevention of elder 17 abuse, neglect, and exploitation program pursuant to 18 section 231.56A, in accordance with the requirements 19 of the federal Older Americans Act of 1965, 42 U.S.C. 20 §3001 et seq., as amended. 21 9. The department on aging shall form a study 22 committee to analyze the meal programs coordinated 23 through the area agencies on aging.> 5. Page 3, line 19, by striking <821,707> and 24 25 inserting <1,078,707> Page 3, line 20, by striking <13.00> and 26 6. 27 inserting <13.00> 28 7. Page 3, line 21, by striking <11.00> 29 Page 3, after line 27 by inserting: 8. 30 <3. Of the funds appropriated in this section, 31 \$257,000 shall be used to provide two additional local 32 long-term care ombudsmen to continue moving toward the 33 national recommendation of one full-time equivalent 34 paid staff ombudsman position per 2,000 long-term care 35 beds in the state.> Page 4, line 9, by striking <27,088,690> and 36 37 inserting <27,588,690> 38 10. Page 4, line 12, by striking <5,073,361> and 39 inserting <5,573,361> 11. Page 8, after line 16 by inserting: 40 <f. The department of public health shall 41 42 initiate a committee supported by departmental staff 43 who work with substance-related disorder providers 44 to review reimbursement provisions applicable to 45 substance-related disorder providers. The committee 46 membership shall include the department of human 47 services staff who work with the managed care 48 organization responsible for substance-related 49 disorder treatment under the department and for 50 mental health treatment under the Medicaid program, a

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1 representative of the managed care organization, at 2 least three providers of substance-related disorders 3 designated by the Iowa behavioral health association, 4 and other interests. The committee shall consider 5 the adequacy of the reimbursement provisions, whether 6 it is appropriate to rebase reimbursement, equity 7 of the reimbursement provisions as compared to the 8 reimbursement methodologies used for providers of 9 similar behavioral health services, the effect of 10 health coverage expansion through the Iowa health and 11 wellness plan on such providers, and other issues. The 12 committee shall report to the general assembly with 13 findings and recommendations on or before December 15, 14 2014.> 15 12. Page 8, line 23, by striking <3,671,602> and 16 inserting <4,346,602> 13. Page 9, line 5, by striking <1,327,887> and 17 18 inserting <1,927,887> Page 10, line 4, by striking <137,768> and 19 14. 20 inserting <162,768> 21 15. Page 10, after line 31 by inserting: <j. 22 In preparation for the completion of the 23 youth and young adult suicide prevention program 24 (Y-YASP) project funded through the federal Garrett Lee 25 Smith youth suicide prevention grant awarded to the 26 department of public health, the department of public 27 health and the department of education shall submit 28 recommendations based upon the foundation established 29 by the project to establish a suicide prevention 30 and trauma coordinator position in the department 31 of education, to integrate suicide prevention and 32 postvention and trauma-informed care model protocols 33 into school district supports statewide, and to include 34 evidence-based training on suicide prevention for 35 appropriate school personnel, during the fiscal year 36 beginning July 1, 2015. The departments shall submit 37 their recommendations to the governor and the general 38 assembly no later than December 15, 2014. 39 k. Of the funds appropriated in this subsection, 40 \$50,000 shall be used to support the Iowa effort to 41 address the survey of children who experience adverse 42 childhood experiences known as ACEs.> 43 16. Page 11, line 2, by striking <5,040,692> and 44 inserting <5,155,692> 17. Page 11, by striking lines 14 through 16 and 45 46 inserting
basis. Of the amount allocated in this 47 paragraph, \$47,500 \$95,000 shall be used to fund one 48 full-time equivalent position to serve as the state 49 brain injury service services program manager.> 50 18. Page 11, line 23, by striking <\$99,823> and

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1 inserting <\$149,823> 2 19. Page 11, line 27, after <families.> by 3 inserting <The amount allocated in this paragraph in 4 excess of \$100,000 shall be matched dollar for dollar 5 by the organization specified.> Page 12, line 32, by striking <175,263> and 6 7 inserting <215,263> 21. Page 12, after line 35 by inserting: 8 <l. Of the funds appropriated in this subsection, 9 10 \$25,000 shall be used for implementation of chapter 11 124D, the Medical Cannabidiol Act, or other provision 12 authorizing the compassionate medical use of 13 cannabidiol, if enacted by the 2014 regular session of 14 the eighty-fifth general assembly.> 15 22. Page 13, line 6, by striking <9,284,436> and 16 inserting <8,888,270> 23. Page 15, by striking lines 30 through 33 and 17 18 inserting: <(8) For continuation of the safety net provider 19 20 patient access to a specialty health care initiative as 21 described in 2007 Iowa Acts, chapter 218, section 109: 22 \$ 189,237 23 378,474> 24. Page 16, line 13, by striking <175,900> and 24 25 inserting <288,580> 26 25. Page 16, line 19, by striking <178,875> and 27 inserting <291,555> 26. Page 17, line 10, by striking <150,000> and 28 29 inserting <250,000> 30 27. Page 17, line 34, by striking <p.> and 31 inserting <p. (1)> 28. Page $1\overline{8}$, after line 18 by inserting: 32 33 The department of human services shall work < (2) 34 with the Iowa collaborative safety net provider network 35 and the Iowa primary care association to develop 36 a long-term sustainability plan for the statewide 37 regionally based network to provide the integrated 38 approach to health care delivery as described in this 39 lettered paragraph. The department shall pursue any 40 appropriate payment mechanisms available such as a 41 Medicaid program state plan amendment, Medicaid program 42 waiver, state innovation model funding, or other 43 funding through the centers for Medicare and Medicaid 44 services of the United States department of health 45 and human services to provide options for long-term 46 sustainability by incorporating funding of the network 47 into any such appropriate payment mechanism.> 29. Page 18, line 20, by striking <3,000,000> and 48 49 inserting <2,000,000> 50 30. Page 18, by striking lines 25 through 30 and

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1 inserting <as specified in section 135.176.>
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     31.
         Page 19, by striking lines 3 through 10.
     32. Page 20, line 4, by striking <3,420,027> and
 3
 4 inserting <3,387,127>
     33. Page 20, line 7, by striking <454,700> and
 5
 6 inserting <554,700>
7
     34. Page 20, by striking lines 33 and 34.
     35. By striking page 21, line 14, through page 22,
8
  line 13, and inserting:
9
10
     <Sec. . 2013 Iowa Acts, chapter 138, section
11 134, subsection 1, is amended to read as follows:
     1. DEPARTMENT OF VETERANS AFFAIRS ADMINISTRATION
12
13
     For salaries, support, maintenance, and
14 miscellaneous purposes, and for not more than the
15 following full-time equivalent positions:
16 ..... $
                                                 546,754
17
                                               1,095,951
18 ..... FTEs
                                                   13.00
                    IOWA VETERANS HOME
19
     Sec. . 2013 Iowa Acts, chapter 138, section 134,
20
21 subsection 2, unnumbered paragraph 1, is amended to
22 read as follows:
     For salaries, support, maintenance, and
23
24 miscellaneous purposes:
25 ..... $ <del>3,762,857</del>
26
                                               7,594,996
     Sec. . 2013 Iowa Acts, chapter 138, section 134,
27
28 subsection 2, is amended by adding the following new
29 paragraph:
30
     NEW PARAGRAPH. e. The Iowa veterans home
31 expenditure report shall be submitted monthly to the
32 legislative services agency.
           . 2013 Iowa Acts, chapter 138, section 134,
33
     Sec.
34 subsection 3, is amended to read as follows:>
     36. By striking page 24, line 25, through page 25,
35
36 line 32.
     37. Page 25, line 33, by striking <c.> and
37
38 inserting <b.>
39
     38. Page 29, line 17, by striking <6,042,834> and
40 inserting <6,217,834>
     39. Page 31, line 26, by striking <48,503,875> and
41
42 inserting <48,763,875>
43
     40. Page 31, line 30, by striking <3,163,854> and
44 inserting <3,338,854>
     41. Page 32, after line 31 by inserting:
45
46
     <4A. Of the funds appropriated in this section,
47 $10,000 shall be used by the organization specified in
48 subsection 4 to evaluate the need to assist low-income
49 Iowans in preparing tax returns for electronic filing.>
50
     42. Page 32, line 33, by striking <40,000> and
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1 inserting <115,000> 2 43. Page 33, line 3, after <responsibility> by 3 inserting <headquartered> 44. Page 33, line 8, before <initiative> by 4 5 inserting <multi-county>> Page 35, line 7, by striking <1,248,320,932> 6 45. 7 and inserting <1,243,567,577> Page 36, line 10, by striking <\$5,151,477> and 8 46. inserting <\$7,451,376> 9 10 Page 36, by striking lines 12 through 14 and 47. 11 inserting <community-based services waivers.> 48. Page 36, after line 27 by inserting: 12 13 <NEW SUBSECTION. 24. If authorized by the centers 14 for Medicare and Medicaid services of the United States 15 department of health and human services, the department 16 of human services shall expand hospital presumptive 17 eligibility as authorized under 42 C.F.R §435.1110, to 18 include other provider types as qualified entities, 19 including but not limited to federally qualified health 20 centers, upon a center's or other entity's request. 21 NEW SUBSECTION. 25. The department of human 22 services shall adopt rules pursuant to chapter 17A to 23 require or provide for all of the following relating 24 to qualifications for disproportionate share hospital 25 payments: That only hospitals, including those defined as 26 a. 27 a children's hospital, located in the state may qualify 28 for disproportionate share hospital payments. 29 b. That, if a hospital is defined as a children's 30 hospital, the children's hospital may qualify for 31 disproportionate share hospital payments if among 32 other criteria the hospital is a member of, but is 33 not required to be a voting member of, the children's 34 hospital association.> 35 Page 39, by striking lines 21 through 29. 49. 36 50. Page 40, line 4, by striking <45,622,828> and 37 inserting <48,641,331> 38 Page 40, line 6, by striking <37,903,401> and 51. 39 inserting <40,921,904> 40 52. Page 42, after line 26 by inserting: 41 <12. Of the funds appropriated in this section, 42 \$100,000 is transferred to the department of public 43 health to be used for a program to assist parents in 44 this state with costs resulting from the death of a 45 child in accordance with this subsection. If it is 46 less costly than administering the program directly, 47 the department shall issue a request for proposals 48 and issue a grant to an appropriate organization to 49 administer the program. 50 The program funding shall be used to assist a.

1 parents who reside in this state with costs incurred 2 for a funeral, burial or cremation, cemetery costs, or 3 grave marker costs associated with the unintended death 4 of a child of the parent or a child under the care of a 5 guardian or custodian. The department shall consider 6 the following eligibility factors in developing program 7 requirements: (1) The child was a stillborn infant or was less 8 9 than age eighteen at the time of death. 10 (2) The request for assistance was approved by 11 the local board or department of health or the county 12 general assistance director and may have been referred 13 by a local funeral home. 14 (3) To be eligible, the parent, guardian, or 15 custodian must have an annual household income that 16 is less than 145 percent of the federal poverty level 17 based on the number of people in the applicant's 18 household as defined by the most recently revised 19 poverty income guidelines published by the United 20 States department of health and human services. 21 (4) The maximum amount of grant assistance provided 22 to a parent, guardian, or custodian associated with the 23 death of a child is \$2,000. If the death is a multiple 24 death and the infants or children are being cremated, 25 or buried together, the same limitation applies. 26 (5) To the extent the overall amount of assistance 27 received by a recipient for the costs addressed under 28 this subsection does not exceed the overall total of 29 the costs, the recipient may receive other public or 30 private assistance in addition to grant assistance 31 under this section. Notwithstanding section 8.33, moneys transferred 32 b. 33 by this subsection that remain unencumbered or 34 unobligated at the close of the fiscal year shall not 35 revert but shall remain available for expenditure for 36 the purposes designated until expended.> 53. By striking page 42, line 27, through page 45, 37 38 line 4, and inserting: 39 <Sec. . 2013 Iowa Acts, chapter 138, section 40 147, is amended to read as follows: SEC. 147. JUVENILE INSTITUTIONS. 41 There is 42 appropriated from the general fund of the state to 43 the department of human services for the fiscal year 44 beginning July 1, 2014, and ending June 30, 2015, the 45 following amounts, or so much thereof as is necessary, 46 to be used for the purposes designated: 1. For operation of the *Iowa juvenile home* state 47 48 training school for female juvenile delinquents at 49 Toledo as enacted by this 2014 Iowa Act, to operate 50 with a capacity of at least 20 beds and for salaries,

