S-5166

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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 4 inserting <11,531,066>
- Page 1, line 23, by striking <28.00> and 6 inserting <28.00 31.00>
- Page 3, line 1, by striking <subsection> and 7 8 inserting < subsection section>
 - Page 3, after line 4 by inserting:
- 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.
- 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 25 inserting <1,078,707>
- Page 3, line 20, by striking $\langle 13.00 \rangle$ and 6. 27 inserting <13.00>
 - Page 3, line 21, by striking <11.00> 7.
 - 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.>
- 9. Page 4, line 9, by striking <27,088,690> and 36 37 inserting <27,588,690>
- 10. Page 4, line 12, by striking <5,073,361> and 38 39 inserting <5,573,361>
 - 11. Page 8, after line 16 by inserting:
- <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.
12 committee shall report to the general assembly with
13 findings and recommendations on or before December 15,
14 \overline{2014.>}
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- 12. Page 8, line 23, by striking <3,671,602> and 16 inserting <4,346,962>
- 13. Page 9, line 5, by striking <1,327,887> and 18 inserting <1,927,887>
- 14. Page 10, line 4, by striking <137,768> and 20 inserting <162,768>
 - 15. Page 10, after line 31 by inserting:

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- <j._ 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.
- 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.>
- 16. Page 11, line 2, by striking <5,040,692> and 44 inserting <5,105,692>
- 17. Page 11, by striking lines 14 through 16 and 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.>
 - 18. Page 12, line 32, by striking <175,263> and

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1 inserting <215,263>
          Page 12, after line 35 by inserting:
      <1. Of the funds appropriated in this subsection,
 4 $25,000 shall be used for implementation of chapter
 5 124D, the Medical Cannabidiol Act, or other provision
 6 authorizing the compassionate medical use of
 7 cannabidiol, if enacted by the 2014 general assembly.>
      20. Page 13, line 6, by striking <9,284,436> and
 9 inserting <8,937,910>
10
      21. Page 15, by striking lines 30 through 33 and
ll inserting:
      <(8) For continuation of the safety net provider
12
13 patient access to a specialty health care initiative as
14 described in 2007 Iowa Acts, chapter 218, section 109:
15 ..... $
                                                    <del>189,237</del>
16
                                                   378,474>
17
      22. Page 16, line 13, by striking <175,900> and
18 inserting <313,400>
      23. Page 16, line 19, by striking <178,875> and
19
20 inserting <316,375>
      24. Page \overline{17}, line 10, by striking <150,000> and
22 inserting <250,000>
          Page 17, line 34, by striking <p.> and
23
      25.
24 inserting <p. (1)>
25
      26. Page 18, after line 18 by inserting:
26
      <(2) The department of human services shall work
27 with the Iowa collaborative safety net provider network
28 and the Iowa primary care association to develop
29 a long-term sustainability plan for the statewide
30 regionally based network to provide the integrated
31 approach to health care delivery as described in this
32 lettered paragraph. The department shall pursue any
33 appropriate payment mechanisms available such as a
34 Medicaid program state plan amendment, Medicaid program
35 waiver, state innovation model funding, or other
36 funding through the centers for Medicare and Medicaid
37 services of the United States department of health
38 and human services to provide options for long-term
39 sustainability by incorporating funding of the network
40 into any such appropriate payment mechanism.>
      27. Page 18, line 20, by striking <3,000,000> and
41
42 inserting <2,000,000>
43
      28. Page 18, by striking lines 25 through 30 and
44 inserting <as specified in section 135.176.>
      29. Page 19, by striking lines 3 through 10.
45
46
      30.
          Page 20, line 4, by striking <3,420,027> and
47 inserting <3,387,127>
          Page 20, line 7, by striking \langle 454,700 \rangle and
48
      31.
49 inserting <554,700>
      32. Page 20, by striking lines 33 and 34.
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 By striking page 21, line 14, through page 22,

 2 line 13, and inserting:
     <Sec. . 2013 Iowa Acts, chapter 138, section
 4 134, subsection 1, is amended to read as follows:
     1. DEPARTMENT OF VETERANS AFFAIRS ADMINISTRATION
     For salaries, support, maintenance, and
 7 miscellaneous purposes, and for not more than the
 8 following full-time equivalent positions:
 9 ..... $
                                                 546,754
10
                                               1,095,951
11 ..... FTEs
                                                  13.00
12
                IOWA VETERANS HOME
     Sec. . 2013 Iowa Acts, chapter 138, section 134,
13
14 subsection 2, unnumbered paragraph 1, is amended to
15 read as follows:
     For salaries, support, maintenance, and
17 miscellaneous purposes:
18 ...... $ <del>3,762,857</del>
                                               7,594,996
19
           . 2013 Iowa Acts, chapter 138, section 134,
20
21 subsection 2, is amended by adding the following new
22 paragraph:
     NEW PARAGRAPH. e. The Iowa veterans home
24 expenditure report shall be submitted monthly to the
25 legislative services agency.
          . 2013 Iowa Acts, chapter 138, section 134,
26
27 subsection 3, is amended to read as follows:>
      34. By striking page 24, line 25, through page 25,
28
29 line 32.
30
     35. Page 25, line 33, by striking <c.> and
31 inserting <b.>
     36. Page 29, line 17, by striking <6.042.834> and
32
33 inserting <6,217,834>
      37. Page 31, line 26, by striking <48,503,875> and
35 inserting <48,763,875>
      38. Page 31, line 30, by striking <3,163,854> and
36
37 inserting <3,338,854>
38
     39. Page 32, after line 31 by inserting:
39
     <4A. Of the funds appropriated in this section,
40 $10,000 shall be used by the organization specified in
41 subsection 4 to evaluate the need to assist low-income
42 Towans in preparing tax returns for electronic filing.>
43
      40. Page 32, line 33, by striking <40,000> and
44 inserting <115,000>
     41. Page 35, line 7, by striking <1,248,320,932>
46 and inserting <1,243,567,577>
     42. Page 36, line 10, by striking <$5,151,477> and
47
48 inserting <$7,451,376>
      43. Page 36, by striking lines 12 through 14 and
49
50 inserting <community-based services waivers.>
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Page 36, after line 27 by inserting:

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<NEW SUBSECTION. 24. If authorized by the centers 3 for Medicare and Medicaid services of the United States 4 department of health and human services, the department 5 of human services shall expand hospital presumptive 6 eligibility as authorized under 42 C.F.R §435.1110, to 7 include other provider types as qualified entities, 8 including but not limited to federally qualified health 9 centers, upon a center's or other entity's request.

NEW SUBSECTION. 25. The department of human 11 services shall adopt rules pursuant to chapter 17A to 12 require or provide for all of the following relating 13 to qualifications for disproportionate share hospital 14 payments:

- That only hospitals, including those defined as a. 16 a children's hospital, located in the state may qualify 17 for disproportionate share hospital payments.
- That, if a hospital is defined as a children's 19 hospital, the children's hospital may qualify for 20 disproportionate share hospital payments if among 21 other criteria the hospital is a member of, but is 22 not required to be a voting member of, the children's 23 hospital association.>
 - 45. Page 39, by striking lines 21 through 29.
- Page 40, line 4, by striking <45,622,828> and 26 inserting <48,641,331>
- 47. Page 40, line 6, by striking <37,903,401> and 27 28 inserting <40,921,904>
 - Page 42, after line 26 by inserting:
- <12. Of the funds appropriated in this section, 31 \$100,000 is transferred to the department of public 32 health to be used for a program to assist parents in 33 this state with costs resulting from the death of a 34 child in accordance with this subsection. If it is 35 less costly than administering the program directly, 36 the department shall issue a request for proposals 37 and issue a grant to an appropriate organization to 38 administer the program.
- The program funding shall be used to assist 40 parents who reside in this state with costs incurred 41 for a funeral, burial or cremation, cemetery costs, or 42 grave marker costs associated with the unintended death 43 of a child of the parent or a child under the care of a 44 guardian or custodian. The department shall consider 45 the following eligibility factors in developing program 46 requirements:
- (1) The child was a stillborn infant or was less 47 48 than age eighteen at the time of death.
- The request for assistance was approved by 49 50 the local board or department of health or the county

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1 general assistance director and may have been referred
2 by a local funeral home.
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- (3) To be eligible, the parent, guardian, or 4 custodian must have an annual household income that 5 is less than 145 percent of the federal poverty level 6 based on the number of people in the applicant's 7 household as defined by the most recently revised 8 poverty income guidelines published by the United 9 States department of health and human services.
- 10 (4) The maximum amount of grant assistance provided 11 to a parent, guardian, or custodian associated with the 12 death of a child is \$2,000. If the death is a multiple 13 death and the infants or children are being cremated, 14 or buried together, the same limitation applies.
- (5) To the extent the overall amount of assistance 16 received by a recipient for the costs addressed under 17 this subsection does not exceed the overall total of 18 the costs, the recipient may receive other public or 19 private assistance in addition to grant assistance 20 under this section.

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- b. Notwithstanding section 8.33, moneys transferred 22 by this subsection that remain unencumbered or 23 unobligated at the close of the fiscal year shall not 24 revert but shall remain available for expenditure for 25 the purposes designated until expended.>
- 49. By striking page 42, line 27, through page 45, 27 line 4, and inserting:
- <Sec. . 2013 Iowa Acts, chapter 138, section 29 147, is amended to read as follows:
- SEC. 147. JUVENILE INSTITUTIONS. There is 31 appropriated from the general fund of the state to 32 the department of human services for the fiscal year 33 beginning July 1, 2014, and ending June 30, 2015, the 34 following amounts, or so much thereof as is necessary, 35 to be used for the purposes designated:
- For operation of the Iowa juvenile home state 37 training school for female juvenile delinguents at 38 Toledo as enacted by this 2014 Iowa Act, to operate 39 with a capacity of at least 20 beds and for salaries, 40 support, maintenance, and miscellaneous purposes, and 41 for not more than the following full-time equivalent 42 positions:

43 \$ 4,429,678 7,087,766 114.00 45 FTEs 46 54.00

a. Of the funds appropriated in this subsection, 48 up to \$2,000,000 may be used by the department for the 49 placement costs of females and males adjudicated as a 50 child in need of assistance that under prior law would

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1 have been placed at the Iowa juvenile home.

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b. By January 1, 2015, the department shall 3 provide a report to the governor and the legislative 4 services agency that includes a description of the 5 status of juvenile delinquent girls in out-of-home 6 placements during the period beginning December 1, 7 2013, and ending December 1, 2014; identifies their 8 placement histories; provides the reason for placement; 9 provides a status report on educational services and 10 treatment of youth at department facilities; and makes 11 appropriate recommendations for legislation deemed 12 necessary.

c. Of the funds appropriated in this subsection, 14 \$1,100,000 shall be used for follow-up services to 15 support children who were placed at a state training 16 school and remain under the jurisdiction of the state 17 court and for expansion of the preparation for adult 18 living program in accordance with section 234.46, in 19 accordance with this 2014 Act.

20 2. For operation of the state training school at 21 Eldora and for salaries, support, maintenance, and 22 miscellaneous purposes, and for not more than the 23 following full-time equivalent positions:

24 \$ 5,628,485 11,590,098 164.30

165.30

Of the funds appropriated in this subsection, 28 29 \$45,575 \$91,150 shall be used for distribution 30 to licensed classroom teachers at this and other 31 institutions under the control of the department of 32 human services based upon the average student yearly 33 enrollment at each institution as determined by 34 the department. Of the funds appropriated in this 35 subsection, \$90,000 shall be used for the costs of 36 implementing the youth council approach, known as 37 achieving maximum potential, of providing a support 38 network to males placed at the training school at 39 Eldora and to females placed at the state training 40 school at Toledo.

