

House File 2460 - Introduced

HOUSE FILE 2460

BY COMMITTEE ON APPROPRIATIONS

(SUCCESSOR TO LSB 5014HB)

A BILL FOR

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

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

DIVISION I

DEPARTMENT ON AGING — FY 2016-2017

Section 1. 2015 Iowa Acts, chapter 137, section 121, is amended to read as follows:

SEC. 121. DEPARTMENT ON AGING. There is appropriated from the general fund of the state to the department on aging for the fiscal year beginning July 1, 2016, and ending June 30, 2017, the following amount, or so much thereof as is necessary, to be used for the purposes designated:

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

.....	\$	5,699,866
		<u>11,436,066</u>
.....	FTEs	31.00

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

2. Of the funds appropriated in this section, ~~\$139,973~~ \$279,946 is transferred to the economic development authority for the Iowa commission on volunteer services to be used for

1 the retired and senior volunteer program.

2 3. a. The department on aging shall establish and enforce
3 procedures relating to expenditure of state and federal funds
4 by area agencies on aging that require compliance with both
5 state and federal laws, rules, and regulations, including but
6 not limited to all of the following:

7 (1) Requiring that expenditures are incurred only for goods
8 or services received or performed prior to the end of the
9 fiscal period designated for use of the funds.

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

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

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

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

26 4. Of the funds appropriated in this section, at least
27 ~~\$125,000~~ \$250,000 shall be used to fund the unmet needs
28 identified through Iowa's aging and disability resource center
29 network.

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

1 6. Of the funds appropriated in this section, ~~\$406,833~~
2 \$850,000 shall be used for the purposes of chapter 231E and
3 section 231.56A, of which ~~\$144,333~~ \$350,000 shall be used for
4 the office of substitute decision maker pursuant to chapter
5 231E, and the remainder shall be distributed equally to the
6 area agencies on aging to administer the prevention of elder
7 abuse, neglect, and exploitation program pursuant to section
8 231.56A, in accordance with the requirements of the federal
9 Older Americans Act of 1965, 42 U.S.C. §3001 et seq., as
10 amended.

11 DIVISION II

12 OFFICE OF LONG-TERM CARE OMBUDSMAN — FY 2016-2017

13 Sec. 2. 2015 Iowa Acts, chapter 137, section 122, is amended
14 to read as follows:

15 SEC. 122. OFFICE OF LONG-TERM CARE OMBUDSMAN.

16 1. There is appropriated from the general fund of the state
17 to the office of long-term care ombudsman for the fiscal year
18 beginning July 1, 2016, and ending June 30, 2017, the following
19 amount, or so much thereof as is necessary, to be used for the
20 purposes designated:

21 For salaries, support, administration, maintenance, and
22 miscellaneous purposes, and for not more than the following
23 full-time equivalent positions:

24	\$	638,391
25		<u>1,276,783</u>
26	FTEs	17.00

27 2. Of the funds appropriated in this section, ~~\$110,000~~
28 \$220,000 shall be used to continue to provide for additional
29 local long-term care ombudsmen.

30 DIVISION III

31 DEPARTMENT OF PUBLIC HEALTH — FY 2016-2017

32 Sec. 3. 2015 Iowa Acts, chapter 137, section 123, is amended
33 to read as follows:

34 SEC. 123. DEPARTMENT OF PUBLIC HEALTH. There is
35 appropriated from the general fund of the state to the

1 department of public health for the fiscal year beginning July
2 1, 2016, and ending June 30, 2017, the following amounts, or
3 so much thereof as is necessary, to be used for the purposes
4 designated:

5 1. ADDICTIVE DISORDERS

6 For reducing the prevalence of the use of tobacco, alcohol,
7 and other drugs, and treating individuals affected by addictive
8 behaviors, including gambling, and for not more than the
9 following full-time equivalent positions:

10	\$	13,631,845
11		<u>26,988,690</u>
12	FTEs	10.00

13 a. (1) Of the funds appropriated in this subsection,
14 ~~\$2,624,180~~ \$5,248,361 shall be used for the tobacco use
15 prevention and control initiative, including efforts at the
16 state and local levels, as provided in [chapter 142A](#). The
17 commission on tobacco use prevention and control established
18 pursuant to [section 142A.3](#) shall advise the director of
19 public health in prioritizing funding needs and the allocation
20 of moneys appropriated for the programs and initiatives.
21 Activities of the programs and initiatives shall be in
22 alignment with the United States centers for disease control
23 and prevention best practices for comprehensive tobacco control
24 programs that include the goals of preventing youth initiation
25 of tobacco usage, reducing exposure to secondhand smoke,
26 and promotion of tobacco cessation. To maximize resources,
27 the department shall determine if third-party sources are
28 available to instead provide nicotine replacement products
29 to an applicant prior to provision of such products to an
30 applicant under the initiative. The department shall track and
31 report to the individuals specified in this Act, any reduction
32 in the provision of nicotine replacement products realized
33 by the initiative through implementation of the prerequisite
34 screening.

35 (2) (a) ~~Of the funds allocated in this paragraph "a",~~

1 ~~\$226,533 is transferred to the~~ The department shall collaborate
2 with the alcoholic beverages division of the department of
3 commerce for enforcement of tobacco laws, regulations, and
4 ordinances and to engage in tobacco control activities approved
5 by the division of tobacco use prevention and control of the
6 department of public health as specified in the memorandum of
7 understanding entered into between the divisions.

8 (b) For the fiscal year beginning July 1, 2016, and ending
9 June 30, 2017, the terms of the memorandum of understanding,
10 entered into between the division of tobacco use prevention
11 and control of the department of public health and the
12 alcoholic beverages division of the department of commerce,
13 governing compliance checks conducted to ensure licensed retail
14 tobacco outlet conformity with tobacco laws, regulations, and
15 ordinances relating to persons under ~~eighteen~~ 18 years of
16 age, shall continue to restrict the number of such checks to
17 one check per retail outlet, and one additional check for any
18 retail outlet found to be in violation during the first check.

19 b. Of the funds appropriated in this subsection,
20 ~~\$11,007,664~~ \$21,740,329 shall be used for problem gambling and
21 substance-related disorder prevention, treatment, and recovery
22 services, including a 24-hour helpline, public information
23 resources, professional training, youth prevention, and program
24 evaluation.

25 ~~(1) Of the funds allocated in this paragraph "b", \$9,451,857~~
26 ~~shall be used for substance-related disorder prevention and~~
27 ~~treatment.~~

28 ~~(a) Of the funds allocated in this subparagraph (1),~~
29 ~~\$449,650 shall be used for the public purpose of a grant~~
30 ~~program to provide substance-related disorder prevention~~
31 ~~programming for children.~~

32 ~~(i) Of the funds allocated in this subparagraph division~~
33 ~~(a), \$213,769 shall be used for grant funding for organizations~~
34 ~~that provide programming for children by utilizing mentors.~~
35 ~~Programs approved for such grants shall be certified or must~~

1 ~~be certified within six months of receiving the grant award~~
2 ~~by the Iowa commission on volunteer services as utilizing the~~
3 ~~standards for effective practice for mentoring programs.~~

4 ~~(ii) Of the funds allocated in this subparagraph division~~
5 ~~(a), \$213,419 shall be used for grant funding for organizations~~
6 ~~providing programming that includes youth development and~~
7 ~~leadership services. The programs shall also be recognized as~~
8 ~~being programs that are scientifically based with evidence of~~
9 ~~their effectiveness in reducing substance-related disorders in~~
10 ~~children.~~

11 ~~(iii) The department of public health shall utilize a~~
12 ~~request for proposals process to implement the grant program.~~

13 ~~(iv) All grant recipients shall participate in a program~~
14 ~~evaluation as a requirement for receiving grant funds.~~

15 ~~(v) Of the funds allocated in this subparagraph division~~
16 ~~(a), up to \$22,461 may be used to administer substance-related~~
17 ~~disorder prevention grants and for program evaluations.~~

18 ~~(b) Of the funds allocated in this subparagraph~~
19 ~~(1), \$136,301 shall be used for culturally competent~~
20 ~~substance-related disorder treatment pilot projects.~~

21 ~~(i) The department shall utilize the amount allocated~~
22 ~~in this subparagraph division (b) for at least three pilot~~
23 ~~projects to provide culturally competent substance-related~~
24 ~~disorder treatment in various areas of the state. Each pilot~~
25 ~~project shall target a particular ethnic minority population.~~
26 ~~The populations targeted shall include but are not limited to~~
27 ~~African American, Asian, and Latino.~~

28 ~~(ii) The pilot project requirements shall provide for~~
29 ~~documentation or other means to ensure access to the cultural~~
30 ~~competence approach used by a pilot project so that such~~
31 ~~approach can be replicated and improved upon in successor~~
32 ~~programs.~~

33 ~~(2) Of the funds allocated in this paragraph "b", up~~
34 ~~to \$1,555,807 may be used for problem gambling prevention,~~
35 ~~treatment, and recovery services.~~

1 ~~(a) Of the funds allocated in this subparagraph (2),~~
2 ~~\$1,286,881 shall be used for problem gambling prevention and~~
3 ~~treatment.~~

4 ~~(b) Of the funds allocated in this subparagraph (2), up to~~
5 ~~\$218,926 may be used for a 24-hour helpline, public information~~
6 ~~resources, professional training, and program evaluation.~~

7 ~~(c) Of the funds allocated in this subparagraph (2), up~~
8 ~~to \$50,000 may be used for the licensing of problem gambling~~
9 ~~treatment programs.~~

10 ~~(3) It is the intent of the general assembly that from the~~
11 ~~moneys allocated in this paragraph "b", persons with a dual~~
12 ~~diagnosis of substance-related disorder and gambling addiction~~
13 ~~shall be given priority in treatment services.~~

14 ~~e. Notwithstanding any provision of law to the contrary,~~
15 ~~to standardize the availability, delivery, cost of delivery,~~
16 ~~and accountability of problem gambling and substance-related~~
17 ~~disorder treatment services statewide, the department shall~~
18 ~~continue implementation of a process to create a system~~
19 ~~for delivery of treatment services in accordance with the~~
20 ~~requirements specified in 2008 Iowa Acts, chapter 1187, section~~
21 ~~3, subsection 4. To ensure the system provides a continuum~~
22 ~~of treatment services that best meets the needs of Iowans,~~
23 ~~the problem gambling and substance-related disorder treatment~~
24 ~~services in any area may be provided either by a single agency~~
25 ~~or by separate agencies submitting a joint proposal.~~

26 ~~(1) The system for delivery of substance-related disorder~~
27 ~~and problem gambling treatment shall include problem gambling~~
28 ~~prevention.~~

29 ~~(2) The system for delivery of substance-related disorder~~
30 ~~and problem gambling treatment shall include substance-related~~
31 ~~disorder prevention by July 1, 2017.~~

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

1 d. The requirement of section ~~123.53~~ 123.17, subsection
2 5, is met by the appropriations and allocations made in this
3 division of this Act for purposes of substance-related disorder
4 treatment and addictive disorders for the fiscal year beginning
5 July 1, 2016.

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

14 2. HEALTHY CHILDREN AND FAMILIES

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

19	\$	2,308,771
20		<u>5,593,774</u>
21	FTEs	12.00

22 a. Of the funds appropriated in this subsection, not
23 more than ~~\$367,420~~ \$734,841 shall be used for the healthy
24 opportunities for parents to experience success (HOPES)-healthy
25 families Iowa (HFI) program established pursuant to section
26 135.106. The funding shall be distributed to renew the grants
27 that were provided to the grantees that operated the program
28 during the fiscal year ending June 30, 2016.

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

1 c. Of the funds appropriated in this subsection, ~~\$1,099,414~~
2 \$3,175,059 shall be used for continuation of the department's
3 initiative to provide for adequate developmental surveillance
4 and screening during a child's first five years. The funds
5 shall be used first to fully fund the current sites to ensure
6 that the sites are fully operational, with the remaining
7 funds to be used for expansion to additional sites. The full
8 implementation and expansion shall include enhancing the scope
9 of the program through collaboration with the child health
10 specialty clinics to promote healthy child development through
11 early identification and response to both biomedical and social
12 determinants of healthy development; by monitoring child
13 health metrics to inform practice, document long-term health
14 impacts and savings, and provide for continuous improvement
15 through training, education, and evaluation; and by providing
16 for practitioner consultation particularly for children with
17 behavioral conditions and needs. The department of public
18 health shall also collaborate with the Iowa Medicaid enterprise
19 and the child health specialty clinics to integrate the
20 activities of the first five initiative into the establishment
21 of patient-centered medical homes, community utilities,
22 accountable care organizations, and other integrated care
23 models developed to improve health quality and population
24 health while reducing health care costs. To the maximum extent
25 possible, funding allocated in this paragraph shall be utilized
26 as matching funds for medical assistance program reimbursement.

27 d. Of the funds appropriated in this subsection, ~~\$37,320~~
28 \$74,640 shall be distributed to a statewide dental carrier to
29 provide funds to continue the donated dental services program
30 patterned after the projects developed by the lifeline network
31 to provide dental services to indigent individuals who are
32 elderly or with disabilities.

33 e. Of the funds appropriated in this subsection, ~~\$55,997~~
34 \$111,995 shall be used for childhood obesity prevention.

35 f. Of the funds appropriated in this subsection, ~~\$81,384~~

1 \$162,768 shall be used to provide audiological services and
2 hearing aids for children. The department may enter into a
3 contract to administer this paragraph.

4 g. Of the funds appropriated in this subsection, ~~\$12,500~~
5 \$25,000 is transferred to the university of Iowa college of
6 dentistry for provision of primary dental services to children.
7 State funds shall be matched on a dollar-for-dollar basis.
8 The university of Iowa college of dentistry shall coordinate
9 efforts with the department of public health, bureau of
10 oral and health delivery systems, to provide dental care to
11 underserved populations throughout the state.

12 h. Of the funds appropriated in this subsection, ~~\$25,000~~
13 \$50,000 shall be used to address youth suicide prevention.

14 i. Of the funds appropriated in this subsection, ~~\$25,000~~
15 \$50,000 shall be used to support the Iowa effort to address the
16 survey of children who experience adverse childhood experiences
17 known as ACEs.

18 j. The department of public health shall continue to
19 administer the program to assist parents in this state with
20 costs resulting from the death of a child in accordance with
21 the provisions of 2014 Iowa Acts, chapter 1140, section 22,
22 subsection 12.

23 3. CHRONIC CONDITIONS

24 For serving individuals identified as having chronic
25 conditions or special health care needs, and for not more than
26 the following full-time equivalent positions:

27	\$	<u>2,477,846</u>
28		<u>4,930,692</u>
29	FTEs	5.00

30 a. Of the funds appropriated in this subsection, ~~\$79,966~~
31 \$159,932 shall be used for grants to individual patients who
32 have an inherited metabolic disorder to assist with the costs
33 of medically necessary foods and formula.

34 b. Of the funds appropriated in this subsection, ~~\$445,822~~
35 \$891,644 shall be used for the brain injury services program

1 pursuant to [section 135.22B](#), including for continuation of the
2 contracts for resource facilitator services in accordance with
3 [section 135.22B](#), subsection 9, and to enhance brain injury
4 training and recruitment of service providers on a statewide
5 basis. Of the amount allocated in this paragraph, ~~\$47,500~~
6 \$95,000 shall be used to fund one full-time equivalent position
7 to serve as the state brain injury services program manager.