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1 support, maintenance, and miscellaneous purposes, and 2 for not more than the following full-time equivalent 3 positions: 4\$ 4,429,678 7,087,766 5 FTEs 6 114.00 7 54.00 a. Of the funds appropriated in this subsection, 8 9 up to \$2,000,000 may be used by the department for the 10 placement costs of females and males adjudicated as a 11 child in need of assistance that under prior law would 12 have been placed at the Iowa juvenile home. b. By January 1, 2015, the department shall 13 14 provide a report to the governor and the legislative 15 services agency that includes a description of the 16 status of juvenile delinquent girls in out-of-home 17 placements during the period beginning December 1, 18 2013, and ending December 1, 2014; identifies their 19 placement histories; provides the reason for placement; 20 provides a status report on educational services and 21 treatment of youth at department facilities; and makes 22 appropriate recommendations for legislation deemed 23 necessary. 24 c. Of the funds appropriated in this subsection, 25 \$1,100,000 shall be used for follow-up services to 26 support children who were placed at a state training 27 school and remain under the jurisdiction of the state 28 court and for expansion of the preparation for adult 29 living program in accordance with section 234.46, in 30 accordance with this 2014 Act. 31 2. For operation of the state training school at 32 Eldora and for salaries, support, maintenance, and 33 miscellaneous purposes, and for not more than the 34 following full-time equivalent positions: 35 \$ 5,628,485 36 11,590,098 37 FTEs 164.30 38 165.30 39 Of the funds appropriated in this subsection, 40 \$45,575 \$91,150 shall be used for distribution 41 to licensed classroom teachers at this and other 42 institutions under the control of the department of 43 human services based upon the average student yearly 44 enrollment at each institution as determined by 45 the department. Of the funds appropriated in this 46 subsection, \$90,000 shall be used for the costs of 47 implementing the youth council approach, known as 48 achieving maximum potential, of providing a support 49 network to males placed at the training school at 50 Eldora and to females placed at the state training

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1 school at Toledo. 2 3. A portion of the moneys appropriated in this 3 section shall be used by the state training school 4 and by the Iowa juvenile home schools for grants for 5 adolescent pregnancy prevention activities at the 6 institutions in the fiscal year beginning July 1, 7 2014.> 54. Page 45, line 15, by striking <95,535,703> and 8 9 inserting <93,571,220> 55. Page 45, line 32, by striking <36,967,216> and 10 11 inserting <34,383,853> 56. Page 49, line 23, by striking <520,150> and 12 13 inserting <570,150> 14 57. Page 49, line 30, by striking <62,708> and 15 inserting <68,737> 16 58. Page 49, line 33, by striking <125,682> and 17 inserting <137,761> 18 59. Page 50, line 1, by striking <195,892> and 19 inserting <214,722> 20 60. Page 50, line 4, by striking <67,934> and 21 inserting <74,465> Page 50, line 7, by striking <67,934> and 22 61. 23 inserting <74,465> 62. Page 51, line 32, by striking <110,000> and 24 25 inserting <135,000> Page 52, line 6, by striking <\$160,000> and 26 63. 27 inserting <\$110,000> 28 64. Page 52, after line 16 by inserting: 29 <28. The department shall perform a review of the 30 feasibility of and benefits associated with expanding 31 foster care, kinship guardianships, and subsidized 32 adoptions to be available on a voluntary basis to young 33 adults who become age 18 while receiving child welfare 34 services. The purpose of the review is to determine 35 the extent to which the expansion is covered under the 36 federal Fostering Connections to Success and Increasing 37 Adoptions Act of 2008, Pub. L. No. 110-351, and would 38 draw additional federal support under the Title IV-E 39 of the federal Social Security Act, allow the state 40 to expand the preparation for adult living program to 41 additional young adults, and enhance the services and 42 supports available under the program. The department 43 shall engage national and state experts in structuring 44 such programs under the federal fostering connections 45 Act in addition to young persons with experience in the 46 state's foster care system in performing the review. 47 If the department determines the expansion can be 48 implemented within existing state appropriations and 49 produces additional benefits for the young adults who 50 would be served under the expansion, the department may

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1 implement changes to expand the availability of foster 2 care, kinship guardianships, and subsidized adoptions 3 for eligible young adults who become age 21. 29. Of the funds appropriated in this section, 4 5 \$25,000 shall be used for the purposes of this 6 subsection. The department shall staff and support 7 a panel of Iowa child welfare experts and advocates 8 to guide and oversee development of the publications 9 enumerated in this subsection. The membership 10 of the panel shall include but is not limited to 11 representatives designated by the Middleton center for 12 children's right at the Drake university legal clinic, 13 disability rights Iowa, the foster care youth council 14 program known as achieving maximum potential or AMP, 15 the department's parent partners pilot program, the 16 Iowa foster and adoptive parent association, the child 17 and family policy center, youth & shelter services, 18 inc., and the youth policy institute of Iowa. The 19 panel shall seek additional support from national 20 experts and technical assistance resources with 21 experience in state efforts to improve child welfare 22 systems with the types of approaches described by this 23 subsection. The panel shall provide a preliminary 24 report on or before October 1, 2014, to the general 25 assembly and the governor, and a final report at a 26 later date. The panel shall produce for distribution 27 through the department the following documents: a. For general distribution to all families, a 28 29 family rights guide to child protective services that 30 describes what constitutes child abuse and neglect 31 under Iowa law, the child abuse assessment process, 32 the rights families have in that process to request 33 services, and the rights and options such families 34 have to make appeals and secure representation and 35 support. At a minimum, the rights guide shall be 36 translated into the four most common languages other 37 than English spoken in Iowa by persons of limited 38 English proficiency, and the department shall make 39 available interpreters for persons of limited English 40 proficiency in other languages to review the guide and 41 its contents with families. Upon completion, the quide 42 shall be provided to all families who are subject to a 43 child abuse investigation. 44 b. For distribution to children and families 45 engaged processes which may lead to an adjudication 46 under chapter 232 and foster care placement, a child 47 and youth rights guide to foster care that expands upon 48 the bill of rights created by AMP youth. The initial 49 guide shall be directed to older youth ages 12 through 50 17 and shall describe the foster care process and the

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1 rights children engaged in foster care processes have 2 to services, representation, and support and to be 3 heard in developing their permanency plans.> 4 65. Page 58, line 20, by striking <16,304,602> and 5 inserting <16,422,302> 66. Page 58, line 26, by striking <\$132,300> and 6 7 inserting <\$150,000> 8 67. Page 59, before line 6 by inserting: <5B. Of the funds appropriated in this section, 9 10 \$50,000 shall be used by the department of human 11 services to contract with an independent researcher 12 with expertise in both aging and disability population 13 issues to evaluate the current provision of specialized 14 services to individuals with a mental illness or an 15 intellectual disability residing in nursing facilities 16 in the state and develop a quality assurance model to 17 ensure that nursing facility residents with a mental 18 illness or an intellectual disability are receiving 19 effective specialized services pursuant to the federal 20 Nursing Home Reform Act. In evaluating the current 21 provision of specialized services, the contractor 22 shall select nursing facilities with higher than 23 average numbers of residents with a mental illness 24 or an intellectual disability. In evaluating the 25 current specialized services the contractor shall 26 determine whether the specialized services are 27 individualized, provided in addition to basic nursing 28 facility services, and appropriate to meet the needs 29 of the individual to assist in transitioning to a 30 less restrictive, more integrated environment. The 31 contractor shall also determine whether the specialized 32 services are included in the residents' plans of 33 care; whether the specialized services were provided 34 by a mental health or intellectual disabilities 35 professional; the cost of and funding source for the 36 specialized services; whether the specialized services 37 were effective in treating or habilitating residents, 38 improving the residents' level of functioning, and 39 enhancing the residents' ability to live in the 40 community with appropriate services and supports; how 41 many residents for whom specialized services were 42 provided were able to transition to a less restrictive 43 placement; and the projected savings if residents 44 received effective specialized services, avoided 45 hospitalizations, and transitioned to living in less 46 restrictive settings with appropriate services and 47 supports. The department shall report the results 48 of the evaluation and the proposed quality assurance 49 model to the individuals designated by this Act for 50 submission of reports by December 15, 2014.>

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1 68. Page 59, by striking line 21 and inserting 2 <exceed \$268,712,511 \$284,878,824. Of this amount, not more than \$2,000,000 shall be used for reimbursement 3 4 of nursing facilities to supplement the shortfall 5 attributable to the rebasing of nursing facility 6 rates in accordance with this 2013 Act, section 7 29, subsection 1, paragraph "a", subparagraph (2), 8 beginning January 1, 2015.> 69. Page 59, after line 21 by inserting: 9 10 <Sec. . 2013 Iowa Acts, chapter 138, section 11 159, subsection 1, paragraph a, is amended by adding 12 the following new subparagraph: The department of 13 NEW SUBPARAGRAPH. (4) 14 human services shall release all retroactive rate 15 determinations and payments within 90 days of receipt 16 of approval from the centers for Medicare and Medicaid 17 services of the United States department of health 18 and human services and no later than March 31 of the 19 calendar year that falls within the current fiscal year 20 of the appropriation addressed by this paragraph "a".> 70. Page 60, line 24, after <year> by inserting <as 21 22 specified in subparagraph (5), as enacted in this 201423 Act> 71. Page 60, line 28, by striking <October 1, 2015> 24 25 and inserting <January 1, 2015> 26 72. Page 60, line 31, after <year> by inserting <as 27 specified in subparagraph (5), as enacted by this 2014 28 Act> 29 73. Page 60, after line 31 by inserting: 30 <Sec. . 2013 Iowa Acts, chapter 138, section 31 159, subsection 1, paragraph c, is amended by adding 32 the following new subparagraph: NEW SUBPARAGRAPH. 33 (5) Of the amount appropriated 34 for the medical assistance program for the fiscal 35 year, not more than \$3,000,000 shall be used for 36 reimbursement of inpatient and outpatient hospital 37 services attributable to rebasing as provided in 38 subparagraphs (1) and (2).> 39 74. Page 61, line 13, by striking <October 1, 2014> 40 and inserting <2014 January 1, 2015> 75. Page 61, after line 31 by inserting: 41 42 2013 Iowa Acts, chapter 138, section <Sec. • 43 159, subsection 1, paragraph q, is amended to read as 44 follows: For the fiscal year beginning July 1, 2014, 45 q. 46 the reimbursement rate for emergency medical service 47 providers shall be increased by 10 percent over the 48 rate rates in effect on June 30, 2014. 49 . 2013 Iowa Acts, chapter 138, section 159, Sec. 50 subsection 1, is amended by adding the following new

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1 paragraph: 2 NEW PARAGRAPH. r. For the fiscal year 3 beginning July 1, 2014, the reimbursement rate for 4 ophthalmologists shall be increased by five percent 5 over the rates in effect on June 30, 2014.> 6 76. Page 62, line 13, after <subsection.> by 7 inserting <Through December 31, 2014, the combined 8 reimbursement rate shall remain at the rate in effect 9 on June 30, 2014, and on January 1, 2015, shall be 10 changed as provided in paragraph "b".> 77. Page 62, lines 14 and 15, by striking <June 30> 11 12 and inserting <December 31> 13 Page 62, lines 18 and 19, by striking <for 78. 14 the fiscal year beginning July 1, 2014> and inserting 15 <effective January 1, 2015>> 16 Page 66, line 6, after <APPROPRIATIONS> by 79. 17 inserting <AND OTHER PRIOR PROVISIONS> 18 80. Page 66, after line 6 by inserting: 19 <SAFETY NET - CARE COORDINATION 20 2013 Iowa Acts, chapter 138, section Sec. 21 3, subsection 4, paragraph p, is amended to read as 22 follows: 23 p. Of the funds appropriated in this section, 24 \$1,158,150 is allocated to the Iowa collaborative 25 safety net provider network established pursuant 26 to section 135.153 to be used for the development 27 and implementation of a statewide regionally based 28 network to provide an integrated approach to health 29 care delivery through care coordination that supports 30 primary care providers and links patients with 31 community resources necessary to empower patients in 32 addressing biomedical and social determinants of health 33 to improve health outcomes. The Iowa collaborative 34 safety net provider network shall work in conjunction 35 with the department of human services to align the 36 integrated network with the health care delivery 37 system model developed under the state innovation 38 models initiative grant. The Iowa collaborative 39 safety net provider network shall submit a progress 40 report to the individuals designated in this Act for 41 submission of reports by December 31, 2013, including 42 progress in developing and implementing the network, 43 how the funds were distributed and used in developing 44 and implementing the network, and the remaining 45 needs in developing and implementing the network. 46 Notwithstanding section 8.33, moneys allocated in this 47 paragraph that remain unencumbered or unobligated at 48 the close of the fiscal year shall not revert but shall 49 remain available for expenditure for the purposes 50 designated until the close of the succeeding fiscal