- 3. A portion of the moneys appropriated in this 42 section shall be used by the state training school 43 and by the Iowa juvenile home schools for grants for 44 adolescent pregnancy prevention activities at the 45 institutions in the fiscal year beginning July 1, 46 2014.>
- 47 50. Page 45, line 15, by striking <95,535,703> and 48 inserting <93,571,220>
- 51. Page 45, line 32, by striking <36,967,216> and 50 inserting <34,383,853>

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Page 49, line 23, by striking <520,150> and
 2 inserting <570,150>
      53. Page 49, line 30, by striking <62,708> and
 4 inserting <68,737>
      54. Page \overline{49}, line 33, by striking <125,682> and
 6 inserting <137,761>
 7
      55. Page 50, line 1, by striking <195,892> and
 8 inserting <214,722>
          Page 50, line 4, by striking \langle 67,934 \rangle and
 9
10 inserting <74,465>
      57. Page 50, line 7, by striking \langle 67,934 \rangle and
12 inserting <74,465>
          Page 51, line 32, by striking <110,000> and
13
14 inserting <135,000>
      59. Page 52, line 6, by striking <$160,000> and
15
16 inserting <$110,000>
17
      60. Page 52, after line 16 by inserting:
      <28. The department shall perform a review of the
19 feasibility of and benefits associated with expanding
20 foster care, kinship guardianships, and subsidized
21 adoptions to be available on a voluntary basis to young
22 adults who become age 18 while receiving child welfare
23 services. The purpose of the review is to determine
24 the extent to which the expansion is covered under the
25 federal Fostering Connections to Success and Increasing
26 Adoptions Act of 2008, Pub. L. No. 110-351, and would
27 draw additional federal support under the Title IV-E
28 of the federal Social Security Act, allow the state
29 to expand the preparation for adult living program to
30 additional young adults, and enhance the services and
31 supports available under the program. The department
32 shall engage national and state experts in structuring
33 such programs under the federal fostering connections
34 Act in addition to young persons with experience in the
35 state's foster care system in performing the review.
36 If the department determines the expansion can be
37 implemented within existing state appropriations and
38 produces additional benefits for the young adults who
39 would be served under the expansion, the department may
40 implement changes to expand the availability of foster
41 care, kinship guardianships, and subsidized adoptions
42 for eligible young adults who become age 21.
      29. Of the funds appropriated in this section,
43
44 $25,000 shall be used for the purposes of this
45 subsection. The department shall staff and support
46 a panel of Iowa child welfare experts and advocates
47 to guide and oversee development of the publications
48 enumerated in this subsection. The membership
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50 representatives designated by the Middleton center for

49 of the panel shall include but is not limited to

1 children's right at the Drake university legal clinic, 2 disability rights Iowa, the foster care youth council program known as achieving maximum potential or AMP, 4 the department's parent partners pilot program, the 5 Iowa foster and adoptive parent association, the child 6 and family policy center, youth & shelter services, 7 inc., and the youth policy institute of Iowa. The 8 panel shall seek additional support from national 9 experts and technical assistance resources with 10 experience in state efforts to improve child welfare 11 systems with the types of approaches described by this 12 subsection. The panel shall provide a preliminary 13 report on or before October 1, 2014, to the general 14 assembly and the governor, and a final report at a 15 later date. The panel shall produce for distribution 16 through the department the following documents: 17

- a. For general distribution to all families, a 18 family rights guide to child protective services that 19 describes what constitutes child abuse and neglect 20 under Iowa law, the child abuse assessment process, 21 the rights families have in that process to request 22 services, and the rights and options such families 23 have to make appeals and secure representation and 24 support. At a minimum, the rights guide shall be 25 translated into the four most common languages other 26 than English spoken in Iowa by persons of limited 27 English proficiency, and the department shall make 28 available interpreters for persons of limited English 29 proficiency in other languages to review the guide and 30 its contents with families. Upon completion, the guide 31 shall be provided to all families who are subject to a 32 child abuse investigation.
- 33 b. For distribution to children and families 34 engaged processes which may lead to an adjudication 35 under chapter 232 and foster care placement, a child 36 and youth rights guide to foster care that expands upon 37 the bill of rights created by AMP youth. The initial 38 guide shall be directed to older youth ages 12 through 39 17 and shall describe the foster care process and the 40 rights children engaged in foster care processes have 41 to services, representation, and support and to be 42 heard in developing their permanency plans.>
- 61. Page 58, line 20, by striking <16,304,602> and 44 inserting <16,422,302>
- 62. Page 58, line 26, by striking <\$132,300> and 46 inserting <\$150,000>
 - 63. Page 59, before line 6 by inserting:

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<5B. Of the funds appropriated in this section, 48 49 \$50,000 shall be used by the department of human 50 services to contract with an independent researcher

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1 with expertise in both aging and disability population
 2 issues to evaluate the current provision of specialized
 3 services to individuals with a mental illness or an
 4 intellectual disability residing in nursing facilities
 5 in the state and develop a quality assurance model to
 6 ensure that nursing facility residents with a mental
 7 illness or an intellectual disability are receiving
 8 effective specialized services pursuant to the federal
9 Nursing Home Reform Act. In evaluating the current
10 provision of specialized services, the contractor
11 shall select nursing facilities with higher than
12 average numbers of residents with a mental illness
13 or an intellectual disability. In evaluating the
14 current specialized services the contractor shall
15 determine whether the specialized services are
16 individualized, provided in addition to basic nursing
17 facility services, and appropriate to meet the needs
18 of the individual to assist in transitioning to a
19 less restrictive, more integrated environment.
20 contractor shall also determine whether the specialized
21 services are included in the residents' plans of
22 care; whether the specialized services were provided
23 by a mental health or intellectual disabilities
24 professional; the cost of and funding source for the
25 specialized services; whether the specialized services
26 were effective in treating or habilitating residents,
27 improving the residents' level of functioning, and
28 enhancing the residents' ability to live in the
29 community with appropriate services and supports; how
30 many residents for whom specialized services were
31 provided were able to transition to a less restrictive
32 placement; and the projected savings if residents
33 received effective specialized services, avoided
34 hospitalizations, and transitioned to living in less
35 restrictive settings with appropriate services and
36 supports. The department shall report the results
37 of the evaluation and the proposed quality assurance
38 model to the individuals designated by this Act for
39 submission of reports by December 15, 2014.>
      64. Page 59, by striking line 21 and inserting
41 <exceed $268,712,511 $284,878,824. Of this amount, not
42 more than $2,000,000 shall be used for reimbursement
43 of nursing facilities to supplement the shortfall
44 attributable to the rebasing of nursing facility
rates in accordance with this 2013 Act, section 29, subsection 1, paragraph "a", subparagraph (2),
47 beginning January 1, 2015.>
      65. Page 59, after line 21 by inserting:
48
                 2013 Iowa Acts, chapter 138, section
50 159, subsection 1, paragraph a, is amended by adding
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1 the following new subparagraph:
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NEW SUBPARAGRAPH. (4) The department of human services shall release all retroactive rate determinations and payments within 90 days of receipt of approval from the centers for Medicare and Medicaid services of the United States department of health and human services and no later than March 31 of the calendar year that falls within the current fiscal year of the appropriation addressed by this paragraph "a".>

- 10 66. Page 60, line 24, after <<u>year</u>> by inserting <<u>as</u>
 11 specified in subparagraph (5), as enacted in this 2014
 12 Act>
- $\overline{}$ 67. Page 60, line 28, by striking < $\underline{}$ 0ctober 1, 2015> 14 and inserting < $\underline{}$ January 1, 2015>
- 15 68. Page 60, line 31, after < year > by inserting < as 16 specified in subparagraph (5), as enacted by this 2014 17 Act >
 - 69. Page 60, after line 31 by inserting:
- 19 <Sec. ____. 2013 Iowa Acts, chapter 138, section 20 159, subsection 1, paragraph c, is amended by adding 21 the following new subparagraph:

 NEW SUBPARAGRAPH. (5) Of the amount appropriates

NEW SUBPARAGRAPH. (5) Of the amount appropriated for the medical assistance program for the fiscal year, not more than \$3,000,000 shall be used for reimbursement of inpatient and outpatient hospital services attributable to rebasing as provided in subparagraphs (1) and (2).>

- 28 70. Page 61, line 13, by striking <0ctober 1, 2014> 29 and inserting <2014 January 1, 2015>
 - 71. Page 61, after line 31 by inserting:
- 31 <Sec. ___. 2013 Iowa Acts, chapter 138, section 32 159, subsection 1, paragraph q, is amended to read as 33 follows:
- q. For the fiscal year beginning July 1, 2014, the reimbursement rate for emergency medical service providers shall be increased by 10 percent over the rates in effect on June 30, 2014.
- 38 Sec. ____. 2013 Iowa Acts, chapter 138, section 159, 39 subsection 1, is amended by adding the following new 40 paragraph:

NEW PARAGRAPH. r. For the fiscal year 42 beginning July 1, 2014, the reimbursement rate for 43 ophthalmologists shall be increased by five percent 44 over the rates in effect on June 30, 2014.>

- 72. Page 62, line 13, after <subsection.> by 46 inserting <Through December 31, 2014, the combined 47 reimbursement rate shall remain at the rate in effect 48 on June 30, 2014, and on January 1, 2015, shall be 49 changed as provided in paragraph "b".>
 - 73. Page 62, lines 14 and 15, by striking <June 30>

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1 and inserting < December 31>
      74. Page 62, lines 18 and 19, by striking <for the
 3 fiscal year beginning July 1, 2014> and inserting <for
 4 the period beginning January 1, 2015, and ending June
 5 30, 2015>
          Page 66, line 6, after <APPROPRIATIONS> by
 6
      75.
7
  inserting <AND OTHER PRIOR PROVISIONS>
      76. Page 66, after line 6 by inserting:
8
9
              <SAFETY NET — CARE COORDINATION
10
                 2013 Iowa Acts, chapter 138, section
11 3, subsection 4, paragraph p, is amended to read as
12 follows:
      p. Of the funds appropriated in this section,
13
14 $1,158,150 is allocated to the Iowa collaborative
15 safety net provider network established pursuant
16 to section 135.153 to be used for the development
17 and implementation of a statewide regionally based
18 network to provide an integrated approach to health
19 care delivery through care coordination that supports
20 primary care providers and links patients with
21 community resources necessary to empower patients in
22 addressing biomedical and social determinants of health
23 to improve health outcomes. The Iowa collaborative
24 safety net provider network shall work in conjunction
25 with the department of human services to align the
26 integrated network with the health care delivery
27 system model developed under the state innovation
28 models initiative grant. The Iowa collaborative
29 safety net provider network shall submit a progress
30 report to the individuals designated in this Act for
31 submission of reports by December 31, 2013, including
32 progress in developing and implementing the network,
33 how the funds were distributed and used in developing
34 and implementing the network, and the remaining
35 needs in developing and implementing the network.
36 Notwithstanding section 8.33, moneys allocated in this
37 paragraph that remain unencumbered or unobligated at
38 the close of the fiscal year shall not revert but shall
39 remain available for expenditure for the purposes
40 designated until the close of the succeeding fiscal
41 year.>
42
      77.
          Page 66, by striking lines 7 through 21.
43
           Page 69, line 15, after <this section> by
44 inserting <, and subject to the Medicaid offset
45 amendments in section 426B.3, subsection 5, as amended
46 by this division of this 2014 Act>
      79. Page 70, line 27, after <section> by inserting
48 <, and subject to the Medicaid offset amendments
49 in section 426B.3, subsection 5, as amended by this
50 division of this 2014 Act>
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- Page 71, line 7, after <division. > by inserting 2 <The protocols and program models shall not include 3 provisions that would interfere with the ability 4 of any mental health and disability services region 5 approved under section 331.389 operating as an 6 employment network for the federal social security 7 administration's ticket to work program for persons 8 with disabilities to collect any milestone or outcome 9 payments.>
- 10 81. Page 71, after line 13 by inserting: 11 PROVISIONAL REGIONALIZATION 12 AUTHORIZATION.