8 c. Of the funds appropriated in this subsection, ~~\$273,991~~
9 \$547,982 shall be used as additional funding to leverage
10 federal funding through the federal Ryan White Care Act, Tit.
11 II, AIDS drug assistance program supplemental drug treatment
12 grants.

13 d. Of the funds appropriated in this subsection, ~~\$74,911~~
14 \$149,823 shall be used for the public purpose of continuing
15 to contract with an existing national-affiliated organization
16 to provide education, client-centered programs, and client
17 and family support for people living with epilepsy and their
18 families. The amount allocated in this paragraph in excess
19 of ~~\$50,000~~ \$100,000 shall be matched dollar-for-dollar by the
20 organization specified.

21 e. Of the funds appropriated in this subsection, ~~\$392,557~~
22 \$785,114 shall be used for child health specialty clinics.

23 f. Of the funds appropriated in this subsection,
24 ~~\$200,000~~ \$400,000 shall be used by the regional autism
25 assistance program established pursuant to [section 256.35](#),
26 and administered by the child health specialty clinic located
27 at the university of Iowa hospitals and clinics. The funds
28 shall be used to enhance interagency collaboration and
29 coordination of educational, medical, and other human services
30 for persons with autism, their families, and providers of
31 services, including delivering regionalized services of care
32 coordination, family navigation, and integration of services
33 through the statewide system of regional child health specialty
34 clinics and fulfilling other requirements as specified in
35 chapter 225D. The university of Iowa shall not receive funds

1 allocated under this paragraph for indirect costs associated
2 with the regional autism assistance program.

3 g. Of the funds appropriated in this subsection, ~~\$285,496~~
4 \$570,993 shall be used for the comprehensive cancer control
5 program to reduce the burden of cancer in Iowa through
6 prevention, early detection, effective treatment, and ensuring
7 quality of life. Of the funds allocated in this paragraph "g",
8 ~~\$75,000~~ \$150,000 shall be used to support a melanoma research
9 symposium, a melanoma biorepository and registry, basic and
10 translational melanoma research, and clinical trials.

11 h. Of the funds appropriated in this subsection, ~~\$63,225~~
12 \$101,450 shall be used for cervical and colon cancer screening,
13 and ~~\$150,000~~ \$300,000 shall be used to enhance the capacity
14 of the cervical cancer screening program to include provision
15 of recommended prevention and early detection measures to a
16 broader range of low-income women.

17 i. Of the funds appropriated in this subsection, ~~\$263,347~~
18 \$526,695 shall be used for the center for congenital and
19 inherited disorders.

20 j. Of the funds appropriated in this subsection, ~~\$64,705~~
21 \$129,411 shall be used for the prescription drug donation
22 repository program created in [chapter 135M](#).

23 k. Of the funds appropriated in this subsection, ~~\$107,631~~
24 \$215,263 shall be used by the department of public health
25 for reform-related activities, including but not limited to
26 facilitation of communication to stakeholders at the state and
27 local level, administering the patient-centered health advisory
28 council pursuant to [section 135.159](#), and involvement in health
29 care system innovation activities occurring across the state.

30 l. Of the funds appropriated in this subsection, ~~\$12,500~~
31 \$25,000 shall be used for administration of [chapter 124D](#), the
32 medical cannabidiol Act.

33 4. COMMUNITY CAPACITY

34 For strengthening the health care delivery system at the
35 local level, and for not more than the following full-time

1 equivalent positions:

2	.....	\$	4,410,667
3			<u>7,739,136</u>
4	.....	FTEs	11.00
5			<u>13.00</u>

6 a. Of the funds appropriated in this subsection, ~~\$49,707~~
7 \$146,414 is allocated for continuation of the child vision
8 screening program implemented through the university of Iowa
9 hospitals and clinics in collaboration with early childhood
10 Iowa areas. The program shall submit a report to the
11 individuals identified in this Act for submission of reports
12 regarding the use of funds allocated under this paragraph
13 "a". The report shall include the objectives and results for
14 the program year including the target population and how the
15 funds allocated assisted the program in meeting the objectives;
16 the number, age, and location within the state of individuals
17 served; the type of services provided to the individuals
18 served; the distribution of funds based on service provided;
19 and the continuing needs of the program.

20 b. Of the funds appropriated in this subsection, ~~\$55,328~~
21 \$110,656 is allocated for continuation of an initiative
22 implemented at the university of Iowa and ~~\$49,952~~ \$99,904
23 is allocated for continuation of an initiative at the state
24 mental health institute at Cherokee to expand and improve the
25 workforce engaged in mental health treatment and services.
26 The initiatives shall receive input from the university of
27 Iowa, the department of human services, the department of
28 public health, and the mental health and disability services
29 commission to address the focus of the initiatives.

30 c. Of the funds appropriated in this subsection, ~~\$582,314~~
31 \$1,164,628 shall be used for essential public health services
32 that promote healthy aging throughout one's lifespan,
33 contracted through a formula for local boards of health, to
34 enhance health promotion and disease prevention services.

35 d. Of the funds appropriated in this ~~section~~ subsection,

1 ~~\$49,643~~ \$99,286 shall be deposited in the governmental public
2 health system fund created in [section 135A.8](#) to be used for the
3 purposes of the fund.

4 e. ~~Of the funds appropriated in this subsection, \$52,724~~
5 ~~shall be used to continue to address the shortage of mental~~
6 ~~health professionals in the state.~~

7 f. Of the funds appropriated in this subsection, ~~\$25,000~~
8 \$50,000 shall be used for a grant to a statewide association
9 of psychologists that is affiliated with the American
10 psychological association to be used for continuation of a
11 program to rotate intern psychologists in placements in urban
12 and rural mental health professional shortage areas, as defined
13 in [section 135.180](#).

14 g. (1) Of the funds appropriated in this subsection,
15 ~~\$1,441,484~~ \$1,210,770 shall be allocated as a grant to the Iowa
16 primary care association to be used pursuant to [section 135.153](#)
17 for the statewide coordination of the Iowa collaborative
18 safety net provider network. Coordination of the network
19 shall focus on increasing access by underserved populations
20 to health care services, increasing integration of the
21 health system and collaboration across the continuum of care
22 with a focus on safety net services, and enhancing the Iowa
23 collaborative safety net provider network's communication and
24 education efforts. The amount allocated as a grant under this
25 subparagraph (1) shall be used as follows to support the Iowa
26 collaborative safety net provider network goals of increased
27 access, health system integration, and engagement:

28 (a) For distribution to safety net partners in the state
29 that work to increase access of the underserved population to
30 health services:

31	\$ 512,742
32	<u>1,025,485</u>

33 (i) Of the amount allocated in this subparagraph division
34 (a), up to ~~\$206,707~~ \$413,415 shall be distributed to the
35 Iowa prescription drug corporation for continuation of the

1 pharmaceutical infrastructure for safety net providers as
2 described in [2007 Iowa Acts, chapter 218, section 108](#).

3 (ii) Of the amount allocated in this subparagraph division
4 (a), up to ~~\$174,161~~ \$348,322 shall be distributed to free
5 clinics and free clinics of Iowa for necessary infrastructure,
6 statewide coordination, provider recruitment, service delivery,
7 and provision of assistance to patients in securing a medical
8 home inclusive of oral health care.

9 (iii) Of the amount allocated in this subparagraph division
10 (a), up to ~~\$25,000~~ \$50,000 shall be distributed to the Iowa
11 coalition against sexual assault to continue a training
12 program for sexual assault response team (SART) members,
13 including representatives of law enforcement, victim advocates,
14 prosecutors, and certified medical personnel.

15 (iv) Of the amount allocated in this subparagraph division
16 (a), up to ~~\$106,874~~ \$213,748 shall be distributed to the Polk
17 county medical society for continuation of the safety net
18 provider patient access to a specialty health care initiative
19 as described in [2007 Iowa Acts, chapter 218, section 109](#).

20 (c) For distribution to safety net partners in the state
21 that work to serve as a resource for credible, accurate
22 information on health care-related needs and services
23 for vulnerable populations in the state including the
24 Iowa association of rural health clinics for necessary
25 infrastructure and service delivery transformation and the Iowa
26 primary care association to support partner engagement, program
27 management, and statewide coordination of the network:

28	\$	92,642
29		<u>185,285</u>

30 (2) The amount allocated under this paragraph "g" shall
31 not be reduced for administrative or other costs prior to
32 distribution. The Iowa collaborative safety net provider
33 network may continue to distribute funds allocated pursuant to
34 this paragraph "g" through existing contracts or renewal of
35 existing contracts.

1 (3) For each goal of the Iowa collaborative safety net
2 provider network, the Iowa primary care association shall
3 submit a progress report to the individuals designated in this
4 Act for submission of reports by December 15, 2016, including
5 progress in developing and implementing the network, how the
6 funds were distributed and used in developing and implementing
7 the network, and the remaining needs identified to fully
8 develop and implement the network.

9 h. Of the funds appropriated in this subsection, ~~\$106,700~~
10 \$213,400 shall be used for continuation of the work of the
11 direct care worker advisory council established pursuant to
12 2008 Iowa Acts, chapter 1188, section 69, in implementing the
13 recommendations in the final report submitted by the advisory
14 council to the governor and the general assembly in March 2012,
15 including by continuing to develop, promote, and make available
16 on a statewide basis the prepare-to-care core curriculum and
17 its associated modules and specialties through various formats
18 including online access, community colleges, and other venues;
19 exploring new and maintaining existing specialties including
20 but not limited to oral health and dementia care; supporting
21 instructor training; and assessing and making recommendations
22 concerning the Iowa care book and information technology
23 systems and infrastructure uses and needs.

24 i. (1) Of the funds appropriated in this subsection,
25 ~~\$108,187~~ \$216,375 shall be used for allocation to an
26 independent statewide direct care worker organization selected
27 through a request for proposals process. The contract shall
28 include performance and outcomes measures, and shall allow the
29 contractor to use a portion of the funds received under the
30 contract to collect data to determine results based on the
31 performance and outcomes measures.

32 (2) Of the funds appropriated in this subsection, ~~\$37,500~~
33 \$75,000 shall be used to provide scholarships or other forms of
34 subsidization for direct care worker educational conferences,
35 training, or outreach activities.

1 j. Of the funds appropriated in this subsection, the
2 department may use up to ~~\$29,087~~ \$58,175 for up to one
3 full-time equivalent position to administer the volunteer
4 health care provider program pursuant to [section 135.24](#).

5 k. Of the funds appropriated in this subsection, ~~\$50,000~~
6 \$100,000 shall be used for a matching dental education loan
7 repayment program to be allocated to a dental nonprofit health
8 service corporation to continue to develop the criteria and
9 implement the loan repayment program.

10 l. Of the funds appropriated in this subsection, ~~\$52,911~~
11 \$179,882 is transferred to the college student aid commission
12 for deposit in the rural Iowa primary care trust fund created
13 in [section 261.113](#) to be used for the purposes of the fund.

14 m. Of the funds appropriated in this subsection, ~~\$125,000~~
15 \$250,000 shall be used for the purposes of the Iowa donor
16 registry as specified in [section 142C.18](#).

17 n. Of the funds appropriated in this subsection, ~~\$50,000~~
18 \$100,000 shall be used for continuation of a grant to a
19 nationally affiliated volunteer eye organization that has an
20 established program for children and adults and that is solely
21 dedicated to preserving sight and preventing blindness through
22 education, nationally certified vision screening and training,
23 and community and patient service programs. The organization
24 shall submit a report to the individuals identified in this
25 Act for submission of reports regarding the use of funds
26 allocated under this paragraph "n". The report shall include
27 the objectives and results for the program year including
28 the target population and how the funds allocated assisted
29 the program in meeting the objectives; the number, age, and
30 location within the state of individuals served; the type of
31 services provided to the individuals served; the distribution
32 of funds based on services provided; and the continuing needs
33 of the program.

34 o. Of the funds appropriated in this subsection, ~~\$1,000,000~~
35 \$2,500,000 shall be deposited in the medical residency training

1 account created in section 135.175, subsection 5, paragraph
 2 "a", and is appropriated from the account to the department
 3 of public health to be used for the purposes of the medical
 4 residency training state matching grants program as specified
 5 in section 135.176. However, notwithstanding any provision to
 6 the contrary in section 135.176, priority in the awarding of
 7 the first \$2,000,000 of moneys in the fund for grants shall be
 8 given to sponsors that propose preference in the use of the
 9 grant funds for psychiatric residency positions and family
 10 practice residency positions and priority in the awarding of
 11 any additional moneys in the fund shall be given to sponsors
 12 that propose preference in the use of the grant funds for
 13 internal medicine positions.

14 p. Of the funds appropriated in this subsection, ~~\$78,309~~
 15 \$156,619 is allocated to the university of Iowa hospitals and
 16 clinics to continue a systematic and evidence-based practice
 17 collaborative care model to improve outcomes of mental health
 18 treatment in primary care settings in the state. Funds shall
 19 be used to establish the collaborative care model in several
 20 primary care practices in rural and urban areas throughout the
 21 state, to provide staffing to administer the model, and to
 22 provide staff training and database management to track and
 23 manage patient outcomes.

24 5. HEALTHY AGING

25 To provide public health services that reduce risks and
 26 invest in promoting and protecting good health over the
 27 course of a lifetime with a priority given to older Iowans and
 28 vulnerable populations:

29 \$ ~~3,648,571~~
 30 7,297,142

31 6. INFECTIOUS DISEASES

32 For reducing the incidence and prevalence of communicable
 33 diseases, and for not more than the following full-time
 34 equivalent positions:

35 \$ ~~667,577~~

1		<u>1,335,155</u>
2	..... FTEs	4.00
3	7. PUBLIC PROTECTION	
4	For protecting the health and safety of the public through	
5	establishing standards and enforcing regulations, and for not	
6	more than the following full-time equivalent positions:	
7	..... \$	2,169,595
8		<u>4,399,191</u>
9	..... FTEs	136.00
10		<u>137.00</u>

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

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

24 c. Of the funds appropriated in this subsection, ~~\$299,375~~
25 \$598,751 shall be used for the state poison control center.
26 Pursuant to the directive under 2014 Iowa Acts, chapter
27 1140, section 102, the federal matching funds available to
28 the state poison control center from the department of human
29 services under the federal Children's Health Insurance Program
30 Reauthorization Act allotment shall be subject to the federal
31 administrative cap rule of 10 percent applicable to funding
32 provided under Tit. XXI of the federal Social Security Act and
33 included within the department's calculations of the cap.

34 d. Of the funds appropriated in this subsection, ~~\$268,875~~
35 \$537,750 shall be used for childhood lead poisoning provisions.