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l year.> 2 81. Page 66, by striking lines 7 through 21. Page 69, line 15, after <this section> by 3 82. 4 inserting <, and subject to the Medicaid offset 5 amendments in section 426B.3, subsection 5, as amended 6 by this division of this 2014 Act> Page 70, line 27, after <section> by inserting 7 83. 8 <, and subject to the Medicaid offset amendments 9 in section 426B.3, subsection 5, as amended by this 10 division of this 2014 Act> 11 84. Page 71, line 7, after <division.> by inserting 12 <The protocols and program models shall not include 13 provisions that would interfere with the ability 14 of any mental health and disability services region 15 approved under section 331.389 operating as an 16 employment network for the federal social security 17 administration's ticket to work program for persons 18 with disabilities to collect any milestone or outcome 19 payments.> 85. Page 71, after line 13 by inserting: 20 21 <Sec. PROVISIONAL REGIONALIZATION • 22 AUTHORIZATION. 23 1. During the time period beginning on the 24 effective date of this section and ending June 30, 25 2015, upon receiving an application from Mahaska and 26 Marion counties, the director of human services may 27 authorize the counties to form and operate a mental 28 health and disability services region on a provisional 29 basis for up to 12 months in accordance with this 30 section. 31 2. Unless the director grants an exception to 32 policy allowing the counties and their region, 33 during the provisional operation time period, to 34 meet a requirement through an alternative means, the 35 counties and their region shall comply with all of 36 the requirements applicable to a mental health and 37 disability services region under chapter 331 and other 38 law applicable to regions including but not limited to 39 the exemption provisions in 441 IAC 25.91. 40 Prior to the end of the provisional operation 3. 41 time period, the director may reauthorize on a one-time 42 basis the region to operate provisionally for an 43 additional time period of up to 12 months. If the director determines the two counties 44 4. 45 and their region are not in compliance with the 46 requirements under subsection 2 during any provisional 47 operation time period and that compliance will not be 48 achieved through a corrective action plan, the director 49 may assign each county to a region contiguous to the 50 county. The region assigned shall amend its chapter

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1 28E agreement and other operating requirements and 2 policies to accept the assigned county.> 3 86. By striking page 71, line 14, through page 72, 4 line 2. 5 87. Page 72, by striking lines 3 through 22. 6 Page 72, before line 23 by inserting: 88. 7 . Section 230.1, subsection 1, Code 2014, <Sec. 8 is amended to read as follows: 9 1. The necessary and legal costs and expenses 10 attending the taking into custody, care, investigation, 11 admission, commitment, and support of a person with 12 mental illness admitted or committed to a state 13 hospital shall be paid by a county or by the state as 14 follows: 15 a. If the person is eighteen years of age or older, 16 as follows: (1) The costs attributed to mental illness shall 17 18 be paid by the regional administrator on behalf of the 19 person's county of residence. (2) The costs attributed to a substance-related 20 21 disorder shall be paid by the person's county of 22 residence. 23 (3) The costs attributable to a dual diagnosis of 24 mental illness and a substance-related disorder may be 25 split as provided in section 226.9C. 26 By the state as a state case if such person has b. 27 no residence in this state, if the person's residence 28 is unknown, or if the person is under eighteen years 29 of age.> 30 89. Page 73, by striking lines 1 through 6 and 31 inserting <anticipated, the regional administrator 32 shall reserve an adequate amount for cash flow of 33 expenditure obligations in the first quarter of the 34 next fiscal year. Residual funding remaining after the 35 cash> 36 90. Page 73, after line 10 by inserting: <Sec. . Section 331.393, subsection 2, Code 37 38 2014, is amended by adding the following new paragraph: 39 NEW PARAGRAPH. h. The financial eligibility 40 requirements for service under the regional service 41 system. A plan that otherwise incorporates the 42 financial eligibility requirements of section 331.395 43 but allows eligibility for persons with income above 44 one hundred fifty percent of the federal poverty 45 level as described in section 331.395, subsection 2, 46 paragraph "b", or for persons with resources above 47 the minimum resource limitations adopted pursuant to 48 section 331.395, subsection 1, paragraph "c", shall 49 be deemed by the department to be in compliance with 50 financial eligibility requirements of section 331.395.>

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1 91. Page 73, by striking lines 22 through 25 and 2 inserting <county services fund to address cash flow 3 of expenditure obligations in the first quarter of the 4 next fiscal year. The cash> 92. Page 74, by striking lines 22 and 23 and 5 6 inserting: 7 Section 426B.3, subsection 5, Code 2014, <Sec. 8 is amended to read as follows:> 9 <Sec. . 5. *a.* For the purposes of this 10 subsection, "Medicaid offset amount" means the 11 projected amount for a fiscal year that would have 12 been paid from a county's services fund for those 13 services for persons individuals eligible under the 14 county's approved service management plan that would 15 be non-Medicaid services, but due to the persons' 16 individuals' enrollment in the Iowa health and wellness 17 plan established under chapter 249N, those services are 18 instead covered under chapter 249N.> 93. By striking page 74, line 24, through page 75, 19 20 line 26, and inserting: 21 <b. For the fiscal year beginning July 1, 2013 22 2014, and succeeding fiscal years, the department 23 of human services shall calculate a Medicaid offset 24 amount for each county for the fiscal year. The 25 department shall adopt rules in consultation with 26 the county finance committee and the Iowa state 27 association of counties specifying the information to 28 be used in calculating a Medicaid offset amount. The 29 information used shall only include but is not limited 30 to identification of specific services and supports 31 that would otherwise be payable by the county for 32 persons eligible under a county's approved service 33 management plan but are instead paid by the actual 34 amounts expended from the county's services fund for 35 services and supports provided to individuals who 36 enrolled in the Iowa health and wellness plan during 37 that fiscal year. For purposes of calculating the 38 offset amount, it shall be assumed the expenditures 39 for the same services and supports under the plan are 40 no more than the amount expended by the county for 41 those services and supports in that fiscal year. The 42 initial offset amount calculated for a county shall be 43 subject to submitted by October 15 for review, prior 44 to its certification, by the auditor of that county or 45 subject to independent audit state and by the fiscal 46 agent for the region to which the county belongs. 47 The results of the review shall be submitted to the 48 department by December 1. The Medicaid offset amounts 49 amount calculated by the department for a county for 50 a fiscal year are is not official until certified by

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1 the director of human services and submitted to the 2 governor and general assembly by October 15 immediately January 1 following the end of the fiscal year for 3 4 which the offset amounts were calculated. c. The Medicaid offset amounts certified for each 5 6 county by the director of human services for the fiscal 7 year beginning July 1, 2013, shall be annualized by 8 doubling the amounts. For the fiscal year beginning 9 July 1, 2014, a county shall repay the state from any 10 equalization payment due the county for the fiscal 11 year, eighty percent of the county's annualized 12 Medicaid offset amount for the fiscal year beginning 13 July 1, 2013. To the extent a county's repayment 14 obligation for the fiscal year beginning July 1, 2014, 15 exceeds the amount of any equalization payment due the 16 county for the fiscal year, the county shall, for the 17 following fiscal year, reduce the dollar amount of 18 the county's services fund levy by the amount of the 19 excess. 20 d. c. For the fiscal year beginning July 1, 21 2015, and succeeding fiscal years, a county shall 22 repay the state from any equalization payment due 23 the county for the fiscal year, eighty percent of 24 the county's Medicaid offset amount certified for 25 the previous fiscal year. To the extent a county's 26 repayment obligation for a fiscal year exceeds the 27 amount of any equalization payment due the county for 28 that fiscal year, the county shall, for the following 29 fiscal year, reduce the dollar amount of the county's 30 services fund levy by the amount of the excess. A 31 county's obligation for repayment of the offset amount 32 calculated for the county shall be reduced as necessary 33 to maintain, for the fiscal year of repayment or levy 34 reduction, the county's cash flow amount under section 35 331.424A and the amounts necessary for the county's 36 share of services provided under the regional service 37 system management plan approved for the fiscal year in 38 accordance with section 331.393. 39 d. A county's repayment pursuant to this e, 40 subsection shall be remitted on or before January 41 February 1 of the fiscal year in which repayment is 42 due and shall be credited to the property tax relief 43 fund. Moneys credited to the property tax relief 44 fund in accordance with this paragraph are subject to 45 appropriation by the general assembly to support mental 46 health and disability services administered by the 47 regional system.> 48 94. Page 76, after line 15 by inserting: <Sec. . EFFECTIVE UPON ENACTMENT. The following 49 50 provisions of this division of this Act, being deemed

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1 of immediate importance, take effect upon enactment: 2 The section providing a provisional 1. 3 regionalization authorization. 2. The section amending 2013 Iowa Acts, chapter 4 5 136, section 11.> 95. Page 76, after line 21 by inserting: 6 7 <Sec. . Section 249A.4, subsection 10, Code 8 2014, is amended by adding the following new paragraph: NEW PARAGRAPH. c. (1) A nursing facility that 9 10 utilizes the supplementation option and receives 11 supplementation under this subsection during any 12 calendar year, shall report to the department of 13 human services, annually, by January 15, the following 14 information for the preceding calendar year: (a) The total number of nursing facility beds 15 16 available at the nursing facility, the number of such 17 beds available in private rooms, and the number of such 18 beds available in other types of rooms. 19 (b) The average occupancy rate of the facility on 20 a monthly basis. 21 The total number of residents for which (C) 22 supplementation was utilized. 23 (d) The average private pay charge for a private 24 room in the nursing facility. (e) For each resident for whom supplementation 25 26 was utilized, the total charge to the resident for 27 the private room, the portion of the total charge 28 reimbursed under the Medicaid program, and the total 29 charge reimbursed through supplementation. 30 (2) The department shall compile the information 31 received and shall submit the compilation to the 32 general assembly, annually by February 15.> 33 96. Page 76, after line 23 by inserting: 34 <Sec. . NEW SECTION. 35D.7A Supplemental</pre> 35 stipend. In addition to any amount otherwise retained by or 36 37 provided as a personal needs allowance to a member or 38 a member's spouse under this chapter, a member and 39 the member's spouse, if applicable, shall receive a 40 supplemental stipend of thirty dollars per month. The 41 supplemental stipend shall not be treated as income of 42 the resident for purposes of medical assistance program 43 eligibility or client participation. 44 97. Page 76, by striking lines 24 through 31. 98. Page 76, before line 32 by inserting: 45 . MEDICAID AND HAWK-I STATE PLAN AMENDMENTS 46 Sec. 47 AND WAIVERS - NOTIFICATION. The department of human 48 services shall notify the chairpersons and ranking 49 members of the joint appropriations subcommittee on 50 health and human services, the chairpersons and ranking

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1 members of the committees on human resources of the 2 senate and house of representatives, the legislative 3 services agency, and the legislative caucus staffs 4 prior to submission of any Medicaid or hawk-i program 5 state plan amendment or waiver to the centers for 6 Medicare and Medicaid services of the United States 7 department of health and human services. . FREE PARKING OPTIONS - CHILDREN WITH 8 Sec. 9 CHRONIC CONDITIONS. The university of Iowa hospitals 10 and clinics shall develop and implement by October 1, 11 2014, a free parking option for the use by families of 12 children who are admitted to the hospital for extended 13 periods of time or who visit the hospital routinely for 14 treatment for cancer or other chronic conditions. The 15 option may provide for assignment of one free visitor 16 parking pass to the child for use by the family as 17 the family deems appropriate, validation of parking 18 tickets, provision of a reserved lot in close proximity 19 to the hospital and easily accessible on foot, or 20 issuance of parking passes valid in the hospital 21 parking area. . CHILD WELFARE SERVICES COMMISSION. 22 Sec. 23 A child welfare services commission is created 1. 24 under the authority of the legislative council. The commission membership shall include the 25 2. 26 following persons: 27 The director of human services or the director's a. 28 designee. 29 b. The administrator of child welfare programs 30 under the department of human services or the 31 administrator's designee. 32 c. The administrator of the division of criminal 33 and juvenile justice planning in the department of 34 human rights or the administrator's designee. The administrator of the child advocacy board 35 d. 36 in the department of inspections and appeals or the 37 administrator's designee. 38 The chief justice of the supreme court or the e. 39 chief justice's designee. 40 The director of the department of education or f. 41 the director's designee. 42 The executive director of the Iowa foster and q. 43 adoptive parent association or the executive director's 44 designee. The executive director of the coalition for 45 h. 46 family and children's services in Iowa or the executive 47 director's designee. The presiding officer of the Iowa juvenile 48 i. 49 court services association or the presiding officer's 50 designee.