29

- 13 During the time period beginning on the 14 effective date of this section and ending June 30, 15 2015, upon receiving an application from Mahaska and 16 Marion counties, the director of human services may 17 authorize the counties to form and operate a mental 18 health and disability services region on a provisional 19 basis for up to 12 months in accordance with this 20 section.
- 2. Unless the director grants an exception to 22 policy allowing the counties and their region, 23 during the provisional operation time period, to 24 meet a requirement through an alternative means, the 25 counties and their region shall comply with all of 26 the requirements applicable to a mental health and 27 disability services region under chapter 331 and other 28 law applicable to regions.
- 3. Prior to the end of the provisional operation 30 time period, the director may reauthorize on a one-time 31 basis the region to operate provisionally for an 32 additional time period of up to 12 months.
- 33 If the director determines the two counties 34 and their region are not in compliance with the 35 requirements under subsection 2 during any provisional 36 operation time period and that compliance will not be 37 achieved through a corrective action plan, the director 38 may assign each county to a region contiguous to the 39 county. The region assigned shall amend its chapter 40 28E agreement and other operating requirements and 41 policies to accept the assigned county.>
- 42 82. By striking page 71, line 14, through page 72, 43 line 2.
 - 83. Page 72, by striking lines 3 through 22.
- Page 72, before line 23 by inserting: 45 84.
- 46 <Sec. . Section 230.1, subsection 1, Code 2014, 47 is amended to read as follows:
- The necessary and legal costs and expenses 48 49 attending the taking into custody, care, investigation, 50 admission, commitment, and support of a person with

- 1 mental illness admitted or committed to a state 2 hospital shall be paid by a county or by the state as 3 follows:
- If the person is eighteen years of age or older, 5 as follows:
- 6 The costs attributed to mental illness shall 7 be paid by the regional administrator on behalf of the 8 person's county of residence.
- (2) The costs attributed to a substance-related 9 10 disorder shall be paid by the person's county of ll residence.
- The costs attributable to a dual diagnosis of 12 (3) 13 mental illness and a substance-related disorder may be 14 split as provided in section 226.9C.
- b. By the state as a state case if such person has 15 16 no residence in this state, if the person's residence 17 is unknown, or if the person is under eighteen years 18 of age.>

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- Page 73, by striking lines 1 through 6 and 85. 20 inserting <anticipated, the regional administrator 21 shall reserve an adequate amount for cash flow of 22 expenditure obligations in the first quarter of the 23 next fiscal year. Residual funding remaining after the 24 cash>
- 86. Page 73, after line 10 by inserting: Section 331.393, subsection 2, Code 27 2014, is amended by adding the following new paragraph: NEW PARAGRAPH. h. The financial eligibility

29 requirements for service under the regional service 30 system. A plan that otherwise incorporates the 31 financial eligibility requirements of section 331.395 32 but allows eligibility for persons with income above 33 one hundred fifty percent of the federal poverty 34 level as described in section 331.395, subsection 2, 35 paragraph "b", or for persons with resources above 36 the minimum resource limitations adopted pursuant to 37 section 331.395, subsection 1, paragraph "c", shall 38 be deemed by the department to be in compliance with

- 39 financial eligibility requirements of section 331.395.> Page 73, by striking lines 22 through 25 and 41 inserting <county services fund to address cash flow 42 of expenditure obligations in the first quarter of the 43 next fiscal year. The cash>
- 44 88. Page 74, by striking lines 22 and 23 and 45 inserting:
- <Sec. . Section 426B.3, subsection 5, paragraph 47 a, Code 2014, is amended to read as follows:
- 48 a. For the purposes of this subsection, "Medicaid 49 offset amount" means the projected amount for a fiscal 50 year that would have been paid from a county's services

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1 fund for those services for persons individuals
2 eligible under the county's approved service management
3 plan that would be non-Medicaid services, but due to
4 the persons' individuals' enrollment in the Iowa health
5 and wellness plan established under chapter 249N, those
6 services are instead covered under chapter 249N.>
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- 89. Page 74, by striking line 24 and inserting:
- For the fiscal year beginning July 1, 2013 8 <b. 9 2014, and>
- 10 $\overline{90}$. Page 75, by striking lines 14 through 26 and 11 inserting:
- . Section 426B.3, subsection 5, paragraph 12 <Sec. 13 c, Code $2\overline{014}$, is amended by striking the paragraph.> 14 91. Page 76, after line 15 by inserting:
- 15 <Sec. . EFFECTIVE UPON ENACTMENT. The following 16 provisions of this division of this Act, being deemed 17 of immediate importance, take effect upon enactment:
- The section providing a provisional 19 regionalization authorization.

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49

- 20 The section amending 2013 Iowa Acts, chapter 2. 21 136, section 11.>
 - 92. Page 76, after line 21 by inserting:
- Section 249A.4, subsection 10, Code 23 24 2014, is amended by adding the following new paragraph:

NEW PARAGRAPH. c. (1) A nursing facility that 26 utilizes the supplementation option and receives 27 supplementation under this subsection during any 28 calendar year, shall report to the department of 29 human services, annually, by January 15, the following 30 information for the preceding calendar year:

- The total number of nursing facility beds 32 available at the nursing facility, the number of such 33 beds available in private rooms, and the number of such 34 beds available in other types of rooms.
- The average occupancy rate of the facility on (b) 36 a monthly basis.
- (c) The total number of residents for which 37 38 supplementation was utilized.
- (d) The average private pay charge for a private 40 room in the nursing facility.
- 41 (e) For each resident for whom supplementation 42 was utilized, the total charge to the resident for 43 the private room, the portion of the total charge 44 reimbursed under the Medicaid program, and the total 45 charge reimbursed through supplementation.
- 46 (2) The department shall compile the information 47 received and shall submit the compilation to the 48 general assembly, annually by February 15.>
 - 93. Page 76, after line 23 by inserting:
- 50 <Sec. . NEW SECTION. 35D.7A Supplemental</p>

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1 stipend.
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In addition to any amount otherwise retained by or 3 provided as a personal needs allowance to a member or 4 a member's spouse under this chapter, a member and 5 the member's spouse, if applicable, shall receive a 6 supplemental stipend of thirty dollars per month. 7 supplemental stipend shall not be treated as income of 8 the resident for purposes of medical assistance program 9 eligibility or client participation.

NEW SECTION. 249A.4C Medicaid program 10 Sec. • 11 state plan amendments and waivers — prior approval.

A Medicaid program state plan amendment or waiver 13 request shall not be submitted for federal approval 14 to the centers for Medicare and Medicaid services 15 of the United States department of health and human 16 services unless prior direction or approval is provided 17 by an enactment of the general assembly. Following 18 submission of any such state plan amendment or waiver 19 request, the department shall regularly and upon 20 request of the chairpersons or ranking members of the 21 joint appropriations subcommittee on health and human 22 services, provide progress reports to the chairpersons 23 and ranking members of the joint appropriations 24 subcommittee on health and human services, the 25 legislative services agency and the legislative 26 caucus staffs, regarding the status of the state plan 27 amendment or waiver.>

- 94. Page 76, by striking lines 24 through 31.
- 95. Page 76, before line 32 by inserting:

. NEW SECTION. 514I.13 State plan 30

31 amendments and waivers — prior approval.

The department shall not submit a state plan 32 33 amendment or waiver request pursuant to this chapter 34 to the centers for Medicare and Medicaid services 35 of the United States department of health and human 36 services for federal approval unless prior direction 37 or approval is provided by an enactment of the general 38 assembly. Following submission of any such state plan 39 amendment or waiver request, the department shall 40 regularly and upon request of a chairperson or ranking 41 member of the joint appropriations subcommittee on 42 health and human services, provide progress reports 43 to the chairpersons and ranking members of the joint 44 appropriations subcommittee on health and human 45 services, the legislative services agency and the 46 legislative caucus staffs, regarding the status of the 47 state plan amendment or waiver.

Sec. . FREE PARKING OPTIONS - CHILDREN WITH 48 49 CHRONIC CONDITIONS. The university of Iowa hospitals 50 and clinics shall develop and implement by October 1,

- 1 2014, a free parking option for the use by families of 2 children who are admitted to the hospital for extended 3 periods of time or who visit the hospital routinely for 4 treatment for cancer or other chronic conditions. 5 option may provide for assignment of one free visitor 6 parking pass to the child for use by the family as 7 the family deems appropriate, validation of parking 8 tickets, provision of a reserved lot in close proximity 9 to the hospital and easily accessible on foot, or 10 issuance of parking passes valid in the hospital ll parking area.
 - CHILD WELFARE SERVICES COMMISSION. Sec.

15

- 13 A child welfare services commission is created 14 under the authority of the legislative council.
- The commission membership shall include the 16 following persons:
- The director of human services or the director's 17 18 designee.
- The administrator of child welfare programs 19 b. 20 under the department of human services or the 21 administrator's designee.
- The administrator of the division of criminal 23 and juvenile justice planning in the department of 24 human rights or the administrator's designee.
- The administrator of the child advocacy board 26 in the department of inspections and appeals or the 27 administrator's designee.
- The chief justice of the supreme court or the 28 29 chief justice's designee.
- f. The director of the department of education or 31 the director's designee.
- g. The executive director of the Iowa foster and 33 adoptive parent association or the executive director's 34 designee.
- 35 The executive director of the coalition for 36 family and children's services in Iowa or the executive 37 director's designee.
- 38 The presiding officer of the Iowa juvenile 39 court services association or the presiding officer's 40 designee.
- 41 j. The director of the child health specialty 42 clinics at the university of Iowa or the director's 43 designee.
- A youth member of the achieving maximum 45 potential program designated by the program's director.
- The director of the child and family policy 47 center or the director's designee.
- Members of the general assembly appointed by the 48 49 legislative council.
 - n. Other persons designated by the legislative

1 council.

- 2 3. In addition to the legislative services agency, 3 the legislative council may employ or contract with a 4 person or persons to assist the commission in carrying 5 out its duties.
- 6 4. The commission shall perform the following 7 duties:
- 8 a. Review the array of child welfare services in 9 the state.
- 10 b. Identify options for improving the coordination 11 and collaboration between the public and private 12 entities involved with child welfare services.
- 13 c. Direct special attention to children's mental 14 and behavioral health services.
- 15 d. Identify policies to support the growth and 16 expansion of community-based pediatric integrated 17 health homes.
- 18 e. Identify options to support continuous 19 improvement of pediatric mental health services and 20 innovation by service providers of such services at the 21 state and community levels.
- f. Consider proposals for creation of a center of collaborative children's mental and behavioral health services.
- 25 g. Evaluate the adequacy of the public funding of 26 child welfare services and identify options to address 27 shortfalls and for shifting resources.
- 28 5. Of the amount appropriated in this 2014 Iowa 29 Act to the department of human services for general 30 administration for the fiscal year beginning July 31 1, 2014, and ending June 30, 2014, \$50,000 shall be 32 transferred to the legislative services agency to 33 be used for the child welfare services commission in 34 accordance with this section.
- 35 6. The commission shall submit a final report 36 with findings and recommendations to the governor and 37 general assembly for action in the 2015 legislative 38 session.>
- 39 96. By striking page 76, line 32, through page 77, 40 line 21.
- 41 97. Page 78, line 14, after <limited> by inserting 42 <to>
- Sec. ___. Section 237A.13, subsection 7, paragraphs 46 a and c, Code 2014, are amended to read as follows:
- 47 a. Families with an income at or below one hundred 48 percent of the federal poverty level whose members are 49 employed, for at least twenty-eight hours per week in 50 the aggregate, are employed or are participating at a