1 8. RESOURCE MANAGEMENT

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

5	\$	427,536
6		<u>1,005,072</u>
7	FTEs	4.00

8 9. MISCELLANEOUS PROVISIONS

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

14 b. Unless otherwise already required under this section of
15 this Act, any entity to which appropriated funds are allocated
16 or distributed under this section shall submit a progress
17 report to the department of public health by December 15,
18 2016, which includes the objectives and results, to date,
19 for the program year and how the funds are assisting the
20 program in meeting the objectives, the target population
21 served and the type of services provided, and the continuing
22 needs of the recipient entity and the service population. The
23 department shall review the information reported and shall make
24 recommendations to the governor and the general assembly to
25 realign, bundle, or otherwise redistribute funding to meet the
26 needs identified and improve services during the subsequent
27 fiscal year.

28 c. The department of public health shall submit a report
29 to the individuals identified in this Act for submission
30 of reports by December 15, 2016, regarding a proposal for
31 realigning, bundling, redistributing, or otherwise adjusting
32 the department's funding streams to reflect the department's
33 priorities and goals and to provide increased flexibility in
34 the distribution of funding to meet these priorities and goals.
35 The proposal shall specifically include recommendations for a

1 broader, more systematic and strategic workforce initiative
2 which may include a comprehensive study of workforce program
3 needs and the establishment of an advisory workgroup. The
4 proposal shall also specifically include strategies, developed
5 in collaboration with the department of education, to encourage
6 elementary and secondary education students to pursue careers
7 in the fields of health and health care.

8 DIVISION IV

9 DEPARTMENT OF VETERANS AFFAIRS — FY 2016-2017

10 Sec. 4. 2015 Iowa Acts, chapter 137, section 124, is amended
11 to read as follows:

12 SEC. 124. DEPARTMENT OF VETERANS AFFAIRS. There is
13 appropriated from the general fund of the state to the
14 department of veterans affairs for the fiscal year beginning
15 July 1, 2016, and ending June 30, 2017, the following amounts,
16 or so much thereof as is necessary, to be used for the purposes
17 designated:

18 1. DEPARTMENT OF VETERANS AFFAIRS ADMINISTRATION

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

22	\$	600,273
23		<u>1,200,546</u>
24	FTEs	15.00

25 2. IOWA VETERANS HOME

26 For salaries, support, maintenance, and miscellaneous
27 purposes:

28	\$	3,797,498
29		<u>7,594,996</u>

30 a. The Iowa veterans home billings involving the department
31 of human services shall be submitted to the department on at
32 least a monthly basis.

33 c. Within available resources and in conformance with
34 associated state and federal program eligibility requirements,
35 the Iowa veterans home may implement measures to provide

1 financial assistance to or on behalf of veterans or their
2 spouses who are participating in the community reentry program.

3 3. HOME OWNERSHIP ASSISTANCE PROGRAM

4 For transfer to the Iowa finance authority for the
5 continuation of the home ownership assistance program for
6 persons who are or were eligible members of the armed forces of
7 the United States, pursuant to [section 16.54](#):

8 \$ ~~1,250,000~~
9 2,500,000

10 Sec. 5. 2015 Iowa Acts, chapter 137, section 125, is amended
11 to read as follows:

12 SEC. 125. LIMITATION OF COUNTY COMMISSIONS OF VETERAN
13 AFFAIRS FUND STANDING APPROPRIATIONS. Notwithstanding the
14 standing appropriation in [section 35A.16](#) for the fiscal year
15 beginning July 1, 2016, and ending June 30, 2017, the amount
16 appropriated from the general fund of the state pursuant to
17 that section for the following designated purposes shall not
18 exceed the following amount:

19 For the county commissions of veteran affairs fund under
20 section 35A.16:

21 \$ ~~495,000~~
22 990,000

23 DIVISION V

24 DEPARTMENT OF HUMAN SERVICES — FY 2016-2017

25 Sec. 6. 2015 Iowa Acts, chapter 137, section 126, is amended
26 to read as follows:

27 SEC. 126. TEMPORARY ASSISTANCE FOR NEEDY FAMILIES BLOCK
28 GRANT. There is appropriated from the fund created in section
29 8.41 to the department of human services for the fiscal year
30 beginning July 1, 2016, and ending June 30, 2017, from moneys
31 received under the federal temporary assistance for needy
32 families (TANF) block grant pursuant to the federal Personal
33 Responsibility and Work Opportunity Reconciliation Act of 1996,
34 Pub. L. No. 104-193, and successor legislation, the following
35 amounts, or so much thereof as is necessary, to be used for the

1 purposes designated:

2 1. To be credited to the family investment program account
3 and used for assistance under the family investment program
4 under [chapter 239B](#):

5 \$ ~~2,568,497~~
6 5,112,462

7 2. To be credited to the family investment program account
8 and used for the job opportunities and basic skills (JOBS)
9 program and implementing family investment agreements in
10 accordance with [chapter 239B](#):

11 \$ ~~5,069,089~~
12 5,575,693

13 3. To be used for the family development and
14 self-sufficiency grant program in accordance with section
15 216A.107:

16 \$ ~~1,449,490~~
17 2,898,980

18 Notwithstanding [section 8.33](#), moneys appropriated in this
19 subsection that remain unencumbered or unobligated at the close
20 of the fiscal year shall not revert but shall remain available
21 for expenditure for the purposes designated until the close of
22 the succeeding fiscal year. However, unless such moneys are
23 encumbered or obligated on or before September 30, 2016, the
24 moneys shall revert.

25 4. For field operations:

26 \$ ~~15,648,116~~
27 35,774,330

28 5. For general administration:

29 \$ ~~1,872,000~~
30 3,744,000

31 6. For state child care assistance:

32 \$ ~~17,523,555~~
33 46,866,826

34 a. Of the funds appropriated in this subsection,
35 ~~\$13,164,048~~ \$26,328,097 is transferred to the child care and

1 development block grant appropriation made by the Eighty-sixth
2 General Assembly, 2016 Session, for the federal fiscal year
3 beginning October 1, 2016, and ending September 30, 2017. Of
4 this amount, ~~\$100,000~~ \$200,000 shall be used for provision
5 of educational opportunities to registered child care home
6 providers in order to improve services and programs offered
7 by this category of providers and to increase the number of
8 providers. The department may contract with institutions
9 of higher education or child care resource and referral
10 centers to provide the educational opportunities. Allowable
11 administrative costs under the contracts shall not exceed 5
12 percent. The application for a grant shall not exceed two
13 pages in length.

14 b. Any funds appropriated in this subsection remaining
15 unallocated shall be used for state child care assistance
16 payments for families who are employed including but not
17 limited to individuals enrolled in the family investment
18 program.

19 ~~7. For distribution to counties and regions through the~~
20 ~~property tax relief fund for mental health and disability~~
21 ~~services as provided in an appropriation made for this purpose:~~
22 \$ ~~2,447,026~~

23 8. For child and family services:
24 \$ 16,042,215
25 36,256,581

26 9. For child abuse prevention grants:
27 \$ 62,500
28 125,000

29 10. For pregnancy prevention grants on the condition that
30 family planning services are funded:
31 \$ 965,033
32 1,930,067

33 Pregnancy prevention grants shall be awarded to programs
34 in existence on or before July 1, 2016, if the programs have
35 demonstrated positive outcomes. Grants shall be awarded to

1 pregnancy prevention programs which are developed after July
2 1, 2016, if the programs are based on existing models that
3 have demonstrated positive outcomes. Grants shall comply with
4 the requirements provided in 1997 Iowa Acts, chapter 208,
5 section 14, subsections 1 and 2, including the requirement that
6 grant programs must emphasize sexual abstinence. Priority in
7 the awarding of grants shall be given to programs that serve
8 areas of the state which demonstrate the highest percentage of
9 unplanned pregnancies of females of childbearing age within the
10 geographic area to be served by the grant.

11 11. For technology needs and other resources necessary
12 to meet federal welfare reform reporting, tracking, and case
13 management requirements:

14 \$ 518,593
15 1,037,186

16 12. For the family investment program share of the costs to
17 continue to develop and maintain a new, integrated eligibility
18 determination system:

19 \$ 3,327,440
20 6,654,880

21 13. a. Notwithstanding any provision to the contrary,
22 including but not limited to requirements in [section 8.41](#) or
23 provisions in 2015 or 2016 Iowa Acts regarding the receipt and
24 appropriation of federal block grants, federal funds from the
25 temporary assistance for needy families block grant received by
26 the state and not otherwise appropriated in this section and
27 remaining available for the fiscal year beginning July 1, 2016,
28 are appropriated to the department of human services to the
29 extent as may be necessary to be used in the following priority
30 order: the family investment program, for state child care
31 assistance program payments for families who are employed, and
32 for the family investment program share of costs to develop and
33 maintain a new, integrated eligibility determination system.
34 The federal funds appropriated in this paragraph "a" shall be
35 expended only after all other funds appropriated in subsection

1 1 for the assistance under the family investment program,
2 in subsection 6 for child care assistance, or in subsection
3 12 for the family investment program share of the costs to
4 continue to develop and maintain a new, integrated eligibility
5 determination system, as applicable, have been expended. For
6 the purposes of this subsection, the funds appropriated in
7 subsection 6, paragraph "a", for transfer to the child care
8 and development block grant appropriation are considered fully
9 expended when the full amount has been transferred.

10 b. The department shall, on a quarterly basis, advise the
11 legislative services agency and department of management of
12 the amount of funds appropriated in this subsection that was
13 expended in the prior quarter.

14 14. Of the amounts appropriated in this section, ~~\$6,481,004~~
15 \$12,962,008 for the fiscal year beginning July 1, 2016, is
16 transferred to the appropriation of the federal social services
17 block grant made to the department of human services for that
18 fiscal year.

19 15. For continuation of the program providing categorical
20 eligibility for the food assistance program as specified for
21 the program in the section of this division of this 2016 Act
22 relating to the family investment program account:

23	\$	12,500
24		<u>25,000</u>

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

33 Sec. 7. 2015 Iowa Acts, chapter 137, section 127, is amended
34 to read as follows:

35 SEC. 127. FAMILY INVESTMENT PROGRAM ACCOUNT.

1 1. Moneys credited to the family investment program (FIP)
2 account for the fiscal year beginning July 1, 2016, and
3 ending June 30, 2017, shall be used to provide assistance in
4 accordance with [chapter 239B](#).

5 2. The department may use a portion of the moneys credited
6 to the FIP account under this section as necessary for
7 salaries, support, maintenance, and miscellaneous purposes.

8 3. The department may transfer funds allocated in
9 subsection 4 to the appropriations made in this division of
10 this Act for the same fiscal year for general administration
11 and field operations for resources necessary to implement and
12 operate the family investment program services referred to in
13 this section and those funded in the appropriation made in this
14 division of this Act for the same fiscal year for the family
15 investment program from the general fund of the state.

16 4. Moneys appropriated in this division of this Act and
17 credited to the FIP account for the fiscal year beginning July
18 1, 2016, and ending June 30, 2017, are allocated as follows:

19 a. To be retained by the department of human services to	
20 be used for coordinating with the department of human rights	
21 to more effectively serve participants in FIP and other shared	
22 clients and to meet federal reporting requirements under the	
23 federal temporary assistance for needy families block grant:	
24	\$ 10,000
25	<u>20,000</u>

26 b. To the department of human rights for staffing,
27 administration, and implementation of the family development
28 and self-sufficiency grant program in accordance with section
29 216A.107:

30	\$ 3,096,417
31	<u>6,192,834</u>

32 (1) Of the funds allocated for the family development
33 and self-sufficiency grant program in this paragraph "b",
34 not more than 5 percent of the funds shall be used for the
35 administration of the grant program.

1 (2) The department of human rights may continue to implement
2 the family development and self-sufficiency grant program
3 statewide during fiscal year 2016-2017.

4 (3) The department of human rights may engage in activities
5 to strengthen and improve family outcomes measures and
6 data collection systems under the family development and
7 self-sufficiency grant program.

8 c. For the diversion subaccount of the FIP account:
9 \$ 407,500
10 815,000

11 A portion of the moneys allocated for the subaccount may
12 be used for field operations, salaries, data management
13 system development, and implementation costs and support
14 deemed necessary by the director of human services in order
15 to administer the FIP diversion program. To the extent
16 moneys allocated in this paragraph "c" are not deemed by the
17 department to be necessary to support diversion activities,
18 such moneys may be used for other efforts intended to increase
19 engagement by family investment program participants in work,
20 education, or training activities.

21 d. For the food assistance employment and training program:
22 \$ 33,294
23 66,588

24 (1) The department shall apply the federal supplemental
25 nutrition assistance program (SNAP) employment and training
26 state plan in order to maximize to the fullest extent permitted
27 by federal law the use of the 50 percent federal reimbursement
28 provisions for the claiming of allowable federal reimbursement
29 funds from the United States department of agriculture
30 pursuant to the federal SNAP employment and training program
31 for providing education, employment, and training services
32 for eligible food assistance program participants, including
33 but not limited to related dependent care and transportation
34 expenses.

35 (2) The department shall continue the categorical federal

1 food assistance program eligibility at 160 percent of the
2 federal poverty level and continue to eliminate the asset test
3 from eligibility requirements, consistent with federal food
4 assistance program requirements. The department shall include
5 as many food assistance households as is allowed by federal
6 law. The eligibility provisions shall conform to all federal
7 requirements including requirements addressing individuals who
8 are incarcerated or otherwise ineligible.

9 e. For the JOBS program:

10 \$ ~~8,770,199~~
11 16,129,101

12 5. Of the child support collections assigned under FIP,
13 an amount equal to the federal share of support collections
14 shall be credited to the child support recovery appropriation
15 made in this division of this Act. Of the remainder of the
16 assigned child support collections received by the child
17 support recovery unit, a portion shall be credited to the FIP
18 account, a portion may be used to increase recoveries, and a
19 portion may be used to sustain cash flow in the child support
20 payments account. If as a consequence of the appropriations
21 and allocations made in this section the resulting amounts
22 are insufficient to sustain cash assistance payments and meet
23 federal maintenance of effort requirements, the department
24 shall seek supplemental funding. If child support collections
25 assigned under FIP are greater than estimated or are otherwise
26 determined not to be required for maintenance of effort, the
27 state share of either amount may be transferred to or retained
28 in the child support payments account.

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

32 Sec. 8. 2015 Iowa Acts, chapter 137, section 128, is amended
33 to read as follows:

34 SEC. 128. FAMILY INVESTMENT PROGRAM GENERAL FUND. There
35 is appropriated from the general fund of the state to the

1 department of human services for the fiscal year beginning July
2 1, 2016, and ending June 30, 2017, the following amount, or
3 so much thereof as is necessary, to be used for the purpose
4 designated:

5 To be credited to the family investment program (FIP)
6 account and used for family investment program assistance under
7 chapter 239B:

8 \$ ~~24,336,937~~
9 48,673,875

10 1. Of the funds appropriated in this section, ~~\$3,701,110~~
11 \$10,553,408 is allocated for the JOBS program.

12 2. Of the funds appropriated in this section, ~~\$1,656,927~~
13 \$3,313,854 is allocated for the family development and
14 self-sufficiency grant program.