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1 j. The director of the child health specialty 2 clinics at the university of Iowa or the director's 3 designee. A youth member of the achieving maximum 4 k. 5 potential program designated by the program's director. 6 1. The director of the child and family policy 7 center or the director's designee. m. Members of the general assembly appointed by the 8 9 legislative council. 10 n. Other persons designated by the legislative ll council. In addition to the legislative services agency, 12 3. 13 the legislative council may employ or contract with a 14 person or persons to assist the commission in carrying 15 out its duties. 16 The commission shall perform the following 4. 17 duties: 18 a. Review the array of child welfare services in 19 the state. 20 Identify options for improving the coordination b. 21 and collaboration between the public and private 22 entities involved with child welfare services. Direct special attention to children's mental 23 c. 24 and behavioral health services. 25 d. Identify policies to support the growth and 26 expansion of community-based pediatric integrated 27 health homes. 28 Identify options to support continuous e. 29 improvement of pediatric mental health services and 30 innovation by service providers of such services at the 31 state and community levels. Consider proposals for creation of a center of 32 f. 33 collaborative children's mental and behavioral health 34 services. Evaluate the adequacy of the public funding of 35 q. 36 child welfare services and identify options to address 37 shortfalls and for shifting resources. 38 Of the amount appropriated in this 2014 Iowa 5. 39 Act to the department of human services for general 40 administration for the fiscal year beginning July 41 1, 2014, and ending June 30, 2014, \$50,000 shall be 42 transferred to the legislative services agency to 43 be used for the child welfare services commission in 44 accordance with this section. 6. The commission shall submit a final report 45 46 with findings and recommendations to the governor and 47 general assembly for action in the 2015 legislative 48 session.> 49 99. By striking page 76, line 32, through page 77, 50 line 21.

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Page 78, line 14, after <limited> by inserting 1 100. 2 <to> 3 101. Page 78, after line 26 by inserting: <STATE CHILD CARE ASSISTANCE 4 5 Sec. Section 237A.13, subsection 7, paragraphs 6 a and c, Code 2014, are amended to read as follows: Families with an income at or below one hundred 7 a. 8 percent of the federal poverty level whose members are 9 employed, for at least twenty-eight hours per week in 10 the aggregate, are employed or are participating at a 11 satisfactory level in an approved training program or 12 educational program, and parents with a family income 13 at or below one hundred percent of the federal poverty 14 level who are under the age of twenty-one years and are 15 participating in an educational program leading to a 16 high school diploma or the equivalent. Families with an income of more than one hundred 17 C. 18 percent but not more than one hundred forty-five 19 percent of the federal poverty level whose members are 20 employed, for at least twenty-eight hours per week in 21 the aggregate, are employed or are participating at a 22 satisfactory level in an approved training program or 23 educational program. . Section 237A.13, subsection 8, Code 2014, 24 Sec. 25 is amended to read as follows: Nothing in this section shall be construed 26 8. 27 as or is intended as, or shall imply, a grant of 28 entitlement for services to persons who are eligible 29 for assistance due to an income level or other 30 eligibility circumstance addressed in this section. 31 Any state obligation to provide services pursuant to 32 this section is limited to the extent of the funds 33 appropriated for the purposes of state child care 34 assistance. The department shall not redetermine the 35 eligibility of a program participant more frequently 36 than every twelve months. 37 . STATE CHILD CARE ASSISTANCE APPLICATIONS Sec. 38 — INFORMATION TECHNOLOGY. 39 1. The department of human services shall review 40 the application form and other elements of the process 41 used by applicants to apply for the state child care 42 assistance program. The purpose of the review is to 43 simplify the process by eliminating requirements to 44 provide unneeded or redundant information and improving 45 the wording of the application, and identifying other 46 options for improvement. The department shall report 47 the results of the review to the governor and general 48 assembly on or before December 1, 2014. 2. The department shall implement an application 49 50 process enhancement so that applicants for the state

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1 child care assistance program may apply for the program 2 using information technology devices. . IMPLEMENTATION. The department of human 3 Sec. 4 services shall adopt rules and take other actions as 5 necessary to implement, as state child care assistance 6 program eligibility provisions, the amendments to 7 section 237A.13 in this division of this Act, on July 8 1, 2014. 9 DIVISION STATE TRAINING SCHOOLS - EDUCATION 10 11 Sec. . LEGISLATIVE FINDINGS. The general 12 assembly finds there is a need to improve the system 13 to meet the needs of children who have committed 14 a delinguent act, have been abused, neglected, or 15 subjected to trauma, or have other significant needs 16 that put the safety of the children or the public at 17 risk. The areas for system improvement include but are 18 not limited to all of the following: 19 1. Providing equity in the services available for 20 both the male and female children involved in the 21 system. 22 2. Providing appropriate safeguards to ensure 23 children in placements are safe and getting their needs 24 met. 25 3. Ensuring that education and training services 26 meet state and federal requirements and prepare the 27 children for long-term success. 28 4. Engaging children in services after an 29 out-of-home placement to prevent the need for placement 30 from reoccurring. 5. Providing an effective system to support 31 32 children when they attain adulthood in order to prevent 33 their engagement with the adult criminal justice 34 system. 35 IMPLEMENTATION. Sec. As the level of service for juvenile delinguent 36 1. 37 females provided for in this Act does not currently 38 exist in the state and represents a gap in the 39 continuum of care for juvenile females, reopening, and 40 making necessary changes in the facilities of the Iowa 41 juvenile home of Toledo provides the best means of 42 expeditiously fulfilling the duties outlined in section 43 233B.1, as enacted by this Act. 44 2. In reopening the facility at Toledo as the 45 state training school for juvenile delinquent females 46 in accordance with this division of this Act, the 47 department of human services shall phase in the 48 following provisions as follows: 49 The department of human services shall begin a. 50 implementation of the requirements for the two state

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1 training schools to be accredited as secure juvenile 2 correctional facilities and to comply with other 3 regulatory requirements in accordance with section 4 233A.1, subsection 7, and section 233B.1, subsection 5 7, upon enactment of this Act and shall complete the 6 correctional association accreditation by June 30, 7 2017. The department shall propose a schedule to the 8 governor and general assembly on or before December 9 15, 2014, for compliance with the other regulatory 10 requirements. 11 b. Education services in accordance with section 12 282.33, as amended by this division of this Act, shall 13 be developed by the close of the fiscal year beginning 14 July 1, 2014, in conjunction with the department of 15 education, affected area education agencies, affected 16 school districts, and other stakeholders. 17 Sec. . Section 232.2, subsection 22, paragraph 18 b, subparagraph (3), Code 2014, is amended to read as 19 follows: 20 Visiting the home, residence, or both home and (3) 21 residence of the child and any prospective home or 22 residence of the child, including each time placement 23 is changed. A child in a placement other than with 24 the child's parent shall be visited at the placement 25 at least quarterly. 26 Sec. • Section 232.2, Code 2014, is amended by 27 adding the following new subsection: "State training school" 28 NEW SUBSECTION. 54A. 29 means the state training school for female juvenile 30 delinquents at Toledo maintained in accordance with 31 chapter 233B or the state training school for male 32 juvenile delinquents at Eldora maintained in accordance 33 with chapter 233A. 34 Sec. . Section 232.49, subsection 2, Code 2014, 35 is amended to read as follows: When possible an examination shall be conducted 36 2. 37 on an outpatient basis, but the court may, if it deems 38 necessary, commit the child to a state training school 39 or to a suitable hospital, facility, or institution for 40 the purpose of examination. Commitment for examination 41 shall not exceed thirty days and the civil commitment 42 provisions of chapter 229 shall not apply. 43 . Section 232.49, subsection 3, paragraph Sec. 44 b, Code $\overline{2014}$, is amended to read as follows: An examination shall be conducted on an 45 *b*. 46 outpatient basis unless the court, the child's counsel, 47 and the parent, guardian, or custodian agree that 48 it is necessary the child be committed to a state 49 training school or to a suitable hospital, facility, or 50 institution for the purpose of examination. Commitment

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1 for examination shall not exceed thirty days and the 2 civil commitment provisions of chapter 229 shall not 3 apply. . Section 232.52, subsection 7, Code 2014, 4 Sec. 5 is amended by adding the following new paragraph: 6 NEW PARAGRAPH. Ob. When the court orders the 7 transfer of legal custody of a child pursuant to 8 subsection 2, paragraph "d", "e", or "f", the child's 9 attorney shall visit the child at the child's placement 10 at least guarterly. . Section 232.102, subsections 3 and 4, 11 Sec. 12 Code 2014, are amended by striking the subsections. Sec. . Section 232.103, subsection 7, Code 2014, 13 14 is amended by striking the subsection. Sec. . Section 233A.1, Code 2014, is amended to 15 16 read as follows: 233A.1 State training school — Eldora and Toledo. 17 18 For the purposes of this chapter, unless the 1. 19 context otherwise requires: "Department" means the department of human 20 a. 21 services. *Director* means the director of human services. 22 b. "State training school" means the state training 23 c. 24 school for male juvenile delinquents at Eldora. "Superintendent" means the superintendent of the 25 d. 26 state training school for male juvenile delinquents. 1. 2. Effective January 1, 1992, a A diagnosis 27 28 and evaluation center and other units are established 29 at Eldora and shall be operated, maintained, and 30 staffed by the department to provide to male juvenile 31 delinquents a program which focuses upon appropriate 32 developmental skills, treatment, placements, and 33 rehabilitation. 34 2. The diagnosis and evaluation center which is 35 used to identify appropriate treatment and placement 36 alternatives for juveniles and any other units for 37 juvenile delinguents which are located at Eldora and 38 the unit for juvenile delinquents at Toledo shall 39 together be known as the "state training school". 40 For the purposes of this chapter "director" means the 41 director of human services and "superintendent" means 42 the administrator in charge of the diagnosis and 43 evaluation center for juvenile delinguents and other 44 units at Eldora and the unit for juvenile delinguents 45 at Toledo. 46 3. The number of children present at any one time 47 at the state training school at Eldora shall not exceed 48 the population guidelines established under 1990 49 Iowa Acts, chapter 1239, section 21, as adjusted for 50 subsequent changes in the capacity at the training

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1 school. 2 4. Each child placed at the state training school 3 and any other child receiving an examination at the 4 state training school by order of the court shall 5 receive a written plan for services. The plan for 6 services provided by the state training school to 7 a child shall identify any physical, emotional, 8 intellectual, behavioral, or mental health disorder or 9 condition affecting the child and recommend treatment 10 to address the disorder or condition, identify 11 any substance-related disorder of the child or the 12 child's family and recommend treatment to address the 13 disorder, and assess the child's educational status and 14 recommend action to address any identified educational 15 deficiency, and for follow-up services, identify 16 specific public and private service providers with the 17 capacity to meet the child's needs. A copy of the plan 18 for services and any subsequent amendment to the plan 19 shall be submitted to the child, the child's attorney, 20 and the juvenile court. 5. The state training school shall facilitate 21 22 the provision of follow-up services to children, who 23 received placement services at the state training 24 school and who remain under the jurisdiction of the 25 juvenile court, as necessary to meet the long-term 26 needs of the children as they age into adulthood. The 27 plan for follow-up services shall be developed with 28 the child in conjunction with juvenile court services 29 and the child's attorney. The provision of follow-up 30 services for children who remain under the jurisdiction 31 of the juvenile court is subject to approval by the 32 juvenile court. Follow-up services shall be provided 33 to support children who are discharged from the state 34 training school during the period beginning twelve 35 months prior to the children becoming age eighteen and 36 ending on the day prior to the children becoming age 37 eighteen who do not remain under the jurisdiction of 38 the juvenile court. In addition, follow-up services 39 shall be made available to children discharged from the 40 school at any age upon or after the children become age 41 eighteen and continuing until at least age twenty-one. 6. For any child placed at the state training 42 43 school, the school shall provide a written plan 44 regarding the placement status of the child on or about 45 the time the child becomes age eighteen. The plan 46 shall, while giving consideration to the treatment 47 needs of the child, also give consideration to the 48 long-term needs of the child upon becoming age eighteen 49 including needs for vocational training or higher 50 education. Given these considerations, the plan shall

