

Withdrawn
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JAN 15 2004
HUMAN RESOURCES

HOUSE FILE **2035**
BY CARROLL

Passed House, Date _____ Passed Senate, Date _____
Vote: Ayes _____ Nays _____ Vote: Ayes _____ Nays _____
Approved _____

A BILL FOR

1 An Act relating to the medical assistance and state supplementary
2 assistance programs, providing an effective date, and
3 providing for retroactive applicability.

4 BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF IOWA:

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HF 2035

1 Section 1. Section 135C.1, subsection 17, Code Supplement
2 2003, is amended to read as follows:

3 17. "Residential care facility" means any institution,
4 place, building, or agency providing for a period exceeding
5 twenty-four consecutive hours accommodation, board, personal
6 assistance and other essential daily living activities to
7 three or more individuals, not related to the administrator or
8 owner thereof within the third degree of consanguinity, who by
9 reason of illness, disease, or physical or mental infirmity
10 are unable to sufficiently or properly care for themselves but
11 who do not require the services of a registered or licensed
12 practical nurse except on an emergency basis or who by reason
13 of illness, disease, or physical or mental infirmity are
14 unable to sufficiently or properly care for themselves but who
15 do not require the services of a registered or licensed
16 practical nurse except on an emergency basis if home and
17 community-based services, other than nursing services, of the
18 type and within the cost limits included under the medical
19 assistance program pursuant to chapter 249A are provided.

20 Sec. 2. Section 135C.4, Code 2003, is amended to read as
21 follows:

22 135C.4 RESIDENTIAL CARE FACILITIES.

23 Each facility licensed as a residential care facility shall
24 provide an organized continuous twenty-four-hour program of
25 care commensurate with the needs of the residents of the home
26 and under the immediate direction of a person approved and
27 certified by the department whose combined training and
28 supervised experience is such as to ensure adequate and
29 competent care. All admissions to residential care facilities
30 shall be based on an order written by a physician certifying
31 that the individual being admitted does not require nursing
32 services or that the individual's need for nursing services
33 can be avoided if home and community-based services, other
34 than nursing services, of the type and within the cost limits
35 included under the medical assistance program pursuant to

1 chapter 249A are provided to the individual.

2 Sec. 3. NEW SECTION. 222.60A COST OF ASSESSMENT.

3 Notwithstanding any provision of this chapter to the
4 contrary, any amount attributable to any fee assessed pursuant
5 to section 249A.21 that would otherwise be the liability of
6 any county shall be paid by the state. The department may
7 transfer funds from the appropriation for medical assistance
8 to pay any amount attributable to any fee assessed pursuant to
9 section 249A.21 that is a liability of the state.

10 Sec. 4. Section 249.3, Code 2003, is amended by adding the
11 following new subsection:

12 NEW SUBSECTION. 4. At the discretion of the department,
13 persons who meet the criteria listed in all of the following
14 paragraphs:

15 a. Are either of the following:

16 (1) Sixty-five years of age or older.

17 (2) Disabled as defined by 42 U.S.C. § 1382c(a)(3), except
18 that being engaged in substantial gainful activity shall not
19 preclude a determination of disability for the purpose of this
20 subparagraph.

21 b. Live in one of the following:

22 (1) The individual's own home.

23 (2) The home of another individual.

24 (3) A group living arrangement.

25 (4) A medical facility.

26 c. Would be eligible for supplemental security income
27 benefits but for having excess income or but for being engaged
28 in substantial gainful activity and having excess income.

29 d. Are not eligible for another state supplementary
30 assistance group.

31 e. Receive medical assistance under chapter 249A and are
32 not required to meet a spend-down or pay a premium to be
33 eligible for such benefits.

34 f. Is currently eligible for Medicare part B.

35 g. Have income exceeding one hundred thirty-five percent

1 of the federal poverty level but not exceeding the medical
2 assistance income limit for the eligibility group for the
3 individual person's living arrangement.

4 Sec. 5. Section 249.4, Code 2003, is amended to read as
5 follows:

6 249.4 APPLICATION -- AMOUNT OF GRANT.

7 1. Applications for state supplementary assistance shall
8 be made in the form and manner prescribed by the director or
9 the director's designee, with the approval of the council on
10 human services, pursuant to chapter 17A. Each person who so
11 applies and is found eligible under section 249.3 shall, so
12 long as the person's eligibility continues, receive state
13 supplementary assistance on a monthly basis, from funds
14 appropriated to the department for the purpose.

15 2. Any person who applies within fifteen months from the
16 date of implementation of eligibility pursuant to section
17 249.3, subsection 4, and who would have been eligible under
18 that subsection for any period on or after October 1, 2003,
19 may be granted benefits retroactive to October 1, 2003.

20 Sec. 6. Section 249A.21, subsection 1, Code 2003, is
21 amended to read as follows:

22 1. The department may assess intermediate care facilities
23 for persons with mental retardation, as defined in section
24 135C.1, ~~that are not operated by the state,~~ a fee in an amount
25 not to exceed six percent of the total annual revenue of the
26 facility for the preceding fiscal year.

27 Sec. 7. Section 249A.21, Code 2003, is amended by adding
28 the following new subsection:

29 NEW SUBSECTION. 6. The department may adopt
30 administrative rules under section 17A.4, subsection 2, and
31 section 17A.5, subsection 2, paragraph "b", to implement this
32 section, and any fee assessed pursuant to this section against
33 an intermediate care facility for persons with mental
34 retardation that is operated by the state may be made
35 retroactive to October 1, 2003.

1 those operated by the state and provides for the transfer of
2 funds from the medical assistance appropriation to cover
3 payment of the amounts attributable to the assessment. These
4 provisions are retroactively applicable to October 1, 2003.

5 The bill amends the eligibility provisions for state
6 supplementary assistance to cover additional persons. This
7 provision is retroactively applicable to October 1, 2003.

8 The bill also provides that the nursing facility quality
9 assurance assessment is retroactively applicable to October 1,
10 2003.

11 The bill takes effect upon enactment.

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