15 3. Notwithstanding [section 8.39](#), for the fiscal year
16 beginning July 1, 2016, if necessary to meet federal
17 maintenance of effort requirements; or to transfer federal
18 temporary assistance for needy families block grant funding
19 to be used for purposes of the federal social services block
20 grant; or to meet cash flow needs resulting from delays in
21 receiving federal funding; or to implement, in accordance
22 with this division of this Act, activities currently funded
23 with juvenile court services, county, or community moneys
24 and state moneys used in combination with such moneys; to
25 comply with federal requirements; or to maximize the use of
26 federal funds, the department of human services may transfer
27 funds within or between any of the appropriations made in
28 this division of this Act and appropriations in law for the
29 federal social services block grant to the department for the
30 following purposes, provided that the combined amount of state
31 and federal temporary assistance for needy families block grant
32 funding for each appropriation remains the same before and
33 after the transfer:

- 34 a. For the family investment program.
- 35 b. For child care assistance.

1 c. For child and family services.

2 d. For field operations.

3 e. For general administration.

4 ~~f. For distribution to counties or regions through the~~
5 ~~property tax relief fund for mental health and disability~~
6 ~~services as provided in an appropriation for this purpose.~~

7 This subsection shall not be construed to prohibit the use
8 of existing state transfer authority for other purposes. The
9 department shall report any transfers made pursuant to this
10 subsection to the legislative services agency.

11 4. Of the funds appropriated in this section, ~~\$97,839~~
12 \$195,678 shall be used for continuation of a grant to an
13 Iowa-based nonprofit organization with a history of providing
14 tax preparation assistance to low-income Iowans in order to
15 expand the usage of the earned income tax credit. The purpose
16 of the grant is to supply this assistance to underserved areas
17 of the state.

18 5. Of the funds appropriated in this section, ~~\$30,000~~
19 \$60,000 shall be used for the continuation of an unfunded
20 pilot project, as defined in 441 IAC 100.1, relating to
21 parental obligations, in which the child support recovery
22 unit participates, to support the efforts of a nonprofit
23 organization committed to strengthening the community through
24 youth development, healthy living, and social responsibility
25 headquartered in a county with a population over 350,000.
26 The funds allocated in this subsection shall be used by
27 the recipient organization to develop a larger community
28 effort, through public and private partnerships, to support a
29 broad-based multi-county fatherhood initiative that promotes
30 payment of child support obligations, improved family
31 relationships, and full-time employment.

32 6. The department may transfer funds appropriated in this
33 section to the appropriations made in this division of this Act
34 for general administration and field operations as necessary
35 to administer this section and the overall family investment

1 program.

2 Sec. 9. 2015 Iowa Acts, chapter 137, section 129, is amended
3 to read as follows:

4 SEC. 129. CHILD SUPPORT RECOVERY. There is appropriated
5 from the general fund of the state to the department of human
6 services for the fiscal year beginning July 1, 2016, and ending
7 June 30, 2017, the following amount, or so much thereof as is
8 necessary, to be used for the purposes designated:

9 For child support recovery, including salaries, support,
10 maintenance, and miscellaneous purposes, and for not more than
11 the following full-time equivalent positions:

12	\$	7,331,686
13		<u>14,663,373</u>
14	FTEs	464.00

15 1. The department shall expend up to ~~\$12,164~~ \$24,329,
16 including federal financial participation, for the fiscal year
17 beginning July 1, 2016, for a child support public awareness
18 campaign. The department and the office of the attorney
19 general shall cooperate in continuation of the campaign. The
20 public awareness campaign shall emphasize, through a variety
21 of media activities, the importance of maximum involvement of
22 both parents in the lives of their children as well as the
23 importance of payment of child support obligations.

24 2. Federal access and visitation grant moneys shall be
25 issued directly to private not-for-profit agencies that provide
26 services designed to increase compliance with the child access
27 provisions of court orders, including but not limited to
28 neutral visitation sites and mediation services.

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

35 4. With the exception of the funding amount specified, the

1 requirements established under 2001 Iowa Acts, chapter 191,
2 section 3, subsection 5, paragraph "c", subparagraph (3), shall
3 be applicable to parental obligation pilot projects for the
4 fiscal year beginning July 1, 2016, and ending June 30, 2017.
5 Notwithstanding 441 IAC 100.8, providing for termination of
6 rules relating to the pilot projects, the rules shall remain
7 in effect until June 30, 2017.

8 Sec. 10. 2015 Iowa Acts, chapter 137, section 132, is
9 amended to read as follows:

10 SEC. 132. MEDICAL ASSISTANCE. There is appropriated from
11 the general fund of the state to the department of human
12 services for the fiscal year beginning July 1, 2016, and ending
13 June 30, 2017, the following amount, or so much thereof as is
14 necessary, to be used for the purpose designated:

15 For medical assistance program reimbursement and associated
16 costs as specifically provided in the reimbursement
17 methodologies in effect on June 30, 2016, except as otherwise
18 expressly authorized by law, consistent with options under
19 federal law and regulations, and contingent upon receipt of
20 approval from the office of the governor of reimbursement for
21 each abortion performed under the program:

22 \$651,595,782
23 1,315,246,446

24 1. Iowans support reducing the number of abortions
25 performed in our state. Funds appropriated under this section
26 shall not be used for abortions, unless otherwise authorized
27 under this section.

28 2. The provisions of this section relating to abortions
29 shall also apply to the Iowa health and wellness plan created
30 pursuant to [chapter 249N](#).

31 3. The department shall utilize not more than ~~\$30,000~~
32 \$60,000 of the funds appropriated in this section to continue
33 the AIDS/HIV health insurance premium payment program as
34 established in 1992 Iowa Acts, Second Extraordinary Session,
35 chapter 1001, section 409, subsection 6. Of the funds

1 allocated in this subsection, not more than ~~\$2,500~~ \$5,000 may
2 be expended for administrative purposes.

3 4. Of the funds appropriated in this Act to the department
4 of public health for addictive disorders, ~~\$475,000~~ \$950,000
5 for the fiscal year beginning July 1, 2016, is transferred
6 to the department of human services for an integrated
7 substance-related disorder managed care system. The department
8 shall not assume management of the substance-related disorder
9 system in place of the managed care contractor unless such
10 a change in approach is specifically authorized in law.
11 The departments of human services and public health shall
12 work together to maintain the level of mental health and
13 substance-related disorder treatment services provided by the
14 managed care ~~contractor through the Iowa plan for behavioral~~
15 health contractors. Each department shall take the steps
16 necessary to continue the federal waivers as necessary to
17 maintain the level of services.

18 5. a. The department shall aggressively pursue options for
19 providing medical assistance or other assistance to individuals
20 with special needs who become ineligible to continue receiving
21 services under the early and periodic screening, diagnostic,
22 and treatment program under the medical assistance program
23 due to becoming 21 years of age who have been approved for
24 additional assistance through the department's exception to
25 policy provisions, but who have health care needs in excess
26 of the funding available through the exception to policy
27 provisions.

28 b. Of the funds appropriated in this section, ~~\$50,000~~
29 \$100,000 shall be used for participation in one or more
30 pilot projects operated by a private provider to allow the
31 individual or individuals to receive service in the community
32 in accordance with principles established in *Olmstead v.*
33 *L.C.*, 527 U.S. 581 (1999), for the purpose of providing
34 medical assistance or other assistance to individuals with
35 special needs who become ineligible to continue receiving

1 services under the early and periodic screening, diagnostic,
2 and treatment program under the medical assistance program
3 due to becoming 21 years of age who have been approved for
4 additional assistance through the department's exception to
5 policy provisions, but who have health care needs in excess
6 of the funding available through the exception to the policy
7 provisions.

8 6. Of the funds appropriated in this section, up to
9 ~~\$1,525,041~~ \$3,050,082 may be transferred to the field
10 operations or general administration appropriations in this
11 division of this Act for operational costs associated with Part
12 D of the federal Medicare Prescription Drug Improvement and
13 Modernization Act of 2003, Pub. L. No. 108-173.

14 7. Of the funds appropriated in this section, up to
15 ~~\$221,050~~ \$442,100 may be transferred to the appropriation in
16 this division of this Act for medical contracts to be used
17 for clinical assessment services and prior authorization of
18 services.

19 8. A portion of the funds appropriated in this section
20 may be transferred to the appropriations in this division of
21 this Act for general administration, medical contracts, the
22 children's health insurance program, or field operations to be
23 used for the state match cost to comply with the payment error
24 rate measurement (PERM) program for both the medical assistance
25 and children's health insurance programs as developed by the
26 centers for Medicare and Medicaid services of the United States
27 department of health and human services to comply with the
28 federal Improper Payments Information Act of 2002, Pub. L. No.
29 107-300.

30 9. The department shall continue to implement the
31 recommendations of the assuring better child health and
32 development initiative II (ABCDII) clinical panel to the
33 Iowa early and periodic screening, diagnostic, and treatment
34 services healthy mental development collaborative board
35 regarding changes to billing procedures, codes, and eligible

1 service providers.

2 10. Of the funds appropriated in this section, a sufficient
3 amount is allocated to supplement the incomes of residents of
4 nursing facilities, intermediate care facilities for persons
5 with mental illness, and intermediate care facilities for
6 persons with an intellectual disability, with incomes of less
7 than \$50 in the amount necessary for the residents to receive a
8 personal needs allowance of \$50 per month pursuant to section
9 249A.30A.

10 ~~11. Of the funds appropriated in this section, the following~~
11 ~~amounts are transferred to the appropriations made in this~~
12 ~~division of this Act for the state mental health institutes:~~

- 13 a. ~~Cherokee mental health institute \$ 4,549,212~~
14 b. ~~Independence mental health institute \$ 4,522,947~~

15 12. a. ~~Of the funds appropriated in this section,~~
16 ~~\$2,041,939 is allocated for the state match for a~~
17 ~~disproportionate share hospital payment of \$4,544,712 to~~
18 The hospitals that meet both of the conditions specified
19 in subparagraphs (1) and (2). ~~In addition, the hospitals~~
20 ~~that meet the conditions specified shall either certify~~
21 ~~public expenditures or transfer to the medical assistance~~
22 ~~program an amount equal to provide the nonfederal share~~
23 ~~for a disproportionate share hospital payment of \$8,772,003~~
24 \$26,633,430. The hospitals that meet the conditions
25 specified shall receive and retain 100 percent of the total
26 disproportionate share hospital payment of ~~\$13,316,715~~
27 \$26,633,430.

28 (1) The hospital qualifies for disproportionate share and
29 graduate medical education payments.

30 (2) The hospital is an Iowa state-owned hospital with more
31 than 500 beds and eight or more distinct residency specialty
32 or subspecialty programs recognized by the American college of
33 graduate medical education.

34 b. Distribution of the disproportionate share payments
35 shall be made on a monthly basis. The total amount of

1 disproportionate share payments including graduate medical
2 education, enhanced disproportionate share, and Iowa
3 state-owned teaching hospital payments shall not exceed the
4 amount of the state's allotment under Pub. L. No. 102-234.
5 In addition, the total amount of all disproportionate
6 share payments shall not exceed the hospital-specific
7 disproportionate share limits under Pub. L. No. 103-66.

8 c. The university of Iowa hospitals and clinics shall either
9 certify public expenditures or transfer to the appropriations
10 made in this division of this Act for medical assistance an
11 amount equal to provide the nonfederal share for increased
12 medical assistance payments for inpatient and outpatient
13 hospital services of ~~\$4,950,000~~ \$9,900,000. The university of
14 Iowa hospitals and clinics shall receive and retain 100 percent
15 of the total increase in medical assistance payments.

16 d. Payment methodologies utilized for disproportionate
17 share hospitals and graduate medical education, and other
18 supplemental payments under the Medicaid program may be
19 adjusted or converted to other methodologies or payment types
20 to provide these payments ~~through Medicaid managed care~~ after
21 April 1, 2016. The department of human services shall obtain
22 approval from the centers for Medicare and Medicaid services
23 of the United States department of health and human services
24 prior to implementation of any such adjusted or converted
25 methodologies or payment types.

26 13. One hundred percent of the nonfederal share of payments
27 to area education agencies that are medical assistance
28 providers for medical assistance-covered services provided to
29 medical assistance-covered children, shall be made from the
30 appropriation made in this section.

31 14. Any new or renewed contract entered into by the
32 department with a third party to administer services under the
33 medical assistance program shall provide that any interest
34 earned on payments from the state during the state fiscal year
35 shall be remitted to the department and treated as recoveries

1 to offset the costs of the medical assistance program.

2 15. A portion of the funds appropriated in this section
3 may be transferred to the appropriation in this division of
4 this Act for medical contracts to be used for administrative
5 activities associated with the money follows the person
6 demonstration project.

7 16. Of the funds appropriated in this section, ~~\$174,505~~
8 \$349,011 shall be used for the administration of the health
9 insurance premium payment program, including salaries, support,
10 maintenance, and miscellaneous purposes.

11 17. a. The department may increase the amounts allocated
12 for salaries, support, maintenance, and miscellaneous purposes
13 associated with the medical assistance program, as necessary,
14 to implement cost containment strategies. The department shall
15 report any such increase to the legislative services agency and
16 the department of management.

17 b. If the savings to the medical assistance program from
18 cost containment efforts exceed the cost for the fiscal
19 year beginning July 1, 2016, the department may transfer any
20 savings generated for the fiscal year due to medical assistance
21 program cost containment efforts to the appropriation
22 made in this division of this Act for medical contracts or
23 general administration to defray the increased contract costs
24 associated with implementing such efforts.

25 18. For the fiscal year beginning July 1, 2016, and ending
26 June 30, 2017, the replacement generation tax revenues required
27 to be deposited in the property tax relief fund pursuant to
28 section 437A.8, subsection 4, paragraph "d", and section
29 437A.15, subsection 3, paragraph "f", shall instead be credited
30 to and supplement the appropriation made in this section and
31 used for the allocations made in this section.

32 ~~19. The department shall continue to administer the state~~
33 ~~balancing incentive payments program as specified in 2012 Iowa~~
34 ~~Acts, chapter 1133, section 14.~~

35 20. a. Of the funds appropriated in this section, up

1 to ~~\$25,000~~ \$50,000 may be transferred by the department to
2 the appropriation made in this division of this Act to the
3 department for the same fiscal year for general administration
4 to be used for associated administrative expenses and for not
5 more than one full-time equivalent position, in addition to
6 those authorized for the same fiscal year, to be assigned to
7 implementing the children's mental health home project.

8 b. Of the funds appropriated in this section, up to
9 ~~\$200,000~~ \$400,000 may be transferred by the department to
10 the appropriation made to the department in this division of
11 this Act for the same fiscal year for Medicaid program-related
12 general administration planning and implementation activities.
13 The funds may be used for contracts or for personnel in
14 addition to the amounts appropriated for and the positions
15 authorized for general administration for the fiscal year.

16 c. Of the funds appropriated in this section, up to
17 ~~\$1,500,000~~ \$3,000,000 may be transferred by the department
18 to the appropriations made in this division of this Act
19 for the same fiscal year for general administration or
20 medical contracts to be used to support the development
21 and implementation of standardized assessment tools for
22 persons with mental illness, an intellectual disability, a
23 developmental disability, or a brain injury.

24 21. Of the funds appropriated in this section, ~~\$125,000~~
25 \$250,000 shall be used for lodging expenses associated with
26 care provided at the university of Iowa hospitals and clinics
27 for patients with cancer whose travel distance is 30 miles or
28 more and whose income is at or below 200 percent of the federal
29 poverty level as defined by the most recently revised poverty
30 income guidelines published by the United States department of
31 health and human services. The department of human services
32 shall establish the maximum number of overnight stays and the
33 maximum rate reimbursed for overnight lodging, which may be
34 based on the state employee rate established by the department
35 of administrative services. The funds allocated in this

1 subsection shall not be used as nonfederal share matching
2 funds.