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1 identify placement options to meet the child's needs 2 that will not negatively affect the child's adult 3 eligibility for assistance provided with federal 4 financial participation. The assistance addressed 5 shall include but is not limited to the preparation 6 for adult living program under section 234.46, the 7 medical assistance program, the Iowa aftercare services 8 network, the federal educational and training vouchers 9 program for youths aging out of foster care, and the 10 federal job corps program. 11 7. The department shall cause the state training 12 school to be accredited as a secure juvenile 13 correctional facility by the American correctional 14 association, to meet the standards adopted by the 15 department for approval of a juvenile detention home, 16 and to meet applicable standards for programs providing 17 residential services for children paid for by a managed 18 care or prepaid services contract under the medical 19 assistance program. The standards applied in addition 20 to the American correctional association accreditation 21 requirements shall include but are not limited to the 22 minimum qualifications of staff. The standards and 23 sanctions for noncompliance shall be identified in 24 conjunction with the department of inspections and 25 appeals and experts who are not employed by or under 26 contract with the department. A regular assessment 27 of compliance with the standards shall be performed 28 by the department of inspections and appeals and that 29 department shall submit a report on each assessment to 30 the governor and general assembly. 31 8. The director and the superintendent for the 32 state training school shall provide on an ongoing 33 basis for the school's programs, facilities, and 34 services, and for the training of staff in order to 35 apply evidence-based practices and other recognized 36 contemporary approaches to ensure that the care 37 for the children served by the school is of high 38 quality. The director's and superintendent's efforts 39 and recommendations to comply with this requirement 40 shall be documented in the annual budget and financial 41 reporting submitted to the governor and the general 42 assembly. 43 Sec. Section 233A.4, Code 2014, is amended to 44 read as follows: 233A.4 Education and training. 45 46 The state training school shall provide a positive 47 living experience for older juveniles who require 48 secure custody and who live at the state training 49 school for an extended period of time. The education 50 and training programs provided to the juveniles shall HF2463.4166.S (2) 85

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1 reflect the age level and extended period of stay by 2 focusing upon appropriate developmental skills to 3 prepare the juveniles for productive living. The 4 education services provided to the children placed 5 at the state training school shall be provided in 6 accordance with section 282.33. 7 Section 233B.1, Code 2014, is amended to Sec. 8 read as follows: 233B.1 Definitions — purpose — services — 9 10 population limit. 11 1. For the purpose of this chapter, unless the 12 context otherwise requires: a. "Department" means the department of human 13 14 services. a. b. *``Administrator"* or *``director"* ``Director" 15 16 means the director of the department of human services.
17 b. c. "Home" "State training school" means the Iowa 18 juvenile home state training school for female juvenile 19 delinquents at Toledo maintained in accordance with 20 this chapter. *Superintendent* means the superintendent of 21 c. d. 22 the Iowa juvenile home state training school for female 23 juvenile delinguents. 2. The Iowa juvenile home state training school 24 25 for female juvenile delinquents shall be operated, 26 maintained for the purpose of providing care, custody, 27 and education of the children committed to the 28 home. The children shall be wards of the state. The 29 children's education shall embrace instruction in 30 the common school branches and in such other higher 31 branches as may be practical and will enable the 32 children to gain useful and self-sustaining employment. 33 The administrator and the superintendent of the home 34 shall assist all discharged children in securing 35 suitable homes and proper employment., and staffed 36 by the department of human services to do all of the 37 following for female residents of this state: 38 3. The number of children present at any one 39 time at the Iowa juvenile home shall not exceed the 40 population guidelines established under 1990 Iowa Acts, 41 chapter 1239, section 21, as adjusted for subsequent 42 changes in the capacity at the home. 43 a. Provide gender-responsive services to female 44 children less than age eighteen who have been 45 adjudicated under chapter 232 as delinquent and placed 46 at the state training school in accordance with a court 47 order. b. If provided for by the children's education 48 49 plans, allow for continued placement at the state 50 training school for female children who were placed

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1 at the state training school under paragraph "a" 2 upon the children becoming adults. The purpose of 3 continued placement is for completion of high school 4 education requirements identified in the education 5 plans developed by the provider of educational services 6 for the children. Facilitate the provision of follow-up services 7 C. 8 to children who received placement services at 9 the state training school and who remain under the 10 jurisdiction of the juvenile court, as necessary 11 to meet the long-term needs of the children as they 12 age into adulthood. The plan for follow-up services 13 shall be developed with the child in conjunction with 14 juvenile court services and the child's attorney. 15 The provision of follow-up services for children who 16 remain under the jurisdiction of the juvenile court is 17 subject to approval by the juvenile court. Follow-up 18 services shall be provided to support children who are 19 discharged from the state training school during the 20 period beginning twelve months prior to the children 21 becoming age eighteen and ending on the day prior to 22 the children becoming age eighteen who do not remain 23 under the jurisdiction of the juvenile court. Ιn 24 addition, follow-up services shall be made available to 25 children discharged from the state training school at 26 any age upon or after the children become age eighteen 27 and continuing until at least age twenty-one. 3. Each child placed at the state training school 28 29 and any other child receiving an examination at the 30 state training school by order of the court shall 31 receive a written plan for services. The plan for 32 services provided by the state training school to 33 a child shall identify any physical, emotional, 34 intellectual, behavioral, or mental health disorder or 35 condition affecting the child and recommend treatment 36 to address the disorder or condition, identify 37 any substance-related disorder of the child or the 38 child's family and recommend treatment to address the 39 disorder, and assess the child's educational status and 40 recommend action to address any identified educational 41 deficiency, and for follow-up services, identify 42 specific public and private service providers with the 43 capacity to meet the child's needs. A copy of the plan 44 for services and any subsequent amendment to the plan 45 shall be submitted to the child, the child's attorney, 46 and the juvenile court. 4. For any child placed at the state training 47 48 school, the state training school shall provide a 49 written plan regarding the placement status of the 50 child on or about the time the child becomes age

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1 eighteen. The plan shall, while giving consideration
 2 to the treatment needs of the child, also give
 3 consideration to the long-term needs of the child
 4 upon becoming age eighteen, including needs for
 5 vocational training or higher education. Given these
 6 considerations, the plan shall identify placement
 7 options to meet the child's needs that will not
 8 negatively affect the child's eligibility as an adult
9 for assistance provided through federal financial
10 participation. The assistance addressed shall include
11 but is not limited to the preparation for adult living
12 program under section 234.46, the medical assistance
13 program, the Iowa aftercare services network, the
14 federal educational and training vouchers program for
15 youths aging out of foster care, and the federal job
16 corps program.
17
         The department of human services and the
      5.
18 representatives of juvenile court services shall
19 annually recommend a desired capacity for the state
20 training school in the succeeding fiscal year to the
21 governor and general assembly no later than December
22 15. The capacity of the state training school for a
23 fiscal year shall be specified in the appropriations
24 for the school.
      6. The education services provided to the children
25
26 placed at the state training school shall be provided
27 in accordance with section 282.33.
      7. The department shall cause the state training
28
29 school to be accredited as a secure juvenile
30 correctional facility by the American correctional
31 association, to meet the standards adopted by the
32 department for approval of a juvenile detention
33 home, and to meet applicable standards for programs
34 providing residential services for children paid for
35 by a managed care or prepaid services contract under
36 the medical assistance program. The standards applied
37 in addition to the American correctional association
38 accreditation requirements shall include but are not
39 limited to the minimum qualifications of staff and
40 provision of gender-responsive services. The standards
41 and sanctions for noncompliance shall be identified
42 in conjunction with the department of inspections and
43 appeals and experts who are not employed by or under
44 contract with the department. A regular assessment
45 of compliance with the standards shall be performed
46 by the department of inspections and appeals and that
47 department shall submit a report on each assessment to
48 the governor and general assembly.
         The director and the superintendent for the
49
      8.
50 state training school shall provide on an ongoing basis
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1 for the state training school's programs, facilities,
 2 and services, and for the training of staff in order
 3 to apply evidence-based practices and other recognized
 4 contemporary approaches to ensure that the care for the
 5 children served by the state training school is of high
6 quality. The director's and superintendent's efforts
 7 and recommendations to comply with this requirement
 8 shall be documented in the annual budget and financial
9 reporting submitted to the governor and the general
10 assembly.
11
      Sec.
                 Section 233B.2, Code 2014, is amended to
12 read as follows:
      233B.2 Salary.
13
      The salary of the superintendent of the home
14
15 state training school shall be determined by the
16 administrator director in accordance with the state
17 requirements for similar positions.
18
      Sec.
             . Section 233B.3, Code 2014, is amended to
19 read as follows:
20
      233B.3 Admissions Commitments and placements.
21
      Admission to the home shall be granted to resident
22 children of the state under seventeen years of age, as
23 follows, giving preference in the order named:
      1. Neglected or dependent children committed by
24
25 the juvenile court Commitments to and placements at
26 the state training school shall be limited to the
27 commitments and placements specified in section 233B.1.
28
      2. Other destitute children.
                 Section 233B.4, Code 2014, is amended to
29
      Sec. .
30 read as follows:
      233B.4 Procedure.
31
      The procedure for commitment to and placement at the
32
33 home is state training school shall be as provided by
34 chapter 232 and section 233B.3.
35 Sec. Se
36 read as follows:
                 Section 233B.5, Code 2014, is amended to
      233B.5 Transfers.
37
      The administrator director may propose the transfer
38
39 to the home state training school of minor wards of the
40 state from any institution under the administrator's
41 director's charge or under the charge of any other
42 administrator of the department of human services;
43 but no person shall be so transferred who is a person
44 with mental illness or an intellectual disability,
45 or who is incorrigible, or has any vicious habits,
46 or whose presence in the home would be inimical to
47 the moral or physical welfare of the other children
48 within the home, and any such child in the home may be
49 transferred to the proper state institution. However,
50 the superintendent shall only approve the transfer of
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1 minor wards who meet the disposition criteria specified 2 in section 232.52, subsection 2, paragraph "e". 3 Sec. ___. Section 233B.6, Code 2014, is amended to 4 read as follows: 5 233B.6 Profits and earnings. Any money earned by or accrued to the benefit of a 6 7 child who is transferred to, admitted to, or placed in 8 foster care from the home state training school shall 9 be used, held, or otherwise applied for the exclusive 10 benefit of that child, in accordance with section 11 234.37. 12 . Section 233B.7, Code 2014, is amended to Sec. 13 read as follows: 14 233B.7 Rules. 15 All children admitted or committed to the home shall 16 be wards of the state and subject to the rules of the 17 home. Subject to the approval of the administrator, 18 any child received under voluntary application may be 19 expelled by the superintendent for disobedience and 20 refusal to submit to proper discipline. Children shall 21 be discharged upon arriving at the age of eighteen 22 years, or sooner if possessed of sufficient means to 23 provide for themselves. The department shall adopt 24 rules to administer and operate the state training 25 school in the best interests of the children placed at 26 the state training school. 27 Sec. . Section 234.6, Code 2014, is amended by 28 adding the following new subsection: 29 NEW SUBSECTION. 11. Provide upon request 30 assessment and consultation services to public and 31 private providers of child welfare services to address 32 the needs of children who have challenging behaviors. . Section 234.46, subsection 1, paragraph 33 Sec. 34 c, Code 2014, is amended to read as follows: c. At the time the person became age eighteen, the 35 36 person received foster care services that were paid for 37 by the state under section 234.35, services at a state 38 training school, services at a juvenile shelter care 39 home, or services at a juvenile detention home and the 40 person is no longer receiving such services. Sec. . Section 234.46, subsection 2, unnumbered 41 42 paragraph 1, Code 2014, is amended to read as follows: 43 The division shall establish a preparation for 44 adult living program directed to young adults. The 45 purpose of the program is to assist persons who are 46 leaving foster care and other court-ordered services 47 at age eighteen or older in making the transition 48 to self-sufficiency. The department shall adopt 49 rules necessary for administration of the program, 50 including but not limited to eligibility criteria for