- 1 satisfactory level in an approved training program or 2 educational program, and parents with a family income 3 at or below one hundred percent of the federal poverty 4 level who are under the age of twenty-one years and are 5 participating in an educational program leading to a 6 high school diploma or the equivalent.
- Families with an income of more than one hundred 8 percent but not more than one hundred forty-five 9 percent of the federal poverty level whose members are 10 employed, for at least twenty-eight hours per week in 11 the aggregate, are employed or are participating at a 12 satisfactory level in an approved training program or 13 educational program.
- 14 Sec. . Section 237A.13, subsection 8, Code 2014, 15 is amended to read as follows:
- Nothing in this section shall be construed 17 as or is intended as, or shall imply, a grant of 18 entitlement for services to persons who are eligible 19 for assistance due to an income level or other 20 eligibility circumstance addressed in this section. 21 Any state obligation to provide services pursuant to 22 this section is limited to the extent of the funds 23 appropriated for the purposes of state child care 24 assistance. The department shall not redetermine the 25 eligibility of a program participant more frequently 26 than every twelve months.
- . STATE CHILD CARE ASSISTANCE APPLICATIONS 27 Sec. 28 **—** INFORMATION TECHNOLOGY.
- The department of human services shall review 30 the application form and other elements of the process 31 used by applicants to apply for the state child care 32 assistance program. The purpose of the review is to 33 simplify the process by eliminating requirements to 34 provide unneeded or redundant information and improving 35 the wording of the application, and identifying other 36 options for improvement. The department shall report 37 the results of the review to the governor and general 38 assembly on or before December 1, 2014.
- 2. The department shall implement an application 40 process enhancement so that applicants for the state 41 child care assistance program may apply for the program 42 using information technology devices.
- 43 Sec. . IMPLEMENTATION. The department of human 44 services shall adopt rules and take other actions as 45 necessary to implement, as state child care assistance 46 program eligibility provisions, the amendments to 47 section 237A.13 in this division of this Act, on July 48 1, 2014.>
- 49 99. Page 90, after line 2 by inserting: <DIVISION

STATE TRAINING SCHOOLS — EDUCATION 1

. LEGISLATIVE FINDINGS. The general 2 3 assembly $\overline{\text{fi}} \text{nds}$ there is a need to improve the system 4 to meet the needs of children who have committed 5 a delinquent act, have been abused, neglected, or 6 subjected to trauma, or have other significant needs 7 that put the safety of the children or the public at 8 risk. The areas for system improvement include but are 9 not limited to all of the following:

- Providing equity in the services available for 10 11 both the male and female children involved in the 12 system.
- 13 2. Providing appropriate safeguards to ensure 14 children in placements are safe and getting their needs 15 met.
- Ensuring that education and training services 17 meet state and federal requirements and prepare the 18 children for long-term success.
- 4. Engaging children in services after an 20 out-of-home placement to prevent the need for placement 21 from reoccurring.
- 22 5. Providing an effective system to support 23 children when they attain adulthood in order to prevent 24 their engagement with the adult criminal justice 25 system.

Sec. IMPLEMENTATION.

16

26

- 1. As the level of service for juvenile delinquent 27 28 females provided for in this Act does not currently 29 exist in the state and represents a gap in the 30 continuum of care for juvenile females, reopening, and 31 making necessary changes in the facilities of the Iowa 32 juvenile home of Toledo provides the best means of 33 expeditiously fulfilling the duties outlined in section 34 233B.1, as enacted by this Act.
- 35 In reopening the facility at Toledo as the 36 state training school for juvenile delinquent females 37 in accordance with this division of this Act, the 38 department of human services shall phase in the 39 following provisions as follows:
- The department of human services shall begin 41 implementation of the requirements for the two state 42 training schools to be accredited as secure juvenile 43 correctional facilities and to comply with other 44 regulatory requirements in accordance with section 45 233A.1, subsection 7, and section 233B.1, subsection 46 7, upon enactment of this Act and shall complete the 47 correctional association accreditation by June 30, 48 2017. The department shall propose a schedule to the 49 governor and general assembly on or before December
- 50 15, 2014, for compliance with the other regulatory

pf/jp

1 requirements.

17

b. Education services in accordance with section 3 282.33, as amended by this division of this Act, shall 4 be developed by the close of the fiscal year beginning 5 July 1, 2014, in conjunction with the department of 6 education, affected area education agencies, affected 7 school districts, and other stakeholders.

Sec. . Section 232.2, subsection 22, paragraph 9 b, subparagraph (3), Code 2014, is amended to read as 10 follows:

(3) Visiting the home, residence, or both home and 12 residence of the child and any prospective home or 13 residence of the child, including each time placement 14 is changed. A child in a placement other than with 15 the child's parent shall be visited at the placement 16 at least quarterly.

Section 232.2, Code 2014, is amended by Sec. • 18 adding the following new subsection:

NEW SUBSECTION. 54A. "State training school" 20 means the state training school for female juvenile 21 delinquents at Toledo maintained in accordance with 22 chapter 233B or the state training school for male 23 juvenile delinquents at Eldora maintained in accordance 24 with chapter 233A.

. Section 232.49, subsection 2, Code 2014, Sec. 26 is amended to read as follows:

2. When possible an examination shall be conducted 28 on an outpatient basis, but the court may, if it deems 29 necessary, commit the child to a state training school 30 or to a suitable hospital, facility, or institution for 31 the purpose of examination. Commitment for examination 32 shall not exceed thirty days and the civil commitment 33 provisions of chapter 229 shall not apply.

Sec. . Section 232.49, subsection 3, paragraph 35 b, Code $\overline{2014}$, is amended to read as follows:

An examination shall be conducted on an 37 outpatient basis unless the court, the child's counsel, 38 and the parent, guardian, or custodian agree that 39 it is necessary the child be committed to a state 40 training school or to a suitable hospital, facility, or 41 institution for the purpose of examination. Commitment 42 for examination shall not exceed thirty days and the 43 civil commitment provisions of chapter 229 shall not 44 apply.

45 . Section 232.52, subsection 7, Code 2014, Sec. 46 is amended by adding the following new paragraph: NEW PARAGRAPH. Ob. When the court orders the 48 transfer of legal custody of a child pursuant to 49 subsection 2, paragraph "d", "e", or "f", the child's 50 attorney shall visit the child at the child's placement 1 at least quarterly.

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Sec. ___. Section 232.102, subsections 3 and 4,

Code $201\overline{4}$, are amended by striking the subsections.

Sec. . Section 232.103, subsection 7, Code 2014, 5 is amended by striking the subsection.

. Section 233A.1, Code 2014, is amended to 6 Sec. 7 read as $\overline{\text{fol}}$ lows:

233A.1 State training school — Eldora and Toledo.

- 1. For the purposes of this chapter, unless the 10 context otherwise requires:
- "Department" means the department of human a. 12 services.
 - *Director"* means the director of human services. b.
- "State training school" means the state training 15 school for male juvenile delinquents at Eldora.
- "Superintendent" means the superintendent of the 17 state training school for male juvenile delinquents.
- 1. 2. Effective January 1, 1992, a A diagnosis 19 and evaluation center and other units are established 20 at Eldora and shall be operated, maintained, and 21 staffed by the department to provide to male juvenile 22 delinquents a program which focuses upon appropriate 23 developmental skills, treatment, placements, and 24 rehabilitation.
- 2. The diagnosis and evaluation center which is 26 used to identify appropriate treatment and placement 27 alternatives for juveniles and any other units for 28 juvenile delinguents which are located at Eldora and 29 the unit for juvenile delinquents at Toledo shall 30 together be known as the "state training school". For 31 the purposes of this chapter "director" means the 32 director of human services and "superintendent" means 33 the administrator in charge of the diagnosis and 34 evaluation center for juvenile delinquents and other 35 units at Eldora and the unit for juvenile delinquents 36 at Toledo.
- 3. The number of children present at any one time 37 38 at the state training school at Eldora shall not exceed 39 the population guidelines established under 1990 40 Iowa Acts, chapter 1239, section 21, as adjusted for 41 subsequent changes in the capacity at the training 42 school.
- 43 4. Each child placed at the state training school 44 and any other child receiving an examination at the 45 state training school by order of the court shall 46 receive a written plan for services. The plan for 47 services provided by the state training school to 48 a child shall identify any physical, emotional, 49 intellectual, behavioral, or mental health disorder or 50 condition affecting the child and recommend treatment

1 to address the disorder or condition, identify 2 any substance-related disorder of the child or the 3 child's family and recommend treatment to address the 4 disorder, and assess the child's educational status and 5 recommend action to address any identified educational 6 deficiency, and for follow-up services, identify 7 specific public and private service providers with the 8 capacity to meet the child's needs. A copy of the plan 9 for services and any subsequent amendment to the plan 10 shall be submitted to the child, the child's attorney, 11 and the juvenile court.

- 5. The state training school shall facilitate 13 the provision of follow-up services to children, who 14 received placement services at the state training 15 school and who remain under the jurisdiction of the 16 juvenile court, as necessary to meet the long-term 17 needs of the children as they age into adulthood. The 18 plan for follow-up services shall be developed with 19 the child in conjunction with juvenile court services 20 and the child's attorney. The provision of follow-up 21 services for children who remain under the jurisdiction 22 of the juvenile court is subject to approval by the 23 juvenile court. Follow-up services shall be provided 24 to support children who are discharged from the state 25 training school during the period beginning twelve 26 months prior to the children becoming age eighteen and 27 ending on the day prior to the children becoming age 28 eighteen who do not remain under the jurisdiction of 29 the juvenile court. In addition, follow-up services 30 shall be made available to children discharged from the 31 school at any age upon or after the children become age 32 eighteen and continuing until at least age twenty-one.
- 33 6. For any child placed at the state training 34 school, the school shall provide a written plan 35 regarding the placement status of the child on or about 36 the time the child becomes age eighteen. The plan 37 shall, while giving consideration to the treatment 38 needs of the child, also give consideration to the 39 long-term needs of the child upon becoming age eighteen 40 including needs for vocational training or higher 41 education. Given these considerations, the plan shall 42 identify placement options to meet the child's needs 43 that will not negatively affect the child's adult 44 eligibility for assistance provided with federal 45 financial participation. The assistance addressed 46 shall include but is not limited to the preparation 47 for adult living program under section 234.46, the 48 medical assistance program, the Iowa aftercare services 49 network, the federal educational and training vouchers 50 program for youths aging out of foster care, and the

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1 federal job corps program.
      7. The department shall cause the state training
 3 school to be accredited as a secure juvenile
 4 correctional facility by the American correctional
 5 association, to meet the standards adopted by the
 6 department for approval of a juvenile detention home,
 7 and to meet applicable standards for programs providing
 8 residential services for children paid for by a managed
9 care or prepaid services contract under the medical
10 assistance program. The standards applied in addition
11 to the American correctional association accreditation
12 requirements shall include but are not limited to the
13 minimum qualifications of staff. The standards and
14 sanctions for noncompliance shall be identified in
15 conjunction with the department of inspections and
16 appeals and experts who are not employed by or under
17 contract with the department. A regular assessment
18 of compliance with the standards shall be performed
19 by the department of inspections and appeals and that
20 department shall submit a report on each assessment to
21 the governor and general assembly.
      8. The director and the superintendent for the
22
23 state training school shall provide on an ongoing
24 basis for the school's programs, facilities, and
25 services, and for the training of staff in order to
26 apply evidence-based practices and other recognized
27 contemporary approaches to ensure that the care
28 for the children served by the school is of high
29 quality. The director's and superintendent's efforts
30 and recommendations to comply with this requirement
31 shall be documented in the annual budget and financial
32 reporting submitted to the governor and the general
33 assembly.
34
      Sec.
                 Section 233A.4, Code 2014, is amended to
35 read as \overline{\text{fol}} lows:
      233A.4 Education and training.
36
      The state training school shall provide a positive
38 living experience for older juveniles who require
39 secure custody and who live at the state training
40 school for an extended period of time. The education
41 and training programs provided to the juveniles shall
42 reflect the age level and extended period of stay by
43 focusing upon appropriate developmental skills to
44 prepare the juveniles for productive living.
45 education services provided to the children placed
46 at the state training school shall be provided in
47 accordance with section 282.33.
      Sec. ___. Section 233B.1, Code 2014, is amended to
48
49 read as follows:
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233B.1 Definitions — purpose — services —

population limit.