3 22. The department of human services shall not implement
4 the following cost containment strategies as recommended by the
5 governor for the fiscal year beginning July 1, 2016:

6 a. A policy to ensure that reimbursement for Medicare Part A
7 and Medicare Part B crossover claims is limited to the Medicaid
8 reimbursement rate.

9 b. An adjustment to the reimbursement policy in order to end
10 the primary care physician rate increase originally authorized
11 by the federal Health Care and Education Reconciliation
12 Act of 2010, section 1202, Pub. L. No. 111-152, 42 U.S.C.
13 §1396a(a)(13)(C) that allows qualified primary care physicians
14 to receive the greater of the Medicare rate or Medicaid rate
15 for a specified set of codes.

16 23. The department shall report the implementation of
17 any cost containment strategies to the individuals specified
18 in this division of this Act for submission of reports upon
19 implementation.

20 24. The department shall report the implementation of any
21 improved processing changes and any related cost reductions
22 to the individuals specified in this division of this Act for
23 submission of reports upon implementation.

24 25. Of the funds appropriated in this section, \$3,000,000
25 shall be used to implement reductions in the waiting lists
26 of all medical assistance home and community-based services
27 waivers.

28 26. The department shall submit a report to the individuals
29 identified in this Act for submission of reports, regarding
30 changes in home and community-based services waiver supported
31 employment and prevocational services by December 15, 2016.

32 27. The department shall require that all dental benefit
33 managers contracting with the department to provide benefits
34 under the dental wellness program meet contract requirements
35 including but not limited to those related to network adequacy,

1 access to services, performance measures, and benefit design,
2 identical to those requirements for dental benefit managers
3 contracting under the program during the fiscal year beginning
4 July 1, 2015.

5 Sec. 11. 2015 Iowa Acts, chapter 137, section 133, is
6 amended to read as follows:

7 SEC. 133. MEDICAL CONTRACTS. There is appropriated from the
8 general fund of the state to the department of human services
9 for the fiscal year beginning July 1, 2016, and ending June 30,
10 2017, the following amount, or so much thereof as is necessary,
11 to be used for the purpose designated:

12 For medical contracts:

13 \$ ~~9,806,982~~
14 17,045,964

15 1. The department of inspections and appeals shall
16 provide all state matching funds for survey and certification
17 activities performed by the department of inspections
18 and appeals. The department of human services is solely
19 responsible for distributing the federal matching funds for
20 such activities.

21 2. Of the funds appropriated in this section, ~~\$25,000~~
22 \$50,000 shall be used for continuation of home and
23 community-based services waiver quality assurance programs,
24 including the review and streamlining of processes and policies
25 related to oversight and quality management to meet state and
26 federal requirements.

27 3. Of the amount appropriated in this section, up to
28 ~~\$100,000~~ \$200,000 may be transferred to the appropriation
29 for general administration in this division of this Act to
30 be used for additional full-time equivalent positions in the
31 development of key health initiatives such as cost containment,
32 development and oversight of managed care programs, and
33 development of health strategies targeted toward improved
34 quality and reduced costs in the Medicaid program.

35 4. Of the funds appropriated in this section, ~~\$500,000~~

1 \$1,000,000 shall be used for planning and development,
2 in cooperation with the department of public health, of a
3 phased-in program to provide a dental home for children.

4 5. Of the funds appropriated in this section, ~~\$1,000,000~~
5 \$2,000,000 shall be used for the autism support program created
6 in [chapter 225D](#), with the exception of the following amounts of
7 this allocation which shall be used as follows:

8 a. Of the funds allocated in this subsection, ~~\$125,000~~
9 \$250,000 shall be deposited in the board-certified behavior
10 analyst and board-certified assistant behavior analyst grants
11 program fund created in [section 135.181](#), ~~as enacted in this~~
12 ~~Act~~, to be used for the purposes of the fund.

13 b. Of the funds allocated in this subsection, ~~\$12,500~~
14 \$25,000 shall be used for the public purpose of continuation
15 of a grant to a child welfare services provider headquartered
16 in a county with a population between 205,000 and 215,000 in
17 the latest certified federal census that provides multiple
18 services including but not limited to a psychiatric medical
19 institution for children, shelter, residential treatment, after
20 school programs, school-based programming, and an Asperger's
21 syndrome program, to be used for support services for children
22 with autism spectrum disorder and their families.

23 c. Of the funds allocated in this subsection, ~~\$12,500~~
24 \$25,000 shall be used for the public purpose of continuing a
25 grant to a hospital-based provider headquartered in a county
26 with a population between 90,000 and 95,000 in the latest
27 certified federal census that provides multiple services
28 including but not limited to diagnostic, therapeutic, and
29 behavioral services to individuals with autism spectrum
30 disorder across one's lifespan. The grant recipient shall
31 utilize the funds to continue the pilot project to determine
32 the necessary support services for children with autism
33 spectrum disorder and their families to be included in the
34 children's disabilities services system. The grant recipient
35 shall submit findings and recommendations based upon the

1 results of the pilot project to the individuals specified in
2 this division of this Act for submission of reports by December
3 31, ~~2015~~ 2016.

4 Sec. 12. 2015 Iowa Acts, chapter 137, section 134, is
5 amended to read as follows:

6 SEC. 134. STATE SUPPLEMENTARY ASSISTANCE.

7 1. There is appropriated from the general fund of the
8 state to the department of human services for the fiscal year
9 beginning July 1, 2016, and ending June 30, 2017, the following
10 amount, or so much thereof as is necessary, to be used for the
11 purpose designated:

12 For the state supplementary assistance program:

13	\$ 6,498,593
14	<u>11,611,442</u>

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

22 3. If during the fiscal year beginning July 1, 2016,
23 the department projects that state supplementary assistance
24 expenditures for a calendar year will not meet the federal
25 pass-through requirement specified in Tit. XVI of the federal
26 Social Security Act, section 1618, as codified in 42 U.S.C.
27 §1382g, the department may take actions including but not
28 limited to increasing the personal needs allowance for
29 residential care facility residents and making programmatic
30 adjustments or upward adjustments of the residential care
31 facility or in-home health-related care reimbursement rates
32 prescribed in this division of this Act to ensure that federal
33 requirements are met. In addition, the department may make
34 other programmatic and rate adjustments necessary to remain
35 within the amount appropriated in this section while ensuring

1 compliance with federal requirements. The department may adopt
2 emergency rules to implement the provisions of this subsection.

3 Sec. 13. 2015 Iowa Acts, chapter 137, section 135, is
4 amended to read as follows:

5 SEC. 135. CHILDREN'S HEALTH INSURANCE PROGRAM.

6 1. There is appropriated from the general fund of the
7 state to the department of human services for the fiscal year
8 beginning July 1, 2016, and ending June 30, 2017, the following
9 amount, or so much thereof as is necessary, to be used for the
10 purpose designated:

11 For maintenance of the healthy and well kids in Iowa (hawk-i)
12 program pursuant to [chapter 514I](#), including supplemental dental
13 services, for receipt of federal financial participation under
14 Tit. XXI of the federal Social Security Act, which creates the
15 children's health insurance program:

16 \$ ~~10,206,922~~
17 9,176,652

18 2. Of the funds appropriated in this section, ~~\$21,400~~
19 \$42,800 is allocated for continuation of the contract for
20 outreach with the department of public health.

21 Sec. 14. 2015 Iowa Acts, chapter 137, section 136, is
22 amended to read as follows:

23 SEC. 136. CHILD CARE ASSISTANCE. There is appropriated
24 from the general fund of the state to the department of human
25 services for the fiscal year beginning July 1, 2016, and ending
26 June 30, 2017, the following amount, or so much thereof as is
27 necessary, to be used for the purpose designated:

28 For child care programs:

29 \$ ~~25,704,334~~
30 36,389,561

31 1. Of the funds appropriated in this section, ~~\$21,844,620~~
32 \$30,039,561 shall be used for state child care assistance in
33 accordance with [section 237A.13](#).

34 2. Nothing in this section shall be construed or is
35 intended as or shall imply a grant of entitlement for services

1 to persons who are eligible for assistance due to an income
2 level consistent with the waiting list requirements of section
3 237A.13. Any state obligation to provide services pursuant to
4 this section is limited to the extent of the funds appropriated
5 in this section.

6 ~~3. Of the funds appropriated in this section, \$216,226~~
7 ~~is allocated for the statewide grant program for child care~~
8 ~~resource and referral services under [section 237A.26](#).~~ A list
9 of the registered and licensed child care facilities operating
10 in the area served by a child care resource and referral
11 service shall be made available to the families receiving state
12 child care assistance in that area.

13 ~~4. Of the funds appropriated in this section, \$468,487~~
14 ~~is allocated for child care quality improvement initiatives~~
15 ~~including but not limited to the voluntary quality rating~~
16 ~~system in accordance with [section 237A.30](#).~~

17 5. Of the funds appropriated in this section, ~~\$3,175,000~~
18 \$6,350,000 shall be credited to the early childhood programs
19 grants account in the early childhood Iowa fund created
20 in [section 256I.11](#). The moneys shall be distributed for
21 funding of community-based early childhood programs targeted
22 to children from birth through five years of age developed
23 by early childhood Iowa areas in accordance with approved
24 community plans as provided in [section 256I.8](#).

25 6. The department may use any of the funds appropriated
26 in this section as a match to obtain federal funds for use in
27 expanding child care assistance and related programs. For
28 the purpose of expenditures of state and federal child care
29 funding, funds shall be considered obligated at the time
30 expenditures are projected or are allocated to the department's
31 service areas. Projections shall be based on current and
32 projected caseload growth, current and projected provider
33 rates, staffing requirements for eligibility determination
34 and management of program requirements including data systems
35 management, staffing requirements for administration of the

1 program, contractual and grant obligations and any transfers
2 to other state agencies, and obligations for decategorization
3 or innovation projects.

4 7. A portion of the state match for the federal child care
5 and development block grant shall be provided as necessary to
6 meet federal matching funds requirements through the state
7 general fund appropriation made for child development grants
8 and other programs for at-risk children in [section 279.51](#).

9 8. If a uniform reduction ordered by the governor under
10 section 8.31 or other operation of law, transfer, or federal
11 funding reduction reduces the appropriation made in this
12 section for the fiscal year, the percentage reduction in the
13 amount paid out to or on behalf of the families participating
14 in the state child care assistance program shall be equal to or
15 less than the percentage reduction made for any other purpose
16 payable from the appropriation made in this section and the
17 federal funding relating to it. The percentage reduction to
18 the other allocations made in this section shall be the same as
19 the uniform reduction ordered by the governor or the percentage
20 change of the federal funding reduction, as applicable.

21 If there is an unanticipated increase in federal funding
22 provided for state child care assistance, the entire amount
23 of the increase shall be used for state child care assistance
24 payments. If the appropriations made for purposes of the
25 state child care assistance program for the fiscal year are
26 determined to be insufficient, it is the intent of the general
27 assembly to appropriate sufficient funding for the fiscal year
28 in order to avoid establishment of waiting list requirements.

29 9. Notwithstanding [section 8.33](#), moneys advanced for
30 purposes of the programs developed by early childhood Iowa
31 areas, advanced for purposes of wraparound child care, or
32 received from the federal appropriations made for the purposes
33 of this section that remain unencumbered or unobligated at the
34 close of the fiscal year shall not revert to any fund but shall
35 remain available for expenditure for the purposes designated

1 until the close of the succeeding fiscal year.

2 Sec. 15. 2015 Iowa Acts, chapter 137, section 137, is
3 amended to read as follows:

4 SEC. 137. JUVENILE INSTITUTION. There is appropriated
5 from the general fund of the state to the department of human
6 services for the fiscal year beginning July 1, 2016, and ending
7 June 30, 2017, the following amounts, or so much thereof as is
8 necessary, to be used for the purposes designated:

9 1. For operation of the state training school at Eldora and
10 for salaries, support, maintenance, and miscellaneous purposes,
11 and for not more than the following full-time equivalent
12 positions:

13	\$	6,116,710
14		<u>12,233,420</u>
15	FTEs	169.30

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

22 2. A portion of the moneys appropriated in this section
23 shall be used by the state training school at Eldora for
24 grants for adolescent pregnancy prevention activities at the
25 institution in the fiscal year beginning July 1, 2016.

26 Sec. 16. 2015 Iowa Acts, chapter 137, section 138, is
27 amended to read as follows:

28 SEC. 138. CHILD AND FAMILY SERVICES.

29 1. There is appropriated from the general fund of the
30 state to the department of human services for the fiscal year
31 beginning July 1, 2016, and ending June 30, 2017, the following
32 amount, or so much thereof as is necessary, to be used for the
33 purpose designated:

34 For child and family services:

35	\$	42,670,969
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88,944,956

1
2 2. ~~Up to \$2,600,000 of~~ Of the amount of ~~federal temporary~~
3 ~~assistance for needy families block grant funding~~ appropriated
4 in this ~~division of this Act for child and family services~~
5 section, \$5,200,000 shall be ~~made available~~ used for purposes
6 of juvenile delinquent graduated sanction services.

7 3. The department may transfer funds appropriated in this
8 section as necessary to pay the nonfederal costs of services
9 reimbursed under the medical assistance program, state child
10 care assistance program, or the family investment program which
11 are provided to children who would otherwise receive services
12 paid under the appropriation in this section. The department
13 may transfer funds appropriated in this section to the
14 appropriations made in this division of this Act for general
15 administration and for field operations for resources necessary
16 to implement and operate the services funded in this section.

17 4. a. Of the funds appropriated in this section, up
18 to ~~\$17,910,893~~ \$35,736,649 is allocated as the statewide
19 expenditure target under [section 232.143](#) for group foster care
20 maintenance and services. If the department projects that such
21 expenditures for the fiscal year will be less than the target
22 amount allocated in this paragraph "a", the department may
23 reallocate the excess to provide additional funding for shelter
24 care or the child welfare emergency services addressed with the
25 allocation for shelter care.

26 b. If at any time after September 30, 2016, annualization
27 of a service area's current expenditures indicates a service
28 area is at risk of exceeding its group foster care expenditure
29 target under [section 232.143](#) by more than 5 percent, the
30 department and juvenile court services shall examine all
31 group foster care placements in that service area in order to
32 identify those which might be appropriate for termination.
33 In addition, any aftercare services believed to be needed
34 for the children whose placements may be terminated shall be
35 identified. The department and juvenile court services shall

1 initiate action to set dispositional review hearings for the
2 placements identified. In such a dispositional review hearing,
3 the juvenile court shall determine whether needed aftercare
4 services are available and whether termination of the placement
5 is in the best interest of the child and the community.

6 5. In accordance with the provisions of [section 232.188](#),
7 the department shall continue the child welfare and juvenile
8 justice funding initiative during fiscal year 2016-2017. Of
9 the funds appropriated in this section, ~~\$858,876~~ \$1,717,753
10 is allocated specifically for expenditure for fiscal year
11 2016-2017 through the decategorization services funding pools
12 and governance boards established pursuant to [section 232.188](#).