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1 young adult participation and the services and other 2 support available under the program. The rules shall 3 provide for participation of each person who meets the 4 definition of young adult on the same basis, regardless 5 of whether federal financial participation is provided. 6 The services and other support available under the 7 program may include but are not limited to any of the 8 following: Section 282.33, Code 2014, is amended by 9 Sec. 10 striking the section and inserting in lieu thereof the ll following: 282.33 Funding for children residing in state mental 12 13 health institutes or training schools. 1. An area education agency shall provide or make 14 15 provision for an appropriate educational program 16 for each child who lives in one of the following 17 institutions for children under the jurisdiction of the 18 director of human services: Mental health institute, Cherokee, Iowa. 19 а. 20 b. Mental health institute, Independence, Iowa. 21 State training school for male juvenile C. 22 delinquents, Eldora, Iowa, under chapter 233A. State training school for female juvenile 23 d. 24 delinguents, Toledo, Iowa, under chapter 233B. The area education agency shall provide the 25 2. 26 educational program by any one of but not limited to 27 the following: 28 Providing for the enrollment of the child in a. 29 the district of residence of the child, subject to the 30 approval of the district in which the child is living. b. Cooperating with the district of residence 31 32 of the child and obtaining the course of study and 33 textbooks of the child for use in the special facility 34 into which the child has been placed. c. Providing for the enrollment of the child in the 35 36 district in which the child is living, subject to the 37 approval of the district in which the child is living. 38 3. The area education agency shall submit a 39 proposed program and budget to the department of 40 education by January 1 for the next succeeding school 41 year for each institution. The department of education 42 shall review and approve or modify the program and 43 proposed budget and shall notify the department 44 of administrative services and the area education 45 agency of its action by February 1. The department 46 of administrative services shall pay the approved 47 budget amount for an area education agency in monthly 48 installments beginning September 15 and ending June 15 49 of the next succeeding school year. The installments 50 shall be as nearly equal as possible as determined by

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1 the department of management, taking into consideration 2 the relative budget and cash position of the state's 3 resources. The department of administrative services 4 shall transfer the approved budget amount for an 5 area education agency from the moneys appropriated 6 under section 257.16 and make the payment to the area 7 education agency. The area education agency shall 8 submit an accounting for the actual cost of the program 9 to the department of education by August 1 of the 10 following school year. The department shall review 11 and approve or modify all expenditures incurred in 12 compliance with the guidelines pursuant to section 13 256.7, subsection 10, and shall notify the department 14 of administrative services of the approved accounting 15 amount. The approved accounting amount shall be 16 compared with any amounts paid by the department of 17 administrative services to the area education agency 18 and any differences added to or subtracted from the 19 October payment made under this subsection for the next 20 school year. Any amount paid by the department of 21 administrative services shall be deducted monthly from 22 the state foundation aid paid under section 257.16 to 23 all school districts in the state during the subsequent 24 fiscal year. The portion of the total amount of the 25 approved budget that shall be deducted from the state 26 aid of a school district shall be the same as the ratio 27 that the budget enrollment for the budget year of the 28 school district bears to the total budget enrollment in 29 the state for that budget year in which the deduction 30 is made. 31 For purposes of this section, "district of 4. 32 residence" means the school district in which the 33 parent or legal guardian of the child resides or the 34 district in which the district court is located if the 35 district court is the guardian of the child. 36 5. Programs may be provided throughout the calendar 37 year and shall be funded under this section if the 38 school district or area education agency determines a 39 valid educational reason to do so. 40 . REPEAL. Sections 233B.10, 233B.11, Sec. 41 233B.12, 233B.13, and 233B.14, Code 2014, are repealed. . EFFECTIVE UPON ENACTMENT. This division 42 Sec. 43 of this Act, being deemed of immediate importance, 44 takes effect upon enactment. 45 DIVISION STATE TRAINING SCHOOLS - CONFORMING AMENDMENTS 46 Section 137F.1, subsection 7, unnumbered 47 Sec. •

48 paragraph 1, Code 2014, is amended to read as follows: 49 *Food establishment* means an operation that stores, 50 prepares, packages, serves, vends, or otherwise

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1 provides food for human consumption and includes a 2 food service operation in a salvage or distressed food 3 operation, school, summer camp, residential service 4 substance abuse treatment facility, halfway house 5 substance abuse treatment facility, correctional 6 facility operated by the department of corrections, the 7 or state training school, or the Iowa juvenile home. 8 Food establishment" does not include the following: Sec. ____. Section 218.1, subsections 7 and 8, Code 9 10 2014, are amended to read as follows: State training school for male juvenile 11 7. 12 delinquents, Eldora, Iowa, under chapter 233A. 8. Iowa juvenile home State training school for 13 14 female juvenile delinguents, Toledo, Iowa, under 15 chapter 233B. . Section 218.6, subsection 3, Code 2014, 16 Sec. 17 is amended to read as follows: 18 3. The state juvenile institutions consisting of 19 the state training school for male juvenile delinquents 20 at Eldora and the Iowa juvenile home state training 21 school for female juvenile delinquents at Toledo. Sec. ____. Section 259A.6, Code 2014, is amended to 22 23 read as follows: 259A.6 Residents of juvenile institutions and 24 25 juvenile probationers. 26 Notwithstanding the provisions of section 259A.2 a 27 minor who is a resident of a state training school or 28 the Iowa juvenile home or a minor who is placed under 29 the supervision of a juvenile probation office may make 30 application for a high school equivalency diploma and 31 upon successful completion of the program receive a 32 high school equivalency diploma. . Section 261.6, subsection 2, paragraph b, 33 Sec. 34 Code 2014, is amended to read as follows: b. Is age seventeen and has been placed in the 35 36 a state training school or the Iowa juvenile home 37 pursuant to a court order entered under chapter 232 38 under the care and custody of the department of human 39 services. Sec. . Section 261.6, subsection 2, paragraph 40 41 c, subparagraph (4), Code 2014, is amended to read as 42 follows: 43 (4) On the date the person reached age eighteen or 44 during the thirty calendar days preceding or succeeding 45 that date, the person was placed in the a state 46 training school or the Iowa juvenile home pursuant to 47 a court order entered under chapter 232 under the care 48 and custody of the department of human services. Sec. . Section 331.424, subsection 1, paragraph 49 50 a, subparagraph (1), subparagraph division (b), Code

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1 2014, is amended by striking the subparagraph division. Sec. ___. Section 331.756, subsection 51, Code 2 3 2014, is amended by striking the subsection. Sec. . Section 331.802, subsection 3, paragraph 4 5 k, Code $\overline{2014}$, is amended to read as follows: k. Death of a person committed or admitted to, 6 7 committed to, or placed at a state mental health 8 institute, a state resource center, the or a state 9 training school, or the Iowa juvenile home. 10 Sec. . Section 357H.1, subsection 1, Code 2014, ll is amended to read as follows: The board of supervisors of a county with 12 1. 13 less than twenty thousand residents, not counting 14 persons admitted or to, committed to, or placed at an 15 institution enumerated in section 218.1 or 904.102, 16 based upon the 2000 certified federal census, and with 17 a private lake development shall designate an area 18 surrounding the lake, if it is an unincorporated area 19 of the county, a rural improvement zone upon receipt 20 of a petition pursuant to section 357H.2, and upon 21 the board's determination that the area is in need of 22 improvements. Sec. . EFFECTIVE UPON ENACTMENT. 23 This division 24 of this Act, being deemed of immediate importance, 25 takes effect upon enactment.> 26 102. By striking page 87, line 10, through page 27 90, line 2, and inserting: 28 <DIVISION 29 PRIOR AUTHORIZATION Sec. . NEW SECTION. 505.26 Prior authorization 30 31 for prescription drug benefits — standard process and 32 form. As used in this section: 33 1. 34 a. *``Facility", ``health benefit plan", ``health care* 35 professional", "health care provider", "health care 36 services", and "health carrier" mean the same as defined 37 in section 514J.102. b. "Pharmacy benefits manager" means the same as 38 39 defined in section 510B.1. The commissioner shall develop, by rule, a 40 2. 41 process for use by each health carrier and pharmacy 42 benefits manager that requires prior authorization 43 for prescription drug benefits pursuant to a health 44 benefit plan, to submit, on or before January 1, 2015, 45 a single prior authorization form for approval by the 46 commissioner, that each health carrier or pharmacy 47 benefits manager shall be required to use beginning 48 on July 1, 2015. The process shall provide that if a 49 prior authorization form submitted to the commissioner 50 by a health carrier or pharmacy benefits manager is not

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1 approved or disapproved within thirty days after its 2 receipt by the commissioner, the form shall be deemed 3 approved. 3. The commissioner shall develop, by rule, a 4 5 standard prior authorization process which meets all of 6 the following requirements: Health carriers and pharmacy benefits managers 7 a. 8 shall allow health care providers to submit a prior 9 authorization request electronically. 10 Health carriers and pharmacy benefits managers b. 11 shall provide that approval of a prior authorization 12 request shall be valid for a minimum length of time 13 in accordance with the rules adopted under this 14 section. In adopting the rules, the commissioner may 15 consult with health care professionals who seek prior 16 authorization for particular types of drugs, and as the 17 commissioner determines to be appropriate, negotiate 18 standards for such minimum time periods with individual 19 health carriers and pharmacy benefits managers. 20 Health carriers and pharmacy benefits managers C. 21 shall make the following available and accessible on 22 their internet sites: (1) Prior authorization requirements and 23 24 restrictions, including a list of drugs that require 25 prior authorization. 26 (2) Clinical criteria that are easily 27 understandable to health care providers, including 28 clinical criteria for reauthorization of a previously 29 approved drug after the prior authorization period has 30 expired. 31 Standards for submitting and considering (3) 32 requests, including evidence-based guidelines, 33 when possible, for making prior authorization 34 determinations. 35 d. Health carriers shall provide a process for 36 health care providers to appeal a prior authorization 37 determination as provided in chapter 514J. Pharmacv 38 benefits managers shall provide a process for health 39 care providers to appeal a prior authorization 40 determination that is consistent with the process 41 provided in chapter 514J. 42 In adopting a standard prior authorization 4. 43 process, the commissioner shall consider national 44 standards pertaining to electronic prior authorization, 45 such as those developed by the national council for 46 prescription drug programs. 5. A prior authorization form approved by 47 48 the commissioner shall meet all of the following 49 requirements: 50 a. Not exceed two pages in length, except that

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1 a prior authorization form may exceed that length as 2 determined to be appropriate by the commissioner. 3 b. Be available in electronic format.

4 c. Be transmissible in an electronic format or a 5 fax transmission.

Beginning on July 1, 2015, each health carrier 6 6. 7 and pharmacy benefits manager shall use and accept 8 the prior authorization form that was submitted by 9 that health carrier or pharmacy benefits manager and 10 approved for the use of that health carrier or pharmacy 11 benefits manager by the commissioner pursuant to this 12 section. Beginning on July 1, 2015, health care 13 providers shall use and submit the prior authorization 14 form that has been approved for the use of a health 15 carrier or pharmacy benefits manager, when prior 16 authorization is required by a health benefit plan. If a health carrier or pharmacy benefits 17 7. a. 18 manager fails to use or accept the prior authorization 19 form that has been approved for use by the health 20 carrier or pharmacy benefits manager pursuant to this 21 section, or to respond to a health care provider's 22 request for prior authorization of prescription drug 23 benefits within seventy-two hours of the health care 24 provider's submission of the form, the request for 25 prior authorization shall be considered to be approved. 26 b. However, if the prior authorization request is 27 incomplete or additional information is required, the 28 health carrier or pharmacy benefits manager may request 29 the additional information within the seventy-two-hour 30 period and once the additional information is submitted 31 the provisions of paragraph a^{\prime} shall again apply. c. Notwithstanding paragraphs a'' and b'', the 32 33 commissioner may develop, by rule, minimum time periods 34 for a health carrier or pharmacy benefits manager to 35 respond to a health care provider's request for prior 36 authorization of prescription drug benefits or for 37 additional information, that are less than, but in no 38 case exceed seventy-two hours, as the commissioner 39 deems appropriate under the circumstances. 40 Sec. . Section 510B.3, subsection 2, Code 2014, 41 is amended by adding the following new paragraph: 42 NEW PARAGRAPH. c. A process for the submission of 43 forms. NEW SECTION. 510B.9 Submission, 44 Sec. • 45 approval, and use of prior authorization form. 46 A pharmacy benefits manager shall file with and 47 have approved by the commissioner a single prior 48 authorization form as provided in section 505.26. 49 pharmacy benefits manager shall use the single prior

50 authorization form as provided in section 505.26.