6

- 1. For the purpose of this chapter, unless the 3 context otherwise requires:
- "Department" means the department of human 5 services.
- "Administrator" or "director" "Director" 7 means the director of the department of human services.
- b. c. "Home" "State training school" means the lowa 9 juvenile home state training school for female juvenile 10 delinquents at Toledo maintained in accordance with ll this chapter.
- e. d. "Superintendent" means the superintendent of 13 the Iowa juvenile home state training school for female 14 juvenile delinguents.
- 2. The lowa juvenile home state training school 15 16 for female juvenile delinquents shall be operated, 17 maintained for the purpose of providing care, custody, 18 and education of the children committed to the 19 home. The children shall be wards of the state. The 20 children's education shall embrace instruction in 21 the common school branches and in such other higher 22 branches as may be practical and will enable the 23 children to gain useful and self-sustaining employment. 24 The administrator and the superintendent of the home 25 shall assist all discharged children in securing 26 suitable homes and proper employment., and staffed 27 by the department of human services to do all of the 28 following for female residents of this state:
- 3. The number of children present at any one 29 30 time at the Iowa juvenile home shall not exceed the 31 population guidelines established under 1990 Iowa Acts, 32 chapter 1239, section 21, as adjusted for subsequent 33 changes in the capacity at the home.
- a. Provide gender-responsive services to female 35 children less than age eighteen who have been 36 adjudicated under chapter 232 as delinquent and placed 37 at the state training school in accordance with a court 38 order.
- b. If provided for by the children's education 40 plans, allow for continued placement at the state 41 training school for female children who were placed 42 at the state training school under paragraph "a" 43 upon the children becoming adults. The purpose of 44 continued placement is for completion of high school 45 education requirements identified in the education 46 plans developed by the provider of educational services 47 for the children.
- Facilitate the provision of follow-up services 48 49 to children who received placement services at 50 the state training school and who remain under the

1 jurisdiction of the juvenile court, as necessary 2 to meet the long-term needs of the children as they 3 age into adulthood. The plan for follow-up services 4 shall be developed with the child in conjunction with 5 juvenile court services and the child's attorney. 6 The provision of follow-up services for children who 7 remain under the jurisdiction of the juvenile court is 8 subject to approval by the juvenile court. Follow-up 9 services shall be provided to support children who are 10 discharged from the state training school during the 11 period beginning twelve months prior to the children 12 becoming age eighteen and ending on the day prior to 13 the children becoming age eighteen who do not remain 14 under the jurisdiction of the juvenile court. 15 addition, follow-up services shall be made available to 16 children discharged from the state training school at 17 any age upon or after the children become age eighteen 18 and continuing until at least age twenty-one.

- 3. Each child placed at the state training school 20 and any other child receiving an examination at the 21 state training school by order of the court shall 22 receive a written plan for services. The plan for 23 services provided by the state training school to 24 a child shall identify any physical, emotional, 25 intellectual, behavioral, or mental health disorder or 26 condition affecting the child and recommend treatment 27 to address the disorder or condition, identify 28 any substance-related disorder of the child or the 29 child's family and recommend treatment to address the 30 disorder, and assess the child's educational status and 31 recommend action to address any identified educational 32 deficiency, and for follow-up services, identify 33 specific public and private service providers with the 34 capacity to meet the child's needs. A copy of the plan 35 for services and any subsequent amendment to the plan 36 shall be submitted to the child, the child's attorney, 37 and the juvenile court.
- 4. For any child placed at the state training school, the state training school shall provide a written plan regarding the placement status of the child on or about the time the child becomes age eighteen. The plan shall, while giving consideration to the treatment needs of the child, also give consideration to the long-term needs of the child upon becoming age eighteen, including needs for vocational training or higher education. Given these considerations, the plan shall identify placement options to meet the child's needs that will not negatively affect the child's eligibility as an adult for assistance provided through federal financial

- participation. The assistance addressed shall include but is not limited to the preparation for adult living program under section 234.46, the medical assistance program, the Iowa aftercare services network, the federal educational and training vouchers program for youths aging out of foster care, and the federal job corps program.
- 5. The department of human services and the representatives of juvenile court services shall annually recommend a desired capacity for the state training school in the succeeding fiscal year to the governor and general assembly no later than December 13. The capacity of the state training school for a fiscal year shall be specified in the appropriations for the school.
- 6. The education services provided to the children placed at the state training school shall be provided in accordance with section 282.33.
- 7. The department shall cause the state training 20 school to be accredited as a secure juvenile 21 correctional facility by the American correctional 22 association, to meet the standards adopted by the 23 department for approval of a juvenile detention 24 home, and to meet applicable standards for programs 25 providing residential services for children paid for 26 by a managed care or prepaid services contract under 27 the medical assistance program. The standards applied 28 in addition to the American correctional association 29 accreditation requirements shall include but are not 30 limited to the minimum qualifications of staff and 31 provision of gender-responsive services. The standards 32 and sanctions for noncompliance shall be identified 33 in conjunction with the department of inspections and 34 appeals and experts who are not employed by or under 35 contract with the department. A regular assessment 36 of compliance with the standards shall be performed 37 by the department of inspections and appeals and that 38 department shall submit a report on each assessment to 39 the governor and general assembly.
- 8. The director and the superintendent for the state training school shall provide on an ongoing basis for the state training school's programs, facilities, and services, and for the training of staff in order to apply evidence-based practices and other recognized contemporary approaches to ensure that the care for the children served by the state training school is of high quality. The director's and superintendent's efforts and recommendations to comply with this requirement shall be documented in the annual budget and financial reporting submitted to the governor and the general

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1 assembly.
      Sec.
              . Section 233B.2, Code 2014, is amended to
 3 read as follows:
      233B.2 Salary.
      The salary of the superintendent of the home
 5
 6 state training school shall be determined by the
 7 administrator director in accordance with the state
 8 requirements for similar positions.
      Sec. ___. Section 233B.3, Code 2014, is amended to
10 read as follows:
11
      233B.3 Admissions Commitments and placements.
      Admission to the home shall be granted to resident
12
13 children of the state under seventeen years of age, as
14 follows, giving preference in the order named:
      1. Neglected or dependent children committed by
16 the juvenile court Commitments to and placements at
17 the state training school shall be limited to the
18 commitments and placements specified in section 233B.1.
      2. Other destitute children.
19
20
                 Section 233B.4, Code 2014, is amended to
      Sec.
21 read as follows:
      233B.4 Procedure.
22
      The procedure for commitment to and placement at the
23
24 home is state training school shall be as provided by
25 chapter 232 and section 233B.3.
      Sec.
           . Section 233B.5, Code 2014, is amended to
27 read as follows:
      233B.5 Transfers.
28
      The administrator director may propose the transfer
29
30 to the home state training school of minor wards of the
31 state from any institution under the administrator's
32 director's charge or under the charge of any other
33 administrator of the department of human services;
34 but no person shall be so transferred who is a person
35 with mental illness or an intellectual disability,
36 or who is incorrigible, or has any vicious habits,
37 or whose presence in the home would be inimical to
38 the moral or physical welfare of the other children
39 within the home, and any such child in the home may be
40 transferred to the proper state institution. However,
41 the superintendent shall only approve the transfer of
42 minor wards who meet the disposition criteria specified
43 in section 232.52, subsection 2, paragraph "e".
      Sec. . Section 233B.6, Code 2014, is amended to
45 read as follows:
      233B.6 Profits and earnings.
46
      Any money earned by or accrued to the benefit of a
48 child who is transferred to, admitted to, or placed in
49 foster care from the home state training school shall
50 be used, held, or otherwise applied for the exclusive
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1 benefit of that child, in accordance with section
 2 234.37.
 3
      Sec.
                Section 233B.7, Code 2014, is amended to
 4 read as follows:
      233B.7 Rules.
      All children admitted or committed to the home shall
 6
 7 be wards of the state and subject to the rules of the
 8 home. Subject to the approval of the administrator,
 9 any child received under voluntary application may be
10 expelled by the superintendent for disobedience and
11 refusal to submit to proper discipline. Children shall
12 be discharged upon arriving at the age of eighteen
13 years, or sooner if possessed of sufficient means to
14 provide for themselves. The department shall adopt
15 rules to administer and operate the state training
16 school in the best interests of the children placed at
17 the state training school.
      Sec.
           . Section 234.6, Code 2014, is amended by
19 adding the following new subsection:
20
      NEW SUBSECTION. 11. Provide upon request
21 assessment and consultation services to public and
22 private providers of child welfare services to address
23 the needs of children who have challenging behaviors.
      Sec. . Section 234.46, subsection 1, paragraph
25 c, Code 2014, is amended to read as follows:
        At the time the person became age eighteen, the
27 person received foster care services that were paid for
28 by the state under section 234.35, services at a state
29 training school, services at a juvenile shelter care
30 home, or services at a juvenile detention home and the
31 person is no longer receiving such services.
32
      Sec. . Section 234.46, subsection 2, unnumbered
33 paragraph 1, Code 2014, is amended to read as follows:
      The division shall establish a preparation for
35 adult living program directed to young adults.
36 purpose of the program is to assist persons who are
37 leaving foster care and other court-ordered services
38 at age eighteen or older in making the transition
39 to self-sufficiency. The department shall adopt
40 rules necessary for administration of the program,
41 including but not limited to eligibility criteria for
42 young adult participation and the services and other
43 support available under the program. The rules shall
44 provide for participation of each person who meets the
45 definition of young adult on the same basis, regardless
46 of whether federal financial participation is provided.
47 The services and other support available under the
48 program may include but are not limited to any of the
49 following:
      Sec. ___. Section 282.33, Code 2014, is amended by
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1 striking the section and inserting in lieu thereof the 2 following:

282.33 Funding for children residing in state mental 4 health institutes or training schools.

- An area education agency shall provide or make 6 provision for an appropriate educational program 7 for each child who lives in one of the following 8 institutions for children under the jurisdiction of the 9 director of human services:
 - Mental health institute, Cherokee, Iowa.
 - Mental health institute, Independence, Iowa.
- 12 State training school for male juvenile 13 delinquents, Eldora, Iowa, under chapter 233A.

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- 14 State training school for female juvenile 15 delinquents, Toledo, Iowa, under chapter 233B.
- 16 The area education agency shall provide the 17 educational program by any one of but not limited to 18 the following:
- Providing for the enrollment of the child in 20 the district of residence of the child, subject to the 21 approval of the district in which the child is living.
- Cooperating with the district of residence 23 of the child and obtaining the course of study and 24 textbooks of the child for use in the special facility 25 into which the child has been placed.
- c. Providing for the enrollment of the child in the 27 district in which the child is living, subject to the 28 approval of the district in which the child is living.
- 29 3. The area education agency shall submit a 30 proposed program and budget to the department of 31 education by January 1 for the next succeeding school 32 year for each institution. The department of education 33 shall review and approve or modify the program and 34 proposed budget and shall notify the department 35 of administrative services and the area education 36 agency of its action by February 1. The department 37 of administrative services shall pay the approved 38 budget amount for an area education agency in monthly 39 installments beginning September 15 and ending June 15 40 of the next succeeding school year. The installments 41 shall be as nearly equal as possible as determined by 42 the department of management, taking into consideration 43 the relative budget and cash position of the state's 44 resources. The department of administrative services 45 shall transfer the approved budget amount for an 46 area education agency from the moneys appropriated 47 under section 257.16 and make the payment to the area 48 education agency. The area education agency shall 49 submit an accounting for the actual cost of the program 50 to the department of education by August 1 of the

1 following school year. The department shall review 2 and approve or modify all expenditures incurred in 3 compliance with the guidelines pursuant to section 4 256.7, subsection 10, and shall notify the department 5 of administrative services of the approved accounting 6 amount. The approved accounting amount shall be 7 compared with any amounts paid by the department of 8 administrative services to the area education agency 9 and any differences added to or subtracted from the 10 October payment made under this subsection for the next 11 school year. Any amount paid by the department of 12 administrative services shall be deducted monthly from 13 the state foundation aid paid under section 257.16 to 14 all school districts in the state during the subsequent 15 fiscal year. The portion of the total amount of the 16 approved budget that shall be deducted from the state 17 aid of a school district shall be the same as the ratio 18 that the budget enrollment for the budget year of the 19 school district bears to the total budget enrollment in 20 the state for that budget year in which the deduction 21 is made. 22

- For purposes of this section, "district of 23 residence" means the school district in which the 24 parent or legal quardian of the child resides or the 25 district in which the district court is located if the 26 district court is the guardian of the child.
- Programs may be provided throughout the calendar 28 year and shall be funded under this section if the 29 school district or area education agency determines a 30 valid educational reason to do so.