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

18 7. Notwithstanding [section 234.35](#) or any other provision
19 of law to the contrary, state funding for shelter care and
20 the child welfare emergency services contracting implemented
21 to provide for or prevent the need for shelter care shall be
22 limited to ~~\$4,034,237~~ \$8,096,158.

23 8. Federal funds received by the state during the fiscal
24 year beginning July 1, 2016, as the result of the expenditure
25 of state funds appropriated during a previous state fiscal
26 year for a service or activity funded under this section are
27 appropriated to the department to be used as additional funding
28 for services and purposes provided for under this section.
29 Notwithstanding [section 8.33](#), moneys received in accordance
30 with this subsection that remain unencumbered or unobligated at
31 the close of the fiscal year shall not revert to any fund but
32 shall remain available for the purposes designated until the
33 close of the succeeding fiscal year.

34 9. a. Of the funds appropriated in this section, up to
35 ~~\$1,645,000~~ \$3,290,000 is allocated for the payment of the

1 expenses of court-ordered services provided to juveniles
2 who are under the supervision of juvenile court services,
3 which expenses are a charge upon the state pursuant to
4 section 232.141, subsection 4. Of the amount allocated in
5 this paragraph "a", up to ~~\$778,143~~ \$1,556,287 shall be made
6 available to provide school-based supervision of children
7 adjudicated under [chapter 232](#), of which not more than ~~\$7,500~~
8 \$15,000 may be used for the purpose of training. A portion of
9 the cost of each school-based liaison officer shall be paid by
10 the school district or other funding source as approved by the
11 chief juvenile court officer.

12 b. Of the funds appropriated in this section, up to ~~\$374,492~~
13 \$748,985 is allocated for the payment of the expenses of
14 court-ordered services provided to children who are under the
15 supervision of the department, which expenses are a charge upon
16 the state pursuant to [section 232.141, subsection 4](#).

17 c. Notwithstanding [section 232.141](#) or any other provision
18 of law to the contrary, the amounts allocated in this
19 subsection shall be distributed to the judicial districts
20 as determined by the state court administrator and to the
21 department's service areas as determined by the administrator
22 of the department of human services' division of child and
23 family services. The state court administrator and the
24 division administrator shall make the determination of the
25 distribution amounts on or before June 15, 2016.

26 d. Notwithstanding [chapter 232](#) or any other provision of
27 law to the contrary, a district or juvenile court shall not
28 order any service which is a charge upon the state pursuant
29 to [section 232.141](#) if there are insufficient court-ordered
30 services funds available in the district court or departmental
31 service area distribution amounts to pay for the service. The
32 chief juvenile court officer and the departmental service area
33 manager shall encourage use of the funds allocated in this
34 subsection such that there are sufficient funds to pay for
35 all court-related services during the entire year. The chief

1 juvenile court officers and departmental service area managers
2 shall attempt to anticipate potential surpluses and shortfalls
3 in the distribution amounts and shall cooperatively request the
4 state court administrator or division administrator to transfer
5 funds between the judicial districts' or departmental service
6 areas' distribution amounts as prudent.

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

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

15 g. Of the funds allocated in this subsection, ~~\$8,500~~ \$17,000
16 shall be used by the department of human services to support
17 the interstate commission for juveniles in accordance with
18 the interstate compact for juveniles as provided in section
19 232.173.

20 10. Of the funds appropriated in this section, ~~\$4,026,613~~
21 \$8,053,227 is allocated for juvenile delinquent graduated
22 sanctions services. Any state funds saved as a result of
23 efforts by juvenile court services to earn a federal Tit. IV-E
24 match for juvenile court services administration may be used
25 for the juvenile delinquent graduated sanctions services.

26 11. Of the funds appropriated in this section, ~~\$804,142~~
27 \$1,658,285 is transferred to the department of public health
28 to be used for the child protection center grant program for
29 child protection centers located in Iowa in accordance with
30 section 135.118. The grant amounts under the program shall
31 be equalized so that each center receives a uniform base
32 amount of ~~\$122,500~~ \$245,000, so that \$50,000 is awarded to
33 establish a satellite child protection center in a city in
34 north central Iowa that is the county seat of a county with
35 a population between 44,000 and 45,000 according to the 2010

1 federal decennial census, and so that the remaining funds ~~shall~~
2 ~~be~~ are awarded through a funding formula based upon the volume
3 of children served.

4 12. If the department receives federal approval to
5 implement a waiver under Tit. IV-E of the federal Social
6 Security Act to enable providers to serve children who remain
7 in the children's families and communities, for purposes of
8 eligibility under the medical assistance program through 25
9 years of age, children who participate in the waiver shall be
10 considered to be placed in foster care.

11 13. Of the funds appropriated in this section, ~~\$2,012,583~~
12 \$4,025,167 is allocated for the preparation for adult living
13 program pursuant to [section 234.46](#).

14 14. Of the funds appropriated in this section, ~~\$113,668~~
15 \$227,337 shall be used for the public purpose of continuing
16 a grant to a nonprofit human services organization providing
17 services to individuals and families in multiple locations in
18 southwest Iowa and Nebraska for support of a project providing
19 immediate, sensitive support and forensic interviews, medical
20 exams, needs assessments, and referrals for victims of child
21 abuse and their nonoffending family members.

22 15. Of the funds appropriated in this section, ~~\$150,310~~
23 \$300,620 is allocated for the foster care youth council
24 approach of providing a support network to children placed in
25 foster care.

26 16. Of the funds appropriated in this section, ~~\$101,000~~
27 \$202,000 is allocated for use pursuant to [section 235A.1](#) for
28 continuation of the initiative to address child sexual abuse
29 implemented pursuant to 2007 Iowa Acts, chapter 218, section
30 18, subsection 21.

31 17. Of the funds appropriated in this section, ~~\$315,120~~
32 \$630,240 is allocated for the community partnership for child
33 protection sites.

34 18. Of the funds appropriated in this section, ~~\$185,625~~
35 \$371,250 is allocated for the department's minority youth and

1 family projects under the redesign of the child welfare system.

2 19. Of the funds appropriated in this section, ~~\$593,297~~
3 \$1,186,595 is allocated for funding of the community circle of
4 care collaboration for children and youth in northeast Iowa.

5 20. Of the funds appropriated in this section, at least
6 ~~\$73,579~~ \$147,158 shall be used for the continuation of the
7 child welfare provider training academy, a collaboration
8 between the coalition for family and children's services in
9 Iowa and the department.

10 21. Of the funds appropriated in this section, ~~\$105,936~~
11 \$211,872 shall be used for continuation of the central Iowa
12 system of care program grant through June 30, 2017.

13 22. Of the funds appropriated in this section, ~~\$117,500~~
14 \$235,000 shall be used for the public purpose of the
15 continuation and expansion of a system of care program grant
16 implemented in Cerro Gordo and Linn counties to utilize a
17 comprehensive and long-term approach for helping children
18 and families by addressing the key areas in a child's life
19 of childhood basic needs, education and work, family, and
20 community.

21 23. Of the funds appropriated in this section, at least
22 ~~\$12,500~~ \$25,000 shall be used to continue and to expand the
23 foster care respite pilot program in which postsecondary
24 students in social work and other human services-related
25 programs receive experience by assisting family foster care
26 providers with respite and other support.

27 24. Of the funds appropriated in this section, ~~\$55,000~~
28 \$110,000 shall be used for the public purpose of funding
29 community-based services and other supports with a system of
30 care approach for children with a serious emotional disturbance
31 and their families through a nonprofit provider of child
32 welfare services that has been in existence for more than 115
33 years, is located in a county with a population of more than
34 200,000 but less than 220,000 according to the latest census
35 information issued by the United States census bureau, is

1 licensed as a psychiatric medical institution for children, and
2 was a system of care grantee prior to July 1, 2016.

3 Sec. 17. 2015 Iowa Acts, chapter 137, section 139, is
4 amended to read as follows:

5 SEC. 139. ADOPTION SUBSIDY.

6 1. There is appropriated from the general fund of the
7 state to the department of human services for the fiscal year
8 beginning July 1, 2016, and ending June 30, 2017, the following
9 amount, or so much thereof as is necessary, to be used for the
10 purpose designated:

11 a. For adoption subsidy payments and services:

12	\$ 21,499,143
13	<u>43,046,664</u>

14 b. (1) The funds appropriated in this section shall be used
15 as authorized or allowed by federal law or regulation for any
16 of the following purposes:

17 (a) For adoption subsidy payments and related costs.

18 (b) For post-adoption services and for other purposes under
19 Tit. IV-B or Tit. IV-E of the federal Social Security Act.

20 (2) The department of human services may transfer funds
21 appropriated in this subsection to the appropriation for
22 child and family services in this Act for the purposes of
23 post-adoption services as specified in this paragraph "b".

24 2. The department may transfer funds appropriated in
25 this section to the appropriation made in this division of
26 this Act for general administration for costs paid from the
27 appropriation relating to adoption subsidy.

28 3. Federal funds received by the state during the
29 fiscal year beginning July 1, 2016, as the result of the
30 expenditure of state funds during a previous state fiscal
31 year for a service or activity funded under this section are
32 appropriated to the department to be used as additional funding
33 for the services and activities funded under this section.
34 Notwithstanding [section 8.33](#), moneys received in accordance
35 with this subsection that remain unencumbered or unobligated

1 at the close of the fiscal year shall not revert to any fund
2 but shall remain available for expenditure for the purposes
3 designated until the close of the succeeding fiscal year.

4 Sec. 18. 2015 Iowa Acts, chapter 137, section 141, is
5 amended to read as follows:

6 SEC. 141. FAMILY SUPPORT SUBSIDY PROGRAM.

7 1. There is appropriated from the general fund of the
8 state to the department of human services for the fiscal year
9 beginning July 1, 2016, and ending June 30, 2017, the following
10 amount, or so much thereof as is necessary, to be used for the
11 purpose designated:

12 For the family support subsidy program subject to the
13 enrollment restrictions in [section 225C.37, subsection 3](#):

14 \$ 536,966
15 1,069,282

16 2. The department shall use at least ~~\$320,750~~ \$727,500
17 of the moneys appropriated in this section for the family
18 support center component of the comprehensive family support
19 program under [section 225C.47](#). Not more than ~~\$12,500~~ \$25,000
20 of the amount allocated in this subsection shall be used for
21 administrative costs.

22 3. If at any time during the fiscal year, the amount of
23 funding available for the family support subsidy program
24 is reduced from the amount initially used to establish the
25 figure for the number of family members for whom a subsidy
26 is to be provided at any one time during the fiscal year,
27 notwithstanding [section 225C.38, subsection 2](#), the department
28 shall revise the figure as necessary to conform to the amount
29 of funding available.

30 Sec. 19. 2015 Iowa Acts, chapter 137, section 142, is
31 amended to read as follows:

32 SEC. 142. CONNER DECREE. There is appropriated from the
33 general fund of the state to the department of human services
34 for the fiscal year beginning July 1, 2016, and ending June 30,
35 2017, the following amount, or so much thereof as is necessary,

1 to be used for the purpose designated:

2 For building community capacity through the coordination
3 and provision of training opportunities in accordance with the
4 consent decree of Conner v. Branstad, No. 4-86-CV-30871(S.D.
5 Iowa, July 14, 1994):

6 \$ ~~16,816~~
7 33,632

8 Sec. 20. 2015 Iowa Acts, chapter 137, section 143, is
9 amended to read as follows:

10 SEC. 143. MENTAL HEALTH INSTITUTES. There is appropriated
11 from the general fund of the state to the department of human
12 services for the fiscal year beginning July 1, 2016, and ending
13 June 30, 2017, the following amounts, or so much thereof as is
14 necessary, to be used for the purposes designated which amounts
15 shall not be transferred or expended for any purpose other than
16 the purposes designated, notwithstanding [section 218.6](#) to the
17 contrary:

18 1. For operation of the state mental health institute at
19 Cherokee as required by chapters [218](#) and [226](#) for salaries,
20 support, maintenance, and miscellaneous purposes, and for not
21 more than the following full-time equivalent positions:

22 \$ ~~2,772,808~~
23 14,644,041
24 FTEs 169.20

25 2. For operation of the state mental health institute at
26 Independence as required by chapters [218](#) and [226](#) for salaries,
27 support, maintenance, and miscellaneous purposes, and for not
28 more than the following full-time equivalent positions:

29 \$ ~~5,162,104~~
30 18,552,103
31 FTEs 233.00

32 Sec. 21. 2015 Iowa Acts, chapter 137, section 144, is
33 amended to read as follows:

34 SEC. 144. STATE RESOURCE CENTERS.

35 1. There is appropriated from the general fund of the

1 state to the department of human services for the fiscal year
2 beginning July 1, 2016, and ending June 30, 2017, the following
3 amounts, or so much thereof as is necessary, to be used for the
4 purposes designated:

5 a. For the state resource center at Glenwood for salaries,
6 support, maintenance, and miscellaneous purposes:
7 \$ ~~10,762,241~~
8 20,719,486

9 b. For the state resource center at Woodward for salaries,
10 support, maintenance, and miscellaneous purposes:
11 \$ ~~7,291,903~~
12 14,053,011

13 2. The department may continue to bill for state resource
14 center services utilizing a scope of services approach used for
15 private providers of intermediate care facilities for persons
16 with an intellectual disability services, in a manner which
17 does not shift costs between the medical assistance program,
18 counties, or other sources of funding for the state resource
19 centers.

20 3. The state resource centers may expand the time-limited
21 assessment and respite services during the fiscal year.

22 4. If the department's administration and the department
23 of management concur with a finding by a state resource
24 center's superintendent that projected revenues can reasonably
25 be expected to pay the salary and support costs for a new
26 employee position, or that such costs for adding a particular
27 number of new positions for the fiscal year would be less
28 than the overtime costs if new positions would not be added,
29 the superintendent may add the new position or positions. If
30 the vacant positions available to a resource center do not
31 include the position classification desired to be filled, the
32 state resource center's superintendent may reclassify any
33 vacant position as necessary to fill the desired position. The
34 superintendents of the state resource centers may, by mutual
35 agreement, pool vacant positions and position classifications

1 during the course of the fiscal year in order to assist one
2 another in filling necessary positions.

3 5. If existing capacity limitations are reached in
4 operating units, a waiting list is in effect for a service or
5 a special need for which a payment source or other funding
6 is available for the service or to address the special need,
7 and facilities for the service or to address the special need
8 can be provided within the available payment source or other
9 funding, the superintendent of a state resource center may
10 authorize opening not more than two units or other facilities
11 and begin implementing the service or addressing the special
12 need during fiscal year 2016-2017.