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EFFECTIVE UPON ENACTMENT. 1 Sec. This division 2 of this Act, being deemed of immediate importance, 3 takes effect upon enactment.> 103. Page 90, before line 3 by inserting: 4 5 <DIVISION POISON CONTROL CENTER 6 7 POISON CONTROL CENTER - FEDERAL Sec. 8 APPROVAL. The department of human services shall 9 request approval from the centers for Medicare and 10 Medicaid services of the United States department of 11 health and human services to utilize administrative 12 funding under the federal Children's Health Insurance 13 Program Reauthorization Act of 2009, Pub. L. No. 111-3, 14 to provide the maximum federal matching funds available 15 to implement a new health services initiative as 16 provided under section 2105(a)(1)(D)(ii) of the federal 17 Social Security Act, to fund the state poison control 18 center. 19 EFFECTIVE UPON ENACTMENT. This division Sec. 20 of this Act, being deemed of immediate importance, 21 takes effect upon enactment. 22 DIVISION 23 AGING AND LONG-TERM CARE DELIVERY INTERIM COMMITTEE Sec. . INTERIM COMMITTEE ON AGING AND LONG-TERM 24 25 CARE DELIVERY. 26 1. The legislative council is requested to 27 establish a study committee for the 2014 interim to 28 examine issues relating to aging Iowans and long-term 29 care. The interim committee shall comprehensively 30 review the existing long-term care delivery system 31 and make recommendations to create a sustainable, 32 person-centered approach that increases health and life 33 outcomes; supports maximum independence by providing 34 the appropriate level of care and services through a 35 balance of facility-based and home and community-based 36 options; addresses medical and social needs in a 37 coordinated, integrated manner; provides for sufficient 38 resources including a stable, well-qualified workforce; 39 and is fiscally accountable. 40 The interim committee shall provide a forum 2. 41 for open and constructive dialogue among stakeholders 42 representing individuals involved in the delivery and 43 financing of long-term care services and supports, 44 consumers and families of consumers in need of such 45 services and supports, legislators, and representatives 46 of agencies responsible for oversight, funding, and 47 regulation of such services and supports. 48 The interim committee shall specifically 3. 49 address the cost and financing of long-term care and 50 services, the coordination of services among providers,

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1 the availability of and access to a well-qualified 2 workforce including both the compensated workforce 3 and family and other uncompensated caregivers, and 4 the balance between facility-based and home and 5 community-based care and services. In addition, the 6 interim committee shall consider methods to educate 7 consumers and enhance engagement of consumers in the 8 broader conversation regarding long-term care issues, 9 including their experiences with, concerns about, and 10 expectations and recommendations for action regarding 11 the long-term care delivery system in the state. Members of the interim committee shall include 12 4. 13 all of the following: 14 Five members of the senate and five members of a. 15 the house of representatives including the following: 16 (1) The chairpersons and ranking members of the 17 committees on human resources of the senate and house 18 of representatives, or a member of the committee 19 designated by the chairperson or ranking member. The co-chairpersons and ranking members of the 20 (2) 21 joint appropriations subcommittee on health and human 22 services of the senate and house of representatives, 23 or a member of the subcommittee designated by the 24 chairperson or ranking member. Five members of the general public who are 25 b. 26 individual consumers or a member of a consumer's 27 family, one each to be selected by the following: 28 (1) The older Iowans legislature. 29 (2) The Iowa alliance of retired Americans. 30 (3) The Iowa association of area agencies on aging. 31 (4) The Iowa caregivers association. 32 (5) AARP Iowa. 33 The director of the department on aging, or the c. 34 director's designee. The state long-term care ombudsman, or the 35 d. 36 ombudsman's designee. 37 e. Five members who represent those involved in the 38 delivery of long-term care services. 39 5. The interim committee may request from state 40 agencies including the department of human services, 41 the department of public health, the department on 42 aging, the office of long-term care ombudsman, the 43 department of inspections and appeals, the insurance 44 division of the department of commerce, and the 45 department of workforce development, information and 46 assistance as needed to complete its work. The interim committee shall submit its findings 47 6. 48 and recommendations to the general assembly for 49 consideration during the 2015 legislative session. 50 DIVISION

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HEALTHIEST CHILDREN INITIATIVE 1 • NEW SECTION. 135.181 Iowa healthiest 2 Sec. 3 children initiative. 1. The Iowa healthiest children initiative is 4 5 established in the department. The purpose of the 6 initiative is to develop and implement a plan for 7 Iowa children to become the healthiest children in 8 the nation by January 1, 2020. The areas of focus 9 addressed by the initiative shall include improvement 10 of physical, dental, emotional, behavioral, and mental 11 health and wellness; access to basic needs such as 12 food security, appropriate nutrition, safe and quality 13 child care settings, and safe and stable housing, 14 neighborhoods, and home environments; and promotion 15 of healthy, active lifestyles by addressing adverse 16 childhood events, reducing exposures to environmental 17 toxins, decreasing exposures to violence, advancing 18 tobacco-free and drug abuse-free living, increasing 19 immunization rates, and improving family well-being. 20 The department shall create a task force, 2. 21 including members who are child health experts external 22 to the department, to develop an implementation 23 plan to achieve the purpose of the initiative. 24 The implementation plan, including findings, 25 recommendations, performance benchmarks, data 26 collection provisions, budget needs, and other 27 implementation provisions shall be submitted to the 28 governor and general assembly on or before December 15, 29 2014. 30 Sec. • EFFECTIVE UPON ENACTMENT. This division 31 of this Act, being deemed of immediate importance, 32 takes effect upon enactment. 33 DIVISION MEDICAID STATE PLAN AMENDMENT - ELDERS 34 35 . MEDICAID — STATE PLAN AMENDMENT -Sec. 36 HOME AND COMMUNITY-BASED SERVICES FOR ELDERS. The 37 department of human services shall convene a workgroup 38 of stakeholders with interest or expertise in issues 39 relating to elders to develop a medical assistance 40 program state plan amendment in accordance with section 41 2402 of the federal Patient Protection and Affordable 42 Care Act to cover home and community-based services 43 for eligible elders 65 years of age or older. The 44 workgroup shall make recommendations on or before 45 September 1, 2014, relating to financial eligibility; 46 benefits, including whether individuals receiving such 47 Medicaid services should be eligible for full Medicaid 48 benefits; available services; and the needs-based level 49 of care criteria for determination of eligibility 50 under the state plan amendment. The recommendations

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1 of the workgroup shall be incorporated into a state 2 plan amendment and submitted by the department of human 3 services to the centers for Medicare and Medicaid 4 services of the United States department of health and 5 human services for approval. 6 DIVISION 7 IOWA HEALTH AND WELLNESS PLAN 8 Section 249A.3, subsection 1, paragraph Sec. 9 v, Code $\overline{2014}$, is amended to read as follows: (1) Beginning January 1, 2014, in accordance 10 v. 11 with section 1902(a)(10)(A)(i)(VIII) of the federal 12 Social Security Act, as codified in 42 U.S.C. § 13 1396a(a)(10)(A)(i)(VIII), is an individual who is 14 nineteen years of age or older and under sixty-five 15 years of age; is not pregnant; is not entitled to 16 or enrolled for Medicare benefits under part A_{τ} or 17 enrolled for Medicare benefits underpart B, of Tit. 18 XVIII of the federal Social Security Act; is not 19 otherwise described in section 1902(a)(10)(A)(i) of the 20 federal Social Security Act; is not exempt pursuant 21 to section 1902(k)(3), as codified in 42 U.S.C. § 22 1396a(k)(3), and whose income as determined under 23 1902(e)(14) of the federal Social Security Act, as 24 codified in 42 U.S.C. § 1396a(e)(14), does not exceed 25 one hundred thirty-three percent of the poverty line 26 as defined in section 2110(c)(5) of the federal Social 27 Security Act, as codified in 42 U.S.C. § 1397jj(c)(5) 28 for the applicable family size. 29 Notwithstanding any provision to the contrary, 30 individuals eligible for medical assistance under this 31 paragraph "v'' shall receive coverage for benefits as 32 specified in this subparagraph (2), which shall be 33 administered in accordance with this subparagraph (2). 34 (a) Individuals whose income is at or below one 35 hundred percent of the poverty line as specified in 36 subparagraph (1) shall receive coverage for benefits 37 pursuant to 42 U.S.C. § 1396u-7(b)(1)(B); adjusted as 38 necessary to provide the essential health benefits 39 as required pursuant to section 1302 of the federal 40 Patient Protection and Affordable Care Act, Pub. L. No. 41 111-148; adjusted to provide prescription drugs and 42 dental services consistent with the medical assistance 43 state plan benefits package for individuals otherwise 44 eligible under this subsection; and adjusted to provide 45 habilitation services consistent with the state medical 46 assistance program section 1915(i) waiver dental 47 services equivalent to the medical assistance state 48 plan benefits for individuals otherwise eligible under 49 this subsection. Benefits under this subparagraph 50 division (a) shall be administered consistent with

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1 program administration otherwise provided under this 2 subsection, with the exception of dental services which 3 may be administered as otherwise provided under this 4 subsection or, in whole or in part, through a managed 5 care provider. (3) (a) For individuals whose income as determined 6 7 under this paragraph "v" is at or below one hundred 8 percent of the federal poverty level, covered benefits 9 under subparagraph (2) shall be administered consistent 10 with program administration under this subsection. 11 (b) For individuals Individuals whose income 12 as determined under this paragraph "v" is above one 13 hundred percent but not in excess of one hundred 14 thirty-three percent of the federal poverty level, 15 covered line as specified in subparagraph (1), shall 16 receive coverage for benefits shall be which are 17 those provided by a qualified health plan administered 18 through provision of premium assistance for the 19 purchase of covered benefits qualified coverage 20 which includes benefits at least equivalent to those 21 specified in 42 U.S.C. §1396u-7(b)(1)(B) through the 22 American health benefits exchange created pursuant to 23 the Affordable Care Act, as defined in section 249N.2. 24 In addition, covered benefits shall include dental 25 services equivalent to the medical assistance state 26 plan benefits for individuals otherwise eligible under 27 this subsection, which may be administered as otherwise 28 provided under this subsection or, in whole or in part, 29 through a managed care provider. 30 (c) Notwithstanding any provision to the contrary 31 under subparagraph division (b) or this subparagraph 32 division (c), individuals eligible for medical 33 assistance under this paragraph v who are determined 34 by the department to be exempt from mandatory 35 enrollment in benchmark or benchmark-equivalent 36 coverage pursuant to 42 C.F.R. §440.315, may select 37 either of the following: 38 (i) The medical assistance state plan benefits 39 package for individuals otherwise eligible under this 40 subsection administered as otherwise provided under 41 this subsection. (ii) The benefits specified under subparagraph 42 43 division (a) administered as otherwise provided under 44 this subsection. . Section 249N.2, subsections 7, 12, and Sec. 45 46 13, Code 2014, are amended by striking the subsections. . Section 249N.2, subsection 17, Code 2014, 47 Sec. 48 is amended to read as follows: 17. "Participating accountable care organization" 49 50 means an accountable care organization approved by the

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1 department to participate in as a provider under the 2 Iowa health and wellness plan provider network. 3 Section 249N.4, Code 2014, is amended to Sec. • 4 read as follows: 5 249N.4 Iowa health and wellness plan — eligibility. Except as otherwise provided in this chapter, 6 1. 7 an individual may participate in the Iowa health 8 and wellness plan if the individual meets all of the 9 following criteria: 10 Is an eligible individual. a. 11 b. Meets the citizenship or alienage requirements 12 of the medical assistance program, and is a resident 13 of Iowa, and provides a social security number upon 14 application for the plan. 15 c. Fulfills all other conditions of participation 16 in the Iowa health and wellness plan, including member 17 financial participation pursuant to section 249N.7. 18 2. An individual who has access to affordable 19 employer-sponsored health care coverage, as defined 20 by rule of the department to align with regulations 21 adopted by the federal internal revenue service under 22 the Affordable Care Act, shall not be eligible for 23 participation in the Iowa health and wellness plan. 24 3. a. The department may elect to pay the cost of 25 health insurance premiums under the health insurance 26 premium payment program pursuant to section 249A.3, 27 subsection 10, for individuals with access to such 28 health insurance coverage, if the department determines 29 such payment to be cost-effective. Each applicant for 30 the Iowa health and wellness plan shall provide to the 31 department all insurance information required by the 32 health insurance premium payment program in accordance 33 with rules adopted by the department. 34 a. The department may elect to pay the 35 cost of premiums for applicants with access 36 to employer-sponsored health care coverage if 37 the department determines such payment to be 38 cost-effective. 39 If health insurance premium payment is provided b. 40 under this subsection, the department shall supplement 41 coverage as necessary to provide covered benefits 42 specified under section 249A.3, subsection 1, paragraph 43 v'', subparagraph (2), subparagraph division (a) or 44 (c), as applicable. b. 3. Eligibility for the Iowa health and wellness 45 46 plan is a qualifying event under the federal Health 47 Insurance Portability and Accountability Act of 1996, 48 Pub. L. No. 104-191. 49 c. If premium payment is provided under this 50 subsection for employer-sponsored health care coverage,