Sec. . REPEAL. Sections 233B.10, 233B.11, 32 233B.12, 233B.13, and 233B.14, Code 2014, are repealed. . EFFECTIVE UPON ENACTMENT. This division Sec.

34 of this Act, being deemed of immediate importance, 35 takes effect upon enactment.

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DIVISION

STATE TRAINING SCHOOLS — CONFORMING AMENDMENTS . Section 137F.1, subsection 7, unnumbered 38 39 paragraph 1, Code 2014, is amended to read as follows: "Food establishment" means an operation that stores, 41 prepares, packages, serves, vends, or otherwise 42 provides food for human consumption and includes a 43 food service operation in a salvage or distressed food 44 operation, school, summer camp, residential service 45 substance abuse treatment facility, halfway house 46 substance abuse treatment facility, correctional 47 facility operated by the department of corrections, the 48 or state training school, or the Iowa juvenile home. "Food establishment" does not include the following: 49 `

Sec. ___. Section 218.1, subsections 7 and 8, Code

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1 2014, are amended to read as follows:
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- 7. State training school for male juvenile delinquents, Eldora, Iowa, under chapter 233A.
- 8. Iowa juvenile home State training school for 5 female juvenile delinquents, Toledo, Iowa, under 6 chapter 233B.

7 Section 218.6, subsection 3, Code 2014, Sec. 8 is amended to read as follows:

The state juvenile institutions consisting of 10 the state training school for male juvenile delinquents ll at Eldora and the Iowa juvenile home state training 12 school for female juvenile delinquents at Toledo.

Sec. Section 259A.6, Code 2014, is amended to 14 read as follows:

259A.6 Residents of juvenile institutions and 16 juvenile probationers.

Notwithstanding the provisions of section 259A.2 a 18 minor who is a resident of a state training school or 19 the Iowa juvenile home or a minor who is placed under 20 the supervision of a juvenile probation office may make 21 application for a high school equivalency diploma and 22 upon successful completion of the program receive a 23 high school equivalency diploma.

Sec. ___. Section 261.6, subsection 2, paragraph b, 25 Code 2014, is amended to read as follows:

b. Is age seventeen and has been placed in the 27 a state training school or the Iowa juvenile home 28 pursuant to a court order entered under chapter 232 29 under the care and custody of the department of human 30 services.

Sec. . Section 261.6, subsection 2, paragraph 32 c, subparagraph (4), Code 2014, is amended to read as 33 follows:

34 (4) On the date the person reached age eighteen or 35 during the thirty calendar days preceding or succeeding 36 that date, the person was placed in the a state 37 training school or the Iowa juvenile home pursuant to 38 a court order entered under chapter 232 under the care 39 and custody of the department of human services.

Sec. ___. Section 331.424, subsection 1, paragraph 41 a, subparagraph (1), subparagraph division (b), Code 42 2014, is amended by striking the subparagraph division.

Sec. ___. Section 331.756, subsection 51, Code 43 44 2014, is amended by striking the subsection.

___. Section 331.802, subsection 3, paragraph 46 k, Code $\overline{2014}$, is amended to read as follows:

k. Death of a person committed or admitted to, 48 committed to, or placed at a state mental health 49 institute, a state resource center, the or a state 50 training school, or the Iowa juvenile home.

- . Section 357H.1, subsection 1, Code 2014, 2 is amended to read as follows:
- The board of supervisors of a county with 4 less than twenty thousand residents, not counting 5 persons admitted or to, committed to, or placed at an 6 institution enumerated in section 218.1 or 904.102, 7 based upon the 2000 certified federal census, and with 8 a private lake development shall designate an area 9 surrounding the lake, if it is an unincorporated area 10 of the county, a rural improvement zone upon receipt 11 of a petition pursuant to section 357H.2, and upon 12 the board's determination that the area is in need of 13 improvements.
- 14 Sec. . EFFECTIVE UPON ENACTMENT. This division 15 of this Act, being deemed of immediate importance, 16 takes effect upon enactment.>
- 100. Page 33, by striking line 17 and inserting: 17 Sy striking page 87, line 10, through page 87. 19 90, line 2, and inserting:

<DIVISION

PRIOR AUTHORIZATION

22 . NEW SECTION. 505.26 Prior authorization 23 for prescription drug benefits — standard process and 24 form.

> As used in this section: 1.

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- 26 a. "Facility", "health benefit plan", "health care 27 professional", "health care provider", "health care 28 services", and "health carrier" mean the same as defined 29 in section 514J.102.
- b. "Pharmacy benefits manager" means the same as 31 defined in section 510B.1.
- 2. The commissioner shall develop, by rule, a 33 process for use by each health carrier and pharmacy 34 benefits manager that requires prior authorization 35 for prescription drug benefits pursuant to a health 36 benefit plan, to submit, on or before January 1, 2015, 37 a single prior authorization form for approval by the 38 commissioner, that each health carrier or pharmacy 39 benefits manager shall be required to use beginning 40 on July 1, 2015. The process shall provide that if a 41 prior authorization form submitted to the commissioner 42 by a health carrier or pharmacy benefits manager is not 43 approved or disapproved within thirty days after its 44 receipt by the commissioner, the form shall be deemed 45 approved.
- 46 3. The commissioner shall develop, by rule, a 47 standard prior authorization process which meets all of 48 the following requirements:

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Health carriers and pharmacy benefits managers 50 shall allow health care providers to submit a prior

1 authorization request electronically.

- b. Health carriers and pharmacy benefits managers 3 shall provide that approval of a prior authorization 4 request shall be valid for a minimum length of time 5 in accordance with the rules adopted under this 6 section. In adopting the rules, the commissioner may 7 consult with health care professionals who seek prior 8 authorization for particular types of drugs, and as the 9 commissioner determines to be appropriate, negotiate 10 standards for such minimum time periods with individual 11 health carriers and pharmacy benefits managers.
- c. Health carriers and pharmacy benefits managers 13 shall make the following available and accessible on 14 their internet sites:
- 15 (1) Prior authorization requirements and 16 restrictions, including a list of drugs that require 17 prior authorization.
- (2) Clinical criteria that are easily 19 understandable to health care providers, including 20 clinical criteria for reauthorization of a previously 21 approved drug after the prior authorization period has 22 expired.
- (3) Standards for submitting and considering 24 requests, including evidence-based guidelines, 25 when possible, for making prior authorization 26 determinations.

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- 27 d. Health carriers shall provide a process for 28 health care providers to appeal a prior authorization 29 determination as provided in chapter 514J. Pharmacy 30 benefits managers shall provide a process for health 31 care providers to appeal a prior authorization 32 determination that is consistent with the process 33 provided in chapter 514J.
- In adopting a standard prior authorization 35 process, the commissioner shall consider national 36 standards pertaining to electronic prior authorization, 37 such as those developed by the national council for 38 prescription drug programs.
- 5. A prior authorization form approved by 40 the commissioner shall meet all of the following 41 requirements:
- Not exceed two pages in length, except that 43 a prior authorization form may exceed that length as 44 determined to be appropriate by the commissioner.
 - Be available in electronic format.
- Be transmissible in an electronic format or a 46 c. 47 fax transmission.
- Beginning on July 1, 2015, each health carrier 48 49 and pharmacy benefits manager shall use and accept 50 the prior authorization form that was submitted by

pf/jp

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1 that health carrier or pharmacy benefits manager and
 2 approved for the use of that health carrier or pharmacy
 3 benefits manager by the commissioner pursuant to this
 4 section. Beginning on July 1, 2015, health care
 5 providers shall use and submit the prior authorization
 6 form that has been approved for the use of a health
 7 carrier or pharmacy benefits manager, when prior
 8 authorization is required by a health benefit plan.
      7. a. If a health carrier or pharmacy benefits
10 manager fails to use or accept the prior authorization
11 form that has been approved for use by the health
12 carrier or pharmacy benefits manager pursuant to this
13 section, or to respond to a health care provider's
14 request for prior authorization of prescription drug
15 benefits within seventy-two hours of the health care
16 provider's submission of the form, the request for
17 prior authorization shall be considered to be approved.
         However, if the prior authorization request is
19 incomplete or additional information is required, the
20 health carrier or pharmacy benefits manager may request
21 the additional information within the seventy-two-hour
22 period and once the additional information is submitted
23 the provisions of paragraph "a" shall again apply.
         Notwithstanding paragraphs a^{*} and b^{*}, the
25 commissioner may develop, by rule, minimum time periods
26 for a health carrier or pharmacy benefits manager to
27 respond to a health care provider's request for prior
28 authorization of prescription drug benefits or for
29 additional information, that are less than, but in no
30 case exceed seventy-two hours, as the commissioner
31 deems appropriate under the circumstances.
            . Section 510B.3, subsection 2, Code 2014,
32
33 is amended by adding the following new paragraph:
34
      NEW PARAGRAPH. c. A process for the submission of
35 forms.
            __. NEW SECTION.
36
                               510B.9 Submission,
      Sec.
37 approval, and use of prior authorization form.
      A pharmacy benefits manager shall file with and
39 have approved by the commissioner a single prior
40 authorization form as provided in section 505.26.
41 pharmacy benefits manager shall use the single prior
42 authorization form as provided in section 505.26.
43
                EFFECTIVE UPON ENACTMENT. This division
44 of this Act, being deemed of immediate importance,
45 takes effect upon enactment.>
46
      101. Page 90, before line 3 by inserting:
47
                        <DIVISION
                    POISON CONTROL CENTER
48
                POISON CONTROL CENTER - FEDERAL
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50 APPROVAL. The department of human services shall

1 request approval from the centers for Medicare and 2 Medicaid services of the United States department of 3 health and human services to utilize administrative 4 funding under the federal Children's Health Insurance 5 Program Reauthorization Act of 2009, Pub. L. No. 111-3, 6 to provide the maximum federal matching funds available 7 to implement a new health services initiative as 8 provided under section 2105(a)(1)(D)(ii) of the federal 9 Social Security Act, to fund the state poison control 10 center.

EFFECTIVE UPON ENACTMENT. This division 12 of this Act, being deemed of immediate importance, 13 takes effect upon enactment.

DIVISION

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15 AGING AND LONG-TERM CARE DELIVERY INTERIM COMMITTEE . INTERIM COMMITTEE ON AGING AND LONG-TERM 17 CARE DELIVERY.