13 Sec. 22. 2015 Iowa Acts, chapter 137, section 145, is
14 amended to read as follows:

15 SEC. 145. SEXUALLY VIOLENT PREDATORS.

16 1. There is appropriated from the general fund of the
17 state to the department of human services for the fiscal year
18 beginning July 1, 2016, and ending June 30, 2017, the following
19 amount, or so much thereof as is necessary, to be used for the
20 purpose designated:

21 For costs associated with the commitment and treatment of
22 sexually violent predators in the unit located at the state
23 mental health institute at Cherokee, including costs of legal
24 services and other associated costs, including salaries,
25 support, maintenance, and miscellaneous purposes, and for not
26 more than the following full-time equivalent positions:

27	\$	4,946,539
28		<u>10,193,079</u>
29	FTEs	132.50

30 2. Unless specifically prohibited by law, if the amount
31 charged provides for recoupment of at least the entire amount
32 of direct and indirect costs, the department of human services
33 may contract with other states to provide care and treatment
34 of persons placed by the other states at the unit for sexually
35 violent predators at Cherokee. The moneys received under

1 such a contract shall be considered to be repayment receipts
2 and used for the purposes of the appropriation made in this
3 section.

4 Sec. 23. 2015 Iowa Acts, chapter 137, section 146, is
5 amended to read as follows:

6 SEC. 146. FIELD OPERATIONS. There is appropriated from the
7 general fund of the state to the department of human services
8 for the fiscal year beginning July 1, 2016, and ending June 30,
9 2017, the following amount, or so much thereof as is necessary,
10 to be used for the purposes designated:

11 For field operations, including salaries, support,
12 maintenance, and miscellaneous purposes, and for not more than
13 the following full-time equivalent positions:
14 \$ ~~29,460,488~~
15 54,442,877
16 FTEs 1,837.00

17 2. Priority in filling full-time equivalent positions
18 shall be given to those positions related to child protection
19 services and eligibility determination for low-income families.

20 Sec. 24. 2015 Iowa Acts, chapter 137, section 147, is
21 amended to read as follows:

22 SEC. 147. GENERAL ADMINISTRATION. There is appropriated
23 from the general fund of the state to the department of human
24 services for the fiscal year beginning July 1, 2016, and ending
25 June 30, 2017, the following amount, or so much thereof as is
26 necessary, to be used for the purpose designated:

27 For general administration, including salaries, support,
28 maintenance, and miscellaneous purposes, and for not more than
29 the following full-time equivalent positions:
30 \$ ~~7,449,099~~
31 15,373,198
32 FTEs 309.00

33 2. Of the funds appropriated in this section, ~~\$75,000~~
34 \$150,000 shall be used to continue the contract for the
35 provision of a program to provide technical assistance,

1 support, and consultation to providers of habilitation services
2 and home and community-based services waiver services for
3 adults with disabilities under the medical assistance program.

4 3. Of the funds appropriated in this section, ~~\$25,000~~
5 \$50,000 is transferred to the Iowa finance authority to be
6 used for administrative support of the council on homelessness
7 established in [section 16.2D](#) and for the council to fulfill its
8 duties in addressing and reducing homelessness in the state.

9 4. Of the funds appropriated in this section, ~~\$125,000~~
10 \$250,000 shall be transferred to and deposited in the
11 administrative fund of the Iowa ABLE savings plan trust created
12 in [section 12I.4](#), ~~if enacted in this or any other Act~~, to be
13 used for implementation and administration activities of the
14 Iowa ABLE savings plan trust.

15 5. Of the funds appropriated in this section, \$300,000 shall
16 be used to contract for planning grants for the development and
17 implementation of children's mental health crisis services as
18 provided in this Act.

19 6. Of the funds appropriated in this section, \$200,000
20 shall be used to continue to expand the provision of nationally
21 accredited and recognized internet-based training to include
22 mental health and disability services providers.

23 Sec. 25. 2015 Iowa Acts, chapter 137, is amended by adding
24 the following new section:

25 NEW SECTION. SEC. 147A. DEPARTMENT-WIDE DUTIES. There
26 is appropriated from the general fund of the state to the
27 department of human services for the fiscal year beginning July
28 1, 2016, and ending June 30, 2017, the following amount, or
29 so much thereof as is necessary, to be used for the purposes
30 designated:

31 For salaries, support, maintenance, and miscellaneous
32 purposes at facilities under the purview of the department of
33 human services:
34 \$ 2,879,274

35 Sec. 26. 2015 Iowa Acts, chapter 137, section 148, is

1 amended to read as follows:

2 SEC. 148. VOLUNTEERS. There is appropriated from the
3 general fund of the state to the department of human services
4 for the fiscal year beginning July 1, 2016, and ending June 30,
5 2017, the following amount, or so much thereof as is necessary,
6 to be used for the purpose designated:

7 For development and coordination of volunteer services:
8 \$ 42,343
9 84,686

10 Sec. 27. 2015 Iowa Acts, chapter 137, section 149, is
11 amended to read as follows:

12 SEC. 149. MEDICAL ASSISTANCE, STATE SUPPLEMENTARY
13 ASSISTANCE, AND SOCIAL SERVICE PROVIDERS REIMBURSED UNDER THE
14 DEPARTMENT OF HUMAN SERVICES.

15 1. a. ~~(1) For the fiscal year beginning July 1, 2016,~~
16 ~~the total state funding amount for the nursing facility budget~~
17 ~~shall not exceed \$151,421,458.~~

18 ~~(2) The department, in cooperation with nursing facility~~
19 ~~representatives, shall review projections for state funding~~
20 ~~expenditures for reimbursement of nursing facilities on a~~
21 ~~quarterly basis and the department shall determine if an~~
22 ~~adjustment to the medical assistance reimbursement rate is~~
23 ~~necessary in order to provide reimbursement within the state~~
24 ~~funding amount for the fiscal year. Notwithstanding 2001~~
25 ~~Iowa Acts, chapter 192, section 4, subsection 2, paragraph~~
26 ~~"c", and subsection 3, paragraph "a", subparagraph (2),~~
27 ~~if the state funding expenditures for the nursing facility~~
28 ~~budget for the fiscal year are projected to exceed the amount~~
29 ~~specified in subparagraph (1), the department shall adjust~~
30 ~~the reimbursement for nursing facilities reimbursed under the~~
31 ~~case-mix reimbursement system to maintain expenditures of the~~
32 ~~nursing facility budget within the specified amount for the~~
33 ~~fiscal year.~~

34 (3) For the fiscal year beginning July 1, 2016, case-mix,
35 non-case mix, and special population nursing facilities shall

1 be reimbursed in accordance with the methodology in effect on
2 June 30, 2016.

3 (4) For any open or unsettled nursing facility cost report
4 for a fiscal year prior to and including the fiscal year
5 beginning July 1, 2015, including any cost report remanded on
6 judicial review for inclusion of prescription drug, laboratory,
7 or x-ray costs, the department shall offset all reported
8 prescription drug, laboratory, and x-ray costs with any revenue
9 received from Medicare or other revenue source for any purpose.
10 For purposes of this subparagraph, a nursing facility cost
11 report is not considered open or unsettled if the facility did
12 not initiate an administrative appeal under [chapter 17A](#) or if
13 any appeal rights initiated have been exhausted.

14 b. (1) For the fiscal year beginning July 1, 2016,
15 the department shall establish the pharmacy dispensing fee
16 reimbursement at \$11.73 per prescription, until a cost of
17 dispensing survey is completed. The actual dispensing fee
18 shall be determined by a cost of dispensing survey performed
19 by the department and required to be completed by all medical
20 assistance program participating pharmacies every two years,
21 adjusted as necessary to maintain expenditures within the
22 amount appropriated to the department for this purpose for the
23 fiscal year.

24 (2) The department shall utilize an average acquisition
25 cost reimbursement methodology for all drugs covered under the
26 medical assistance program in accordance with 2012 Iowa Acts,
27 chapter 1133, section 33.

28 (3) Notwithstanding subparagraph (2), if the centers for
29 Medicare and Medicaid services of the United States department
30 of health and human services (CMS) requires, as a condition
31 of federal Medicaid funding, that the department implement an
32 aggregate federal upper limit (FUL) for drug reimbursement
33 based on the average manufacturer's price (AMP), the department
34 may utilize a reimbursement methodology for all drugs covered
35 under the Medicaid program based on the national average drug

1 acquisition cost (NADAC) methodology published by CMS, in order
2 to assure compliance with the aggregate FUL, minimize outcomes
3 of drug reimbursements below pharmacy acquisition costs, limit
4 administrative costs, and minimize any change in the aggregate
5 reimbursement for drugs. The department may adopt emergency
6 rules to implement this subparagraph.

7 c. (1) For the fiscal year beginning July 1, 2016,
8 reimbursement rates for outpatient hospital services shall
9 remain at the rates in effect on June 30, 2016, subject to
10 Medicaid program upper payment limit rules, and adjusted
11 as necessary to maintain expenditures within the amount
12 appropriated to the department for this purpose for the fiscal
13 year.

14 (2) For the fiscal year beginning July 1, 2016,
15 reimbursement rates for inpatient hospital services shall
16 remain at the rates in effect on June 30, 2016, subject to
17 Medicaid program upper payment limit rules, and adjusted
18 as necessary to maintain expenditures within the amount
19 appropriated to the department for this purpose for the fiscal
20 year.

21 (3) For the fiscal year beginning July 1, 2016, the graduate
22 medical education and disproportionate share hospital fund
23 shall remain at the amount in effect on June 30, 2016, except
24 that the portion of the fund attributable to graduate medical
25 education shall be reduced in an amount that reflects the
26 elimination of graduate medical education payments made to
27 out-of-state hospitals.

28 (4) In order to ensure the efficient use of limited state
29 funds in procuring health care services for low-income Iowans,
30 funds appropriated in this Act for hospital services shall
31 not be used for activities which would be excluded from a
32 determination of reasonable costs under the federal Medicare
33 program pursuant to 42 U.S.C. §1395x(v)(1)(N).

34 d. For the fiscal year beginning July 1, 2016, reimbursement
35 rates for ~~rural health clinics~~, hospices, and acute mental

1 hospitals shall be increased in accordance with increases under
2 the federal Medicare program or as supported by their Medicare
3 audited costs.

4 e. For the fiscal year beginning July 1, 2016, independent
5 laboratories and rehabilitation agencies shall be reimbursed
6 using the same methodology in effect on June 30, 2016.

7 f. (1) For the fiscal year beginning July 1, 2016,
8 reimbursement rates for home health agencies shall continue to
9 be based on the Medicare low utilization payment adjustment
10 (LUPA) methodology with state geographic wage adjustments, and
11 updated to reflect the most recent Medicare LUPA rates within
12 the amount appropriated to the department for this purpose for
13 the fiscal year.

14 (2) For the fiscal year beginning July 1, 2016, rates for
15 private duty nursing and personal care services under the early
16 and periodic screening, diagnostic, and treatment program
17 benefit shall be calculated based on the methodology in effect
18 on June 30, 2016.

19 g. For the fiscal year beginning July 1, 2016, federally
20 qualified health centers and rural health clinics shall receive
21 cost-based reimbursement for 100 percent of the reasonable
22 costs for the provision of services to recipients of medical
23 assistance.

24 h. For the fiscal year beginning July 1, 2016, the
25 reimbursement rates for dental services shall remain at the
26 rates in effect on June 30, 2016.

27 i. (1) For the fiscal year beginning July 1, 2016,
28 state-owned psychiatric medical institutions for children shall
29 receive cost-based reimbursement for 100 percent of the actual
30 and allowable costs for the provision of services to recipients
31 of medical assistance.

32 (2) For the nonstate-owned psychiatric medical institutions
33 for children, reimbursement rates shall be based on the
34 reimbursement methodology developed by the Medicaid managed
35 care contractor for behavioral health services as required for

1 federal compliance.

2 (3) As a condition of participation in the medical
3 assistance program, enrolled providers shall accept the medical
4 assistance reimbursement rate for any covered goods or services
5 provided to recipients of medical assistance who are children
6 under the custody of a psychiatric medical institution for
7 children.

8 j. For the fiscal year beginning July 1, 2016, unless
9 otherwise specified in this Act, all noninstitutional medical
10 assistance provider reimbursement rates shall remain at the
11 rates in effect on June 30, 2016, except for area education
12 agencies, local education agencies, infant and toddler
13 services providers, home and community-based services providers
14 including consumer-directed attendant care providers under a
15 section 1915(c) or 1915(i) waiver, targeted case management
16 providers, and those providers whose rates are required to be
17 determined pursuant to [section 249A.20](#).

18 k. Notwithstanding any provision to the contrary, for the
19 fiscal year beginning July 1, 2016, the reimbursement rate for
20 anesthesiologists shall remain at the rate in effect on June
21 30, 2016.

22 l. Notwithstanding [section 249A.20](#), for the fiscal year
23 beginning July 1, 2016, the average reimbursement rate for
24 health care providers eligible for use of the federal Medicare
25 resource-based relative value scale reimbursement methodology
26 under [section 249A.20](#) shall remain at the rate in effect on
27 June 30, 2016; however, this rate shall not exceed the maximum
28 level authorized by the federal government.

29 m. For the fiscal year beginning July 1, 2016, the
30 reimbursement rate for residential care facilities shall not
31 be less than the minimum payment level as established by the
32 federal government to meet the federally mandated maintenance
33 of effort requirement. The flat reimbursement rate for
34 facilities electing not to file annual cost reports shall not
35 be less than the minimum payment level as established by the

1 federal government to meet the federally mandated maintenance
2 of effort requirement.

3 n. For the fiscal year beginning July 1, 2016, the
4 reimbursement rates for inpatient mental health services
5 provided at hospitals shall remain at the rates in effect on
6 June 30, 2016, subject to Medicaid program upper payment limit
7 rules; and psychiatrists shall be reimbursed at the medical
8 assistance program fee-for-service rate in effect on June 30,
9 2016.

10 o. For the fiscal year beginning July 1, 2016, community
11 mental health centers may choose to be reimbursed for the
12 services provided to recipients of medical assistance through
13 either of the following options:

14 (1) For 100 percent of the reasonable costs of the services.

15 (2) In accordance with the alternative reimbursement rate
16 methodology ~~established by the medical assistance program's~~
17 ~~managed care contractor for mental health services and approved~~
18 ~~by the department of human services~~ in effect on June 30, 2016.

19 p. For the fiscal year beginning July 1, 2016, the
20 reimbursement rate for providers of family planning services
21 that are eligible to receive a 90 percent federal match shall
22 remain at the rates in effect on June 30, 2016.

23 q. For the fiscal year beginning July 1, 2016, the upper
24 limits on reimbursement rates for providers of home and
25 community-based services waiver services shall remain at the
26 limits in effect on June 30, 2016.

27 r. For the fiscal year beginning July 1, 2016, the
28 reimbursement rates for emergency medical service providers
29 shall remain at the rates in effect on June 30, 2016.

30 s. For the fiscal year beginning July 1, 2016, the
31 reimbursement rates for community providers shall be increased
32 by 1 percent over the fee-for-service rates in effect on June
33 30, 2016.

34 2. For the fiscal year beginning July 1, 2016, the
35 reimbursement rate for providers reimbursed under the

1 in-home-related care program shall not be less than the minimum
2 payment level as established by the federal government to meet
3 the federally mandated maintenance of effort requirement.

4 3. Unless otherwise directed in this section, when the
5 department's reimbursement methodology for any provider
6 reimbursed in accordance with this section includes an
7 inflation factor, this factor shall not exceed the amount
8 by which the consumer price index for all urban consumers
9 increased during the calendar year ending December 31, 2002.