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1 the Iowa health and wellness plan shall supplement such 2 coverage as necessary to provide the covered benefits 3 specified under section 249N.5. The department shall implement the Iowa health 4 4. 5 and wellness plan in a manner that ensures that the 6 Iowa health and wellness plan is the payor of last 7 resort. 5. A member is eligible for coverage effective 8 9 the first day of the month following the month of 10 application for enrollment. 11 6. 5. Following initial enrollment, a member 12 is eligible for covered benefits for twelve months, 13 subject to program termination and other limitations 14 otherwise specified in this chapter. The department 15 shall review the member's eligibility on at least an 16 annual basis. 17 Sec. Section 249N.5, subsection 2, Code 2014, 18 is amended to read as follows: a. For members whose household income is at 19 2. 20 or below one hundred percent of the federal poverty 21 level or who have been determined by the department 22 to be exempt from mandatory enrollment in benchmark 23 or benchmark-equivalent coverage pursuant to 42 24 C.F.R. §440.315, the plan shall be administered by 25 the Iowa Medicaid enterprise consistent with program 26 administration applicable to individuals under section 27 249A.3, subsection 1, with the exception of dental 28 services which may be administered, in whole or in 29 part, through a managed care provider. 30 b. For members whose household income is above 31 one hundred percent but not in excess of one hundred 32 thirty-three percent of the federal poverty level 33 and who have not been determined by the department to 34 be exempt from mandatory enrollment in benchmark or 35 benchmark-equivalent coverage pursuant to 42 C.F.R. 36 §440.315, the plan shall be administered through 37 provision of premium assistance for the purchase of 38 the covered benefits qualified coverage through the 39 American health benefits exchange created pursuant 40 to the Affordable Care Act. The department may pay 41 premiums and supplemental cost-sharing subsidies 42 directly to qualified health plans participating in the 43 American health benefits exchange created pursuant to 44 the Affordable Care Act on behalf of the member. . Section 249N.6, Code 2014, is amended to 45 Sec. 46 read as follows: 47 249N.6 Iowa health and wellness plan provider 48 network Provider networks. 49 The Iowa health and wellness plan provider 1. 50 network for members receiving benefits pursuant

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1 to section 249N.5, subsection 2, paragraph "a", 2 shall include all providers enrolled in the medical 3 assistance program and all participating accountable 4 care organizations. Reimbursement under this chapter 5 subsection shall only be made to such Iowa health and 6 wellness plan providers for covered benefits. 2. a. Upon enrollment, a member shall choose a 7 8 primary medical provider and, to the extent feasible, 9 shall also choose a medical home within the Iowa health 10 and wellness plan provider network. 11 b. If the member does not choose a primary medical 12 provider or a medical home, the department shall assign 13 the member to a primary medical provider or a medical 14 home in accordance with the Medicaid managed health 15 care, mandatory enrollment provisions specified in 16 rules adopted by the department pursuant to chapter 17 249A and in accordance with quality data available to 18 the department. The department shall develop a mechanism 19 C. 20 for primary medical providers, medical homes, and 21 participating accountable care organizations to 22 jointly facilitate member care coordination of both 23 clinical services and nonclinical community and social 24 supports that address social determinants of health. 25 The Iowa health and wellness plan shall provide for 26 reimbursement of care Such care coordination services 27 provided under the plan consistent with the shall 28 be reimbursed in accordance with a reimbursement 29 methodology developed pursuant to section 135.159 by 30 rule of the department in accordance with chapter $\overline{17}A$. 3. a. d. The department shall provide procedures 31 32 for accountable care organizations that emerge through 33 local markets to participate in the Iowa health and 34 wellness plan provider network. Such accountable 35 care organizations shall incorporate the medical home 36 as defined and specified in chapter 135, division 37 XXII, as a foundation and shall emphasize whole-person 38 orientation and coordination and integration of both 39 clinical services and nonclinical community and social 40 supports that address social determinants of health. 41 A participating accountable care organization shall 42 enter into a contract with the department to ensure the 43 coordination and management of the health of attributed 44 members, to produce quality health care outcomes, and 45 to control overall cost. 46 b. (1) The department shall establish by rule 47 in accordance with chapter 17A the qualifications, 48 contracting processes, and contract terms for a 49 participating accountable care organization. The rules 50 shall also establish a methodology for attribution

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1 of a member to a participating accountable care 2 organization. 3 c. (2) A participating accountable care 4 organization contract shall establish accountability 5 based on quality performance and total cost-of-care 6 metrics for the attributed population. In developing 7 quality performance standards, the department shall 8 consider those utilized by state accountable care 9 organization models including but not limited to the 10 quality index score and the Medicare shared savings 11 program quality reporting metrics. The payment models 12 shall include but are not limited to risk sharing, 13 including both shared savings and shared costs, 14 between the state and the participating accountable 15 care organization, and bonus payments for improved 16 quality. The contract terms shall require that a 17 participating accountable care organization is subject 18 to shared savings beginning with the initial year of 19 the contract, must have quality metrics in place within 20 three years of the initial year of the contract, and 21 must participate in risk sharing within five years of 22 the initial year of the contract. 4. e. To the greatest extent possible, members 23 24 shall have a choice of providers within the Iowa health 25 and wellness plan provider network to facilitate access 26 to locally-based health care providers and services. 27 However, member choice may be limited by the results of 28 attribution under this section and by the participating 29 accountable care organization, with prior approval 30 of the department, if the member's health condition 31 would benefit from limiting the member's choice of an 32 Iowa health and wellness plan a provider to ensure 33 coordination of services, or due to overutilization of 34 covered benefits. The participating accountable care 35 organization shall provide thirty days' notice to the 36 member prior to limitation of such choice. 37 5. a. f. An Iowa health and wellness plan A 38 provider shall be reimbursed for covered benefits 39 under the Iowa health and wellness plan utilizing the 40 same reimbursement methodology as that applicable to 41 individuals eligible for medical assistance under 42 section 249A.3, subsection 1. Additionally, care 43 coordination services shall be reimbursed in accordance 44 with the reimbursement methodology developed by rule of 45 the department. 46 b. g. Notwithstanding paragraph <u>"a"</u> "f", a 47 participating accountable care organization under 48 contract with the department shall be reimbursed 49 utilizing a value-based reimbursement methodology. 50 6. a. h. Iowa health and wellness plan providers

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1 Providers shall exchange member health information 2 as provided by rule to facilitate coordination and 3 management of members' health, quality health care 4 outcomes, and containment of and reduction in costs. b. i. The department shall provide the health 5 6 care claims data of attributed members to a member's 7 participating accountable care organization on a 8 timeframe established by rule of the department. The provider network for members receiving 9 2. 10 benefits pursuant to section 249N.5, subsection 2, 11 paragraph "b", shall include all providers under the 12 member's qualified health plan in the American health 13 benefits exchange. 14 DIVISION 15 DENTAL COVERAGE - ASSIGNMENT OF BENEFITS . NEW SECTION. 514C.3C Dental coverage -16 Sec. 17 assignment of health insurance benefits. 18 A person who is the owner of any rights or benefits 19 under a policy or contract of insurance which provides 20 for coverage of dental care services shall be permitted 21 to assign all or any part of that person's rights and 22 privileges under the policy or contract, including but 23 not limited to the right to designate a beneficiary 24 and to have an individual policy or contract issued in 25 accordance with the terms of the policy or contract. 26 Such assignment shall be without prejudice to the 27 insurer on account of any payment the insurer makes or 28 individual policy or contract the insurer issues before 29 receiving notice of the assignment, provided that the 30 insurer was acting in good faith. If written proof of 31 an assignment of benefits is presented to an insurer, 32 health maintenance organization, managed care plan, 33 health care plan, preferred provider organization, or 34 other third-party payor, then payment shall be made 35 directly to the health care professional or health care 36 facility providing the dental services. Nothing in 37 this section shall be construed to prevent any persons 38 from reconciling duplicate payments. 39 Sec. . Section 514J.103, subsection 1, Code 40 2014, is amended to read as follows: 41 Except as provided in subsection 2, this chapter 1. 42 shall apply to all health carriers, including health 43 carriers issuing a policy or certificate that provides 44 coverage for dental care. . Section 514J.103, subsection 2, paragraph 45 Sec. 46 a, Code $\overline{201}4$, is amended to read as follows: a. A policy or certificate that provides coverage 47 48 only for a specified disease, specified accident or 49 accident-only, credit, disability income, hospital 50 indemnity, long-term care, dental care, vision care, or

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1 any other limited supplemental benefit. 2 DIVISION 3 FAMILY PLANNING - STATE PLAN AMENDMENT . Section 249A.3, subsection 2, paragraph 4 Sec. 5 a, subparagraph (9), Code 2014, is amended to read as 6 follows: 7 (9) Individuals eligible for family planning 8 services under a federally approved demonstration 9 waiver or state plan. 10 Sec. MEDICAID STATE PLAN AMENDMENT - FAMILY 11 PLANNING. The department of human services shall amend 12 the medical assistance state plan to include, effective 13 no later than January 1, 2015, the eligibility 14 provisions of the Iowa family planning network section 15 1115 demonstration waiver in effect on January 1, 16 2013, as the criteria are amended to be applicable 17 to individuals who are uninsured or who have health 18 insurance coverage subject to the medical assistance 19 program being the payer of last resort. The department 20 shall implement the state plan amendment upon receipt 21 of approval by the centers for Medicare and Medicaid 22 services of the United States department of health and 23 human services. 24 Sec. ___. 2010 Iowa Acts, chapter 1192, section 25 11, subsection 24, paragraph a, subparagraph (1), 26 subparagraph division (a), is amended to read as 27 follows: (a) Are uninsured or have health insurance coverage 28 29 that does not include coverage for benefits provided 30 under the Iowa family planning network subject to the 31 medical assistance program being the payor of last 32 resort. EFFECTIVE UPON ENACTMENT AND CONTINGENT 33 Sec. 34 IMPLEMENTATION. The sections of this division of this 35 Act relating to the family planning waiver and state 36 plan amendment, being deemed of immediate importance, 37 take effect upon enactment. However, the department 38 of human services shall only implement those sections 39 to the extent the department receives federal approval 40 of the requests relating to the waiver and the medical 41 assistance state plan amendment necessary to implement 42 those sections. 43 DIVISION PROVISIONALLY LICENSED PSYCHOLOGISTS - MEDICAID 44 45 REIMBURSEMENT 46 Sec. Section 249A.15, Code 2014, is amended to 47 read as follows: 249A.15 Licensed psychologists eligible for payment. 48 The department shall adopt rules pursuant to 49 50 chapter 17A entitling psychologists who are licensed

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1 in the state where the services are provided and have 2 a doctorate degree in psychology, have had at least 3 two years of clinical experience in a recognized 4 health setting, or have met the standards of a 5 national register of health service providers in 6 psychology, or who are licensed in accordance with 7 section 154B.6, subsection 3, to payment for services 8 provided to recipients of medical assistance, subject 9 to limitations and exclusions the department finds 10 necessary on the basis of federal laws and regulations 11 and of funds available for the medical assistance 12 program. 13 MEDICAL ASSISTANCE STATE PLAN -Sec. 14 PSYCHOLOGIST - PROVISIONAL LICENSEE. The department 15 of human services shall amend the medical assistance 16 state plan to allow psychologists who hold a 17 provisional license in accordance with section 154B.6, 18 subsection 3, as enacted by 2014 Iowa Acts, House File 19 2378, to be participating psychologists under the 20 medical assistance program.>

21 104. By renumbering as necessary.