- 1. The legislative council is requested to 19 establish a study committee for the 2014 interim to 20 examine issues relating to aging Iowans and long-term 21 care. The interim committee shall comprehensively 22 review the existing long-term care delivery system 23 and make recommendations to create a sustainable, 24 person-centered approach that increases health and life 25 outcomes; supports maximum independence by providing 26 the appropriate level of care and services through a 27 balance of facility-based and home and community-based 28 options; addresses medical and social needs in a 29 coordinated, integrated manner; provides for sufficient 30 resources including a stable, well-qualified workforce; 31 and is fiscally accountable.
- The interim committee shall provide a forum 33 for open and constructive dialogue among stakeholders 34 representing individuals involved in the delivery and 35 financing of long-term care services and supports, 36 consumers and families of consumers in need of such 37 services and supports, legislators, and representatives 38 of agencies responsible for oversight, funding, and 39 regulation of such services and supports.
- The interim committee shall specifically 41 address the cost and financing of long-term care and 42 services, the coordination of services among providers, 43 the availability of and access to a well-qualified 44 workforce including both the compensated workforce 45 and family and other uncompensated caregivers, and 46 the balance between facility-based and home and In addition, the 47 community-based care and services. 48 interim committee shall consider methods to educate 49 consumers and enhance engagement of consumers in the 50 broader conversation regarding long-term care issues,

- 1 including their experiences with, concerns about, and 2 expectations and recommendations for action regarding 3 the long-term care delivery system in the state.
- 4. Members of the interim committee shall include 5 all of the following:
- Five members of the senate and five members of 7 the house of representatives including the following:
- (1) The chairpersons and ranking members of the 8 9 committees on human resources of the senate and house 10 of representatives, or a member of the committee 11 designated by the chairperson or ranking member.
- (2) The co-chairpersons and ranking members of the 13 joint appropriations subcommittee on health and human 14 services of the senate and house of representatives, 15 or a member of the subcommittee designated by the 16 chairperson or ranking member.
- b. Five members of the general public representing 17 18 individual consumers and their families, one each to be 19 selected by the following:
 - The older Iowans legislature. (1)
 - (2) The Iowa alliance of retired Americans.
 - (3) The Iowa association of area agencies on aging.
 - (4) The Iowa caregivers association.
 - (5) AARP Iowa.

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- 25 c. Five members who represent those involved in the 26 delivery of long-term care services.
- The interim committee may request from state 28 agencies including the department of human services, 29 the department of public health, the department on 30 aging, the department of inspections and appeals, the 31 insurance division of the department of commerce, and 32 the department of workforce development, information 33 and assistance as needed to complete its work.
- The interim committee shall submit its findings 35 and recommendations to the general assembly for 36 consideration during the 2015 legislative session.

DIVISION HEALTHIEST CHILDREN INITIATIVE

Sec. NEW SECTION. 135.181 Iowa healthiest 40 children initiative.

The Iowa healthiest children initiative is 42 established in the department. The purpose of the 43 initiative is to develop and implement a plan for 44 Iowa children to become the healthiest children in 45 the nation by January 1, 2020. The areas of focus 46 addressed by the initiative shall include improvement 47 of physical, dental, emotional, behavioral, and mental 48 health and wellness; access to basic needs such as 49 food security, appropriate nutrition, safe and quality 50 child care settings, and safe and stable housing,

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1 neighborhoods, and home environments; and promotion
2 of healthy, active lifestyles by addressing adverse
3 childhood events, reducing exposures to environmental
4 toxins, decreasing exposures to violence, advancing
5 tobacco-free and drug abuse-free living, increasing
6 immunization rates, and improving family well-being.
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The department shall create a task force, 7 8 including members who are child health experts external 9 to the department, to develop an implementation 10 plan to achieve the purpose of the initiative. 11 The implementation plan, including findings, 12 recommendations, performance benchmarks, data

13 collection provisions, budget needs, and other

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14 implementation provisions shall be submitted to the 15 governor and general assembly on or before December 15, 16 2014.

17 . EFFECTIVE UPON ENACTMENT. This division Sec. 18 of this Act, being deemed of immediate importance, 19 takes effect upon enactment.

DIVISION

IOWA HEALTH INFORMATION NETWORK

Sec. ___. Section 135.154, Code 2014, is amended by 23 adding the following new subsections:

NEW SUBSECTION. 3A. "Care coordination" means 25 the management of all aspects of a patient's care to 26 improve health care quality, patient outcomes, and 27 patient safety.

NEW SUBSECTION. 19A. "Public health activities" 29 means actions taken by a participant in its capacity as 30 a public health authority under the Health Insurance 31 Portability and Accountability Act or as required or 32 permitted by other federal or state law.

23. "Record locator service" NEW SUBSECTION. 34 means the functionality of the Iowa health information 35 network that queries data sources to locate and 36 identify potential patient records.

Sec. . Section 135.156D, subsection 2, Code 38 2014, is amended to read as follows:

- The Iowa health information network shall 40 not function as a central repository of all health 41 information including but not limited to an all-payer 42 claims database or data warehouse.
- Sec. Section 135.156E, subsection 13, Code 43 44 2014, is amended to read as follows:
- 13. Unless otherwise provided in this division, 46 when using sharing health information through the 47 Iowa health information network or a private health 48 information network maintained in this state that 49 complies with the privacy and security requirements of 50 this chapter for the purposes of patient treatment,

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1 a health care professional or a hospital or health
 2 care operations, as such terms are defined in the
 3 Health Insurance Portability and Accountability Act,
 4 or for the purposes of public health activities or
 5 care coordination, a participant authorized by the
 6 department to use the record locator service is exempt
 7 from any other state law that is more restrictive than
 8 the Health Insurance Portability and Accountability Act
9 that would otherwise prevent or hinder the exchange
10 of patient information by the patient's health care
11 professional or hospital participant.
12
      Sec. . FUTURE REPEAL.
13
         The section of this division of this Act
14 amending section 135.156E, subsection 13, is repealed
15 July 1, 2015.
      2. Upon repeal of the amendments to section
17 135E.156E, subsection 13, the Code editor shall restore
18 the language of section 135.156E, subsection 13, to the
19 applicable Code language as it appeared in Code 2014.
20
                        DIVISION
21
           MEDICAID STATE PLAN AMENDMENT - ELDERS
22
                MEDICAID - STATE PLAN AMENDMENT -
23 HOME AND COMMUNITY-BASED SERVICES FOR ELDERS.
24 department of human services shall convene a workgroup
25 of stakeholders with interest or expertise in issues
26 relating to elders to develop a medical assistance
27 program state plan amendment in accordance with section
28 2402 of the federal Patient Protection and Affordable
29 Care Act to cover home and community-based services
30 for eligible elders 65 years of age or older.
31 workgroup shall make recommendations on or before
32 September 1, 2014, relating to financial eligibility;
33 benefits, including whether individuals receiving such
34 Medicaid services should be eligible for full Medicaid
35 benefits; available services; and the needs-based level
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42 human services for approval. DIVISION

41 services of the United States department of health and

IOWA HEALTH AND WELLNESS PLAN

36 of care criteria for determination of eligibility 37 under the state plan amendment. The recommendations 38 of the workgroup shall be incorporated into a state 39 plan amendment and submitted by the department of human

40 services to the centers for Medicare and Medicaid

Section 249A.3, subsection 1, paragraph

46 v, Code $\overline{2014}$, is amended to read as follows: v. (1) Beginning January 1, 2014, in accordance

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48 with section 1902(a)(10)(A)(i)(VIII) of the federal

49 Social Security Act, as codified in 42 U.S.C. §

50 1396a(a)(10)(A)(i)(VIII), is an individual who is

1 nineteen years of age or older and under sixty-five 2 years of age; is not pregnant; is not entitled to 3 or enrolled for Medicare benefits under part A_{T} or 4 enrolled for Medicare benefits under part B, of Tit. 5 XVIII of the federal Social Security Act; is not 6 otherwise described in section 1902(a)(10)(A)(i) of the 7 federal Social Security Act; is not exempt pursuant 8 to section 1902(k)(3), as codified in 42 U.S.C. § 9 1396a(k)(3), and whose income as determined under 10 1902(e)(14) of the federal Social Security Act, as 11 codified in 42 U.S.C. § 1396a(e)(14), does not exceed 12 one hundred thirty-three percent of the poverty line 13 as defined in section 2110(c)(5) of the federal Social 14 Security Act, as codified in 42 U.S.C. § 1397jj(c)(5) 15 for the applicable family size. 16

- (2) Notwithstanding any provision to the contrary, 17 individuals eligible for medical assistance under this 18 paragraph "v" shall receive coverage for benefits as 19 specified in this subparagraph (2), which shall be 20 administered in accordance with this subparagraph (2).
- Individuals whose income is at or below one 22 hundred percent of the poverty line as specified in 23 subparagraph (1) shall receive coverage for benefits 24 pursuant to 42 U.S.C. § 1396u-7(b)(1)(B); adjusted as 25 necessary to provide the essential health benefits 26 as required pursuant to section 1302 of the federal 27 Patient Protection and Affordable Care Act, Pub. L. No. 28 111-148; adjusted to provide prescription drugs and 29 dental services consistent with the medical assistance 30 state plan benefits package for individuals otherwise 31 eligible under this subsection; and adjusted to provide 32 habilitation services consistent with the state medical 33 assistance program section 1915(i) waiver dental 34 services equivalent to the medical assistance state 35 plan benefits for individuals otherwise eligible under 36 this subsection. Benefits under this subparagraph 37 division (a) shall be administered consistent with 38 program administration otherwise provided under this 39 subsection, with the exception of dental services which 40 may be administered as otherwise provided under this 41 subsection or, in whole or in part, through a managed 42 care provider.
- (3) (a) For individuals whose income as determined 44 under this paragraph "v" is at or below one hundred 45 percent of the federal poverty level, covered benefits 46 under subparagraph (2) shall be administered consistent 47 with program administration under this subsection.
- (b) For individuals Individuals whose income 48 49 as determined under this paragraph "v" is above one 50 hundred percent but not in excess of one hundred

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1 thirty-three percent of the federal poverty level,
 2 covered line as specified in subparagraph (1), shall
 3 receive coverage for benefits shall be which are
 4 those provided by a qualified health plan administered
 5 through provision of premium assistance for the
 6 purchase of covered benefits qualified coverage
 7 which includes benefits at least equivalent to those
 8 specified in 42 U.S.C. §1396u-7(b)(1)(B) through the
9 American health benefits exchange created pursuant to
10 the Affordable Care Act, as defined in section 249N.2.
11 In addition, covered benefits shall include dental
12 services equivalent to the medical assistance state
13 plan benefits for individuals otherwise eligible under
14 this subsection, which may be administered as otherwise
15 provided under this subsection or, in whole or in part,
16 through a managed care provider.
17
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- (c) Notwithstanding any provision to the contrary under subparagraph division (b) or this subparagraph division (c), individuals eligible for medical assistance under this paragraph v who are determined by the department to be exempt from mandatory enrollment in benchmark or benchmark-equivalent coverage pursuant to 42 C.F.R. §440.315, may select either of the following:
- 25 (i) The medical assistance state plan benefits
 26 package for individuals otherwise eligible under this
 27 subsection administered as otherwise provided under
 28 this subsection.
- 29 (ii) The benefits specified under subparagraph
 30 division (a) administered as otherwise provided under
 31 this subsection.
- Sec. ____. Section 249N.2, subsections 7, 12, and 13, Code 2014, are amended by striking the subsections. Sec. ___. Section 249N.2, subsection 17, Code 2014, 35 is amended to read as follows:
- 17. "Participating accountable care organization"
 37 means an accountable care organization approved by the
 38 department to participate in as a provider under the
 39 Iowa health and wellness plan provider network.
- 40 Sec. __. Section 249N.4, Code 2014, is amended to 41 read as follows:
 - 249N.4 Iowa health and wellness plan eligibility.
- 1. Except as otherwise provided in this chapter,
 44 an individual may participate in the Iowa health
 45 and wellness plan if the individual meets all of the
 46 following criteria:
 - a. Is an eligible individual.