10 4. ~~For~~ Notwithstanding section 234.38, for the fiscal
11 year beginning July 1, 2016, the foster family basic daily
12 maintenance rate and the maximum adoption subsidy rate for
13 children ages 0 through 5 years shall be \$16.78, the rate for
14 children ages 6 through 11 years shall be \$17.45, the rate for
15 children ages 12 through 15 years shall be \$19.10, and the
16 rate for children and young adults ages 16 and older shall
17 be \$19.35. For youth ages 18 to 21 who have exited foster
18 care, the preparation for adult living program maintenance rate
19 shall be \$602.70 per month. The maximum payment for adoption
20 subsidy nonrecurring expenses shall be limited to \$500 and the
21 disallowance of additional amounts for court costs and other
22 related legal expenses implemented pursuant to 2010 Iowa Acts,
23 chapter 1031, section 408, shall be continued.

24 5. For the fiscal year beginning July 1, 2016, the maximum
25 reimbursement rates for social services providers under
26 contract shall remain at the rates in effect on June 30, 2016,
27 or the provider's actual and allowable cost plus inflation for
28 each service, whichever is less. However, if a new service
29 or service provider is added after June 30, 2016, the initial
30 reimbursement rate for the service or provider shall be based
31 upon a weighted average of provider rates for similar services.

32 6. For the fiscal year beginning July 1, 2016, the
33 reimbursement rates for resource family recruitment and
34 retention contractors, child welfare emergency services
35 contractors, and supervised apartment living foster care

1 providers shall remain at the rates in effect on June 30, 2016.

2 7. a. For the purposes of this subsection, "combined
3 reimbursement rate" means the combined service and maintenance
4 reimbursement rate for a service level under the department's
5 reimbursement methodology. Effective July 1, 2016, the
6 combined reimbursement rate for a group foster care service
7 level shall be the amount designated in this subsection.
8 However, if a group foster care provider's reimbursement rate
9 for a service level as of June 30, 2016, is more than the rate
10 designated in this subsection, the provider's reimbursement
11 shall remain at the higher rate.

12 b. Unless a group foster care provider is subject to the
13 exception provided in paragraph "a", effective July 1, 2016,
14 the combined reimbursement rates for the service levels under
15 the department's reimbursement methodology shall be as follows:

16 (1) For service level, community - D1, the daily rate shall
17 be at least \$84.17.

18 (2) For service level, comprehensive - D2, the daily rate
19 shall be at least \$119.09.

20 (3) For service level, enhanced - D3, the daily rate shall
21 be at least \$131.09.

22 8. The group foster care reimbursement rates paid for
23 placement of children out of state shall be calculated
24 according to the same rate-setting principles as those used for
25 in-state providers, unless the director of human services or
26 the director's designee determines that appropriate care cannot
27 be provided within the state. The payment of the daily rate
28 shall be based on the number of days in the calendar month in
29 which service is provided.

30 9. a. For the fiscal year beginning July 1, 2016, the
31 reimbursement rate paid for shelter care and the child welfare
32 emergency services implemented to provide or prevent the need
33 for shelter care shall be established by contract.

34 b. For the fiscal year beginning July 1, 2016, the combined
35 service and maintenance components of the reimbursement rate

1 paid for shelter care services shall be based on the financial
2 and statistical report submitted to the department. The
3 maximum reimbursement rate shall be \$101.83 per day. The
4 department shall reimburse a shelter care provider at the
5 provider's actual and allowable unit cost, plus inflation, not
6 to exceed the maximum reimbursement rate.

7 c. Notwithstanding [section 232.141, subsection 8](#), for the
8 fiscal year beginning July 1, 2016, the amount of the statewide
9 average of the actual and allowable rates for reimbursement of
10 juvenile shelter care homes that is utilized for the limitation
11 on recovery of unpaid costs shall remain at the amount in
12 effect for this purpose in the fiscal year beginning July 1,
13 2015.

14 10. For the fiscal year beginning July 1, 2016, the
15 department shall calculate reimbursement rates for intermediate
16 care facilities for persons with an intellectual disability
17 at the 80th percentile. Beginning July 1, 2016, the rate
18 calculation methodology shall utilize the consumer price index
19 inflation factor applicable to the fiscal year beginning July
20 1, 2016.

21 11. For the fiscal year beginning July 1, 2016, for child
22 care providers reimbursed under the state child care assistance
23 program, the department shall set provider reimbursement
24 rates based on the rate reimbursement survey completed in
25 December 2004. Effective July 1, 2016, the child care provider
26 reimbursement rates shall remain at the rates in effect on June
27 30, 2016. The department shall set rates in a manner so as
28 to provide incentives for a nonregistered provider to become
29 registered by applying the increase only to registered and
30 licensed providers.

31 11A. For the fiscal year beginning July 1, 2016,
32 notwithstanding any provision to the contrary under this
33 section, affected providers or services shall instead be
34 reimbursed as follows:

35 a. For fee-for-service claims, reimbursement shall be

1 calculated based on the methodology otherwise specified in this
2 section for the fiscal year beginning July 1, 2016, for the
3 respective provider or service.

4 b. For claims subject to a managed care contract,
5 reimbursement shall be based on the methodology established
6 by the managed care organization contract. However, any
7 reimbursement established under such contract shall not be
8 lower than the reimbursement otherwise specified in this
9 section for fee-for-service claims for the fiscal year
10 beginning July 1, 2016, for the respective provider or service.

11 13. The department may adopt emergency rules to implement
12 this section.

13 Sec. 28. 2015 Iowa Acts, chapter 137, is amended by adding
14 the following new section:

15 NEW SECTION. SEC. 151A. TRANSFER OF MEDICAID MODERNIZATION
16 SAVINGS BETWEEN APPROPRIATIONS FY 2016-2017. Notwithstanding
17 section 8.39, subsection 1, for the fiscal year beginning July
18 1, 2016, if savings resulting from the governor's Medicaid
19 modernization initiative accrue to the medical contracts or
20 children's health insurance program appropriation from the
21 general fund of the state and not to the medical assistance
22 appropriation from the general fund of the state under this
23 division of this Act, such savings may be transferred to such
24 medical assistance appropriation for the same fiscal year
25 without prior written consent and approval of the governor and
26 the director of the department of management. The department
27 of human services shall report any transfers made pursuant to
28 this section to the legislative services agency.

29

DIVISION VI

30 HEALTH CARE ACCOUNTS AND FUNDS — FY 2016-2017

31 Sec. 29. 2015 Iowa Acts, chapter 137, section 152, is
32 amended to read as follows:

33 SEC. 152. PHARMACEUTICAL SETTLEMENT ACCOUNT. There is
34 appropriated from the pharmaceutical settlement account created
35 in section 249A.33 to the department of human services for the

1 fiscal year beginning July 1, 2016, and ending June 30, 2017,
2 the following amount, or so much thereof as is necessary, to be
3 used for the purpose designated:

4 Notwithstanding any provision of law to the contrary, to
5 supplement the appropriations made in this Act for medical
6 contracts under the medical assistance program for the fiscal
7 year beginning July 1, 2016, and ending June 30, 2017:
8 \$ ~~1,001,088~~
9 1,300,000

10 Sec. 30. 2015 Iowa Acts, chapter 137, section 153, is
11 amended to read as follows:

12 SEC. 153. QUALITY ASSURANCE TRUST FUND — DEPARTMENT OF
13 HUMAN SERVICES. Notwithstanding any provision to the contrary
14 and subject to the availability of funds, there is appropriated
15 from the quality assurance trust fund created in section
16 249L.4 to the department of human services for the fiscal year
17 beginning July 1, 2016, and ending June 30, 2017, the following
18 amounts, or so much thereof as is necessary, for the purposes
19 designated:

20 To supplement the appropriation made in this Act from the
21 general fund of the state to the department of human services
22 for medical assistance for the same fiscal year:
23 \$ ~~18,602,604~~
24 36,705,208

25 Sec. 31. 2015 Iowa Acts, chapter 137, section 154, is
26 amended to read as follows:

27 SEC. 154. HOSPITAL HEALTH CARE ACCESS TRUST FUND —
28 DEPARTMENT OF HUMAN SERVICES. Notwithstanding any provision to
29 the contrary and subject to the availability of funds, there is
30 appropriated from the hospital health care access trust fund
31 created in [section 249M.4](#) to the department of human services
32 for the fiscal year beginning July 1, 2016, and ending June
33 30, 2017, the following amounts, or so much thereof as is
34 necessary, for the purposes designated:

35 To supplement the appropriation made in this Act from the

1 general fund of the state to the department of human services
 2 for medical assistance for the same fiscal year:
 3 \$ 17,350,000
 4 34,700,000

DIVISION VII

PROPERTY TAX RELIEF FUND BLOCK GRANT MONEY — FY 2016-2017

7 Sec. 32. 2015 Iowa Acts, chapter 137, section 157, is
8 amended to read as follows:

9 SEC. 157. PROPERTY TAX RELIEF FUND BLOCK GRANT MONEYS. The
 10 moneys transferred to the property tax relief fund for the
 11 fiscal year beginning July 1, ~~2015~~ 2016, from the federal
 12 social services block grant pursuant to 2015 Iowa Acts,
 13 House File 630, and from the federal temporary assistance for
 14 needy families block grant, totaling at least \$~~11,774,275~~
 15 7,456,296, are appropriated to the department of human services
 16 for the fiscal year beginning July 1, ~~2015~~ 2016, and ending
 17 June 30, ~~2016~~ 2017, to be used for the purposes designated,
 18 notwithstanding any provision of law to the contrary:

19 1. ~~For distribution to any mental health and disability~~
 20 ~~services region where 25 percent of the region's projected~~
 21 ~~expenditures exceeds the region's projected fund balance the~~
 22 ~~family planning services program, including for implementation~~
 23 ~~and administration, as enacted in this 2016 Act:~~

24 \$ 480,000
 25 2,999,305

26 a. ~~For purposes of this subsection:~~

27 (1) ~~"Available funds" means a county mental health and~~
 28 ~~services fund balance on June 30, 2015, plus the maximum amount~~
 29 ~~a county was allowed to levy for the fiscal year beginning July~~
 30 ~~1, 2015.~~

31 (2) ~~"Projected expenditures" means the actual expenditures~~
 32 ~~of a mental health and disability services region as of June~~
 33 ~~30, 2015, multiplied by an annual inflation rate of 2 percent~~
 34 ~~plus the projected costs for new core services administered by~~
 35 ~~the region as provided in a region's regional service system~~

1 ~~management plan approved pursuant to section 331.393 for the~~
2 ~~fiscal year beginning July 1, 2015.~~

3 ~~(3) "Projected fund balance" means the difference between a~~
4 ~~mental health and disability services region's available funds~~
5 ~~and projected expenditures.~~

6 ~~b. If sufficient funds are not available to implement this~~
7 ~~subsection, the department of human services shall distribute~~
8 ~~funds to a region in proportion to the availability of funds.~~

9 2. To be transferred to the appropriation in this Act for
10 child and family services for the fiscal year beginning July 1,
11 2016, to be used for the purpose of that appropriation:

12 \$ 5,407,137
13 8,774,970

14 DIVISION VIII

15 PRIOR YEAR APPROPRIATIONS AND OTHER PROVISIONS

16 FAMILY INVESTMENT PROGRAM ACCOUNT FY 2015-2016

17 Sec. 33. 2015 Iowa Acts, chapter 137, section 7, subsection
18 4, paragraph e, is amended to read as follows:

19 e. For the JOBS program:

20 \$ 17,540,398
21 17,140,398

22 FAMILY INVESTMENT PROGRAM GENERAL FUND FY 2015-2016

23 Sec. 34. 2015 Iowa Acts, chapter 137, section 8, unnumbered
24 paragraph 2, is amended to read as follows:

25 To be credited to the family investment program (FIP)
26 account and used for family investment program assistance under
27 chapter 239B:

28 \$ 48,673,875
29 44,773,875

30 Sec. 35. 2015 Iowa Acts, chapter 137, section 8, subsection
31 1, is amended to read as follows:

32 1. Of the funds appropriated in this section, ~~\$7,402,220~~
33 \$7,002,220 is allocated for the JOBS program.

34 MEDICAL ASSISTANCE APPROPRIATION — FY 2015-2016

35 Sec. 36. 2015 Iowa Acts, chapter 137, section 12, unnumbered

1 paragraph 2, is amended to read as follows:

2 For medical assistance program reimbursement and associated
3 costs as specifically provided in the reimbursement
4 methodologies in effect on June 30, 2015, except as otherwise
5 expressly authorized by law, consistent with options under
6 federal law and regulations, and contingent upon receipt of
7 approval from the office of the governor of reimbursement for
8 each abortion performed under the program:

9 \$ ~~1,303,191,564~~
10 1,318,191,564

11 MODERNIZATION EMERGENCY RULES FY 2015-2016

12 Sec. 37. 2015 Iowa Acts, chapter 137, section 12, subsection
13 24, is amended to read as follows:

14 24. The department of human services may adopt emergency
15 rules as necessary to implement the governor's Medicaid
16 modernization initiative beginning ~~January~~ April 1, 2016.

17 STATE SUPPLEMENTARY ASSISTANCE FY 2015-2016

18 Sec. 38. 2015 Iowa Acts, chapter 137, section 14, unnumbered
19 paragraph 2, is amended to read as follows:

20 For the state supplementary assistance program:
21 \$ ~~12,997,187~~
22 11,897,187

23 CHILD CARE ASSISTANCE FY 2015-2016

24 Sec. 39. 2015 Iowa Acts, chapter 137, section 16, unnumbered
25 paragraph 2, is amended to read as follows:

26 For child care programs:
27 \$ ~~51,408,668~~
28 41,408,668

29 Sec. 40. 2015 Iowa Acts, chapter 137, section 16, subsection
30 1, is amended to read as follows:

31 1. Of the funds appropriated in this section, ~~\$43,689,241~~
32 \$33,689,241 shall be used for state child care assistance in
33 accordance with [section 237A.13](#).

34 Sec. 41. 2015 Iowa Acts, chapter 137, section 16, subsection
35 9, is amended to read as follows:

1 9. Notwithstanding section 8.33, moneys ~~advanced for~~
2 ~~purposes of the programs developed by early childhood Iowa~~
3 ~~areas, advanced for purposes of wraparound child care,~~
4 appropriated in this section or received from the federal
5 appropriations made for the purposes of this section that
6 remain unencumbered or unobligated at the close of the fiscal
7 year shall not revert to any fund but shall remain available
8 for expenditure for the purposes designated until the close of
9 the succeeding fiscal year.

10 NURSING FACILITY BUDGET FY 2015-2016

11 Sec. 42. 2015 Iowa Acts, chapter 137, section 29, subsection
12 1, paragraph a, subparagraph (1), is amended to read as
13 follows:

14 (1) For the fiscal year beginning July 1, 2015, the total
15 state funding amount for the nursing facility budget shall not
16 exceed ~~\$151,421,158~~ \$227,131,737.

17 Sec. 43. EFFECTIVE UPON ENACTMENT. This division of this
18 Act, being deemed of immediate importance, takes effect upon
19 enactment.

20 Sec. 44. RETROACTIVE APPLICABILITY. This division of this
21 Act is retroactively applicable to July 1, 2015.

22 DIVISION IX
23 DECATEGORIZATION