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48 b. Meets the citizenship or alienage requirements 49 of the medical assistance program, and is a resident 50 of Iowa, and provides a social security number upon 1 application for the plan.

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- c. Fulfills all other conditions of participation 3 in the Iowa health and wellness plan, including member 4 financial participation pursuant to section 249N.7.
- 2. An individual who has access to affordable 6 employer-sponsored health care coverage, as defined 7 by rule of the department to align with regulations 8 adopted by the federal internal revenue service under 9 the Affordable Care Act, shall not be eligible for 10 participation in the Iowa health and wellness plan.
- 3. a. The department may elect to pay the cost of 12 health insurance premiums under the health insurance 13 premium payment program pursuant to section 249A.3, 14 subsection 10, for individuals with access to such 15 health insurance coverage, if the department determines such payment to be cost-effective. Each applicant for 17 the Iowa health and wellness plan shall provide to the 18 department all insurance information required by the 19 health insurance premium payment program in accordance 20 with rules adopted by the department.
- a. The department may elect to pay the 22 cost of premiums for applicants with access 23 to employer-sponsored health care coverage if 24 the department determines such payment to be 25 cost-effective.
- b. If health insurance premium payment is provided 27 under this subsection, the department shall supplement 28 coverage as necessary to provide covered benefits 29 specified under section 249A.3, subsection 1, paragraph 30 "v", subparagraph (2), subparagraph division (a) or 31 (c), as applicable.
- b. 3. Eligibility for the Iowa health and wellness 32 33 plan is a qualifying event under the federal Health 34 Insurance Portability and Accountability Act of 1996, 35 Pub. L. No. 104-191.
- c. If premium payment is provided under this 37 subsection for employer-sponsored health care coverage, 38 the Iowa health and wellness plan shall supplement such 39 coverage as necessary to provide the covered benefits 40 specified under section 249N.5.
- 41 The department shall implement the Iowa health 42 and wellness plan in a manner that ensures that the 43 Iowa health and wellness plan is the payor of last 44 resort.
- 5. A member is eligible for coverage effective 46 the first day of the month following the month of 47 application for enrollment.
- 48 6. 5. Following initial enrollment, a member 49 is eligible for covered benefits for twelve months, 50 subject to program termination and other limitations

1 otherwise specified in this chapter. The department 2 shall review the member's eligibility on at least an 3 annual basis.

Sec. ___. Section 249N.5, subsection 2, Code 2014, 5 is amended to read as follows:

- 2. a. For members whose household income is at or below one hundred percent of the federal poverty level or who have been determined by the department to be exempt from mandatory enrollment in benchmark or benchmark-equivalent coverage pursuant to 42 C.F.R. §440.315, the plan shall be administered by the Iowa Medicaid enterprise consistent with program administration applicable to individuals under section 249A.3, subsection 1, with the exception of dental services which may be administered, in whole or in part, through a managed care provider.
- For members whose household income is above 17 18 one hundred percent but not in excess of one hundred 19 thirty-three percent of the federal poverty level and 20 who have not been determined by the department to be 21 exempt from mandatory enrollment in an benchmark or 22 benchmark-equivalent coverage pursuant to 42 C.F.R. 23 §440.315, the plan shall be administered through 24 provision of premium assistance for the purchase of 25 the covered benefits qualified coverage through the 26 American health benefits exchange created pursuant 27 to the Affordable Care Act. The department may pay 28 premiums and supplemental cost-sharing subsidies 29 directly to qualified health plans participating in the 30 American health benefits exchange created pursuant to 31 the Affordable Care Act on behalf of the member. 32

32 Sec. __. Section 249N.6, Code 2014, is amended to 33 read as $\overline{\text{follows:}}$

34 **249N.6** Iowa health and wellness plan provider 35 network Provider networks.

- 1. The Towa health and wellness plan provider
 network for members receiving benefits pursuant
 to section 249N.5, subsection 2, paragraph a,
 shall include all providers enrolled in the medical
 assistance program and all participating accountable
 care organizations. Reimbursement under this chapter
 subsection shall only be made to such Towa health and
 wellness plan providers for covered benefits.
- 44 2. a. Upon enrollment, a member shall choose a 45 primary medical provider and, to the extent feasible, 46 shall also choose a medical home within the lowa health 47 and wellness plan provider network.
- 48 b. If the member does not choose a primary medical 49 provider or a medical home, the department shall assign 50 the member to a primary medical provider or a medical

1 home in accordance with the Medicaid managed health 2 care, mandatory enrollment provisions specified in 3 rules adopted by the department pursuant to chapter 4 249A and in accordance with quality data available to 5 the department.

- The department shall develop a mechanism 7 for primary medical providers, medical homes, and 8 participating accountable care organizations to 9 jointly facilitate member care coordination of both 10 clinical services and nonclinical community and social 11 supports that address social determinants of health. 12 The Iowa health and wellness plan shall provide for 13 reimbursement of care Such care coordination services 14 provided under the plan consistent with the shall 15 be reimbursed in accordance with a reimbursement 16 methodology developed pursuant to section 135.159 by 17 rule of the department in accordance with chapter $\overline{17}A$.
- 3. a. d. The department shall provide procedures 19 for accountable care organizations that emerge through 20 local markets to participate in the Iowa health and 21 wellness plan provider network. Such accountable 22 care organizations shall incorporate the medical home 23 as defined and specified in chapter 135, division 24 XXII, as a foundation and shall emphasize whole-person 25 orientation and coordination and integration of both 26 clinical services and nonclinical community and social 27 supports that address social determinants of health. 28 A participating accountable care organization shall 29 enter into a contract with the department to ensure the 30 coordination and management of the health of attributed 31 members, to produce quality health care outcomes, and 32 to control overall cost.
- (1) The department shall establish by rule 34 in accordance with chapter 17A the qualifications, 35 contracting processes, and contract terms for a 36 participating accountable care organization. The rules 37 shall also establish a methodology for attribution 38 of a member to a participating accountable care 39 organization.

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40 c. (2) A participating accountable care 41 organization contract shall establish accountability 42 based on quality performance and total cost-of-care 43 metrics for the attributed population. In developing 44 quality performance standards, the department shall 45 consider those utilized by state accountable care 46 organization models including but not limited to the 47 quality index score and the Medicare shared savings 48 program quality reporting metrics. The payment models 49 shall include but are not limited to risk sharing, 50 including both shared savings and shared costs,

1 between the state and the participating accountable 2 care organization, and bonus payments for improved 3 quality. The contract terms shall require that a 4 participating accountable care organization is subject 5 to shared savings beginning with the initial year of 6 the contract, must have quality metrics in place within 7 three years of the initial year of the contract, and 8 must participate in risk sharing within five years of 9 the initial year of the contract.

- 10 4. e. To the greatest extent possible, members 11 shall have a choice of providers within the Iowa health 12 and wellness plan provider network to facilitate access 13 to locally-based health care providers and services. 14 However, member choice may be limited by the results of 15 attribution under this section and by the participating 16 accountable care organization, with prior approval 17 of the department, if the member's health condition 18 would benefit from limiting the member's choice of an 19 Iowa health and wellness plan a provider to ensure 20 coordination of services, or due to overutilization of 21 covered benefits. The participating accountable care 22 organization shall provide thirty days' notice to the 23 member prior to limitation of such choice.
- 5. a. f. An Iowa health and wellness plan A 25 provider shall be reimbursed for covered benefits 26 under the Iowa health and wellness plan utilizing the 27 same reimbursement methodology as that applicable to 28 individuals eligible for medical assistance under 29 section 249A.3, subsection 1. Additionally, care 30 coordination services shall be reimbursed in accordance 31 with the reimbursement methodology developed by rule of 32 the department.

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- Notwithstanding paragraph "a" "f", a b. q. 34 participating accountable care organization under 35 contract with the department shall be reimbursed 36 utilizing a value-based reimbursement methodology.
- 6. a. h. Iowa health and wellness plan providers 38 Providers shall exchange member health information 39 as provided by rule to facilitate coordination and 40 management of members' health, quality health care 41 outcomes, and containment of and reduction in costs.
- b. i. The department shall provide the health 43 care claims data of attributed members to a member's 44 participating accountable care organization on a 45 timeframe established by rule of the department.
- The provider network for members receiving 47 benefits pursuant to section 249N.5, subsection 2, 48 paragraph b", shall include all providers under the 49 member's qualified health plan in the American health 50 benefits exchange.

1 DIVISION 2 DENTAL COVERAGE — ASSIGNMENT OF BENEFITS NEW SECTION. 514C.3C Dental coverage — Sec. 4 assignment of health insurance benefits. A person who is the owner of any rights or benefits 6 under a policy or contract of insurance which provides 7 for coverage of dental care services shall be permitted 8 to assign all or any part of that person's rights and 9 privileges under the policy or contract, including but 10 not limited to the right to designate a beneficiary 11 and to have an individual policy or contract issued in 12 accordance with the terms of the policy or contract. 13 Such assignment shall be without prejudice to the 14 insurer on account of any payment the insurer makes or 15 individual policy or contract the insurer issues before 16 receiving notice of the assignment, provided that the 17 insurer was acting in good faith. If written proof of 18 an assignment of benefits is presented to an insurer, 19 health maintenance organization, managed care plan, 20 health care plan, preferred provider organization, or 21 other third-party payor, then payment shall be made 22 directly to the health care professional or health care 23 facility providing the dental services. Nothing in 24 this section shall be construed to prevent any persons 25 from reconciling duplicate payments. Sec. . Section 514J.103, subsection 1, Code 27 2014, is amended to read as follows: Except as provided in subsection 2, this chapter 29 shall apply to all health carriers, including health 30 carriers issuing a policy or certificate that provides 31 coverage for dental care. . Section 514J.103, subsection 2, paragraph 32 33 a, Code 2014, is amended to read as follows: a. A policy or certificate that provides coverage 35 only for a specified disease, specified accident or 36 accident-only, credit, disability income, hospital 37 indemnity, long-term care, dental care, vision care, or 38 any other limited supplemental benefit. 39 DIVISION 40 FAMILY PLANNING - STATE PLAN AMENDMENT Sec. . Section 249A.3, subsection 2, paragraph 41 42 a, subparagraph (9), Code 2014, is amended to read as 43 follows: Individuals eligible for family planning 45 services under a federally approved demonstration 46 waiver or state plan. . MEDICAID STATE PLAN AMENDMENT - FAMILY 48 PLANNING. The department of human services shall amend 49 the medical assistance state plan to include, effective

50 no later than January 1, 2015, the eligibility

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1 provisions of the Iowa family planning network section
 2 1115 demonstration waiver in effect on January 1,
 3 2013, as the criteria is amended to be applicable
 4 to individuals who are uninsured or who have health
 5 insurance coverage subject to the medical assistance
 6 program being the payer of last resort. The department
 7 shall implement the state plan amendment upon receipt
8 of approval by the centers for Medicare and Medicaid
9 services of the United States department of health and
10 human services.
      Sec. . 2010 Iowa Acts, chapter 1192, section
12 11, subsection 24, paragraph a, subparagraph (1),
13 subparagraph division (a), is amended to read as
14 follows:
      (a) Are uninsured or have health insurance coverage
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16 that does not include coverage for benefits provided
17 under the Iowa family planning network subject to the
18 medical assistance program being the payer of last
19 resort.
              . EFFECTIVE UPON ENACTMENT AND CONTINGENT
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      Sec.
21 IMPLEMENTATION. The sections of this division of this
22 Act relating to the family planning waiver and state
23 plan amendment, being deemed of immediate importance,
24 take effect upon enactment. However, the department
25 of human services shall only implement those sections
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26 to the extent the department receives federal approval 27 of the requests relating to the waiver and the medical 28 assistance state plan amendment necessary to implement

30 102. By renumbering as necessary.

COMMITTEE ON APPROPRIATIONS ROBERT E. DVORSKY, CHAIRPERSON

29 those sections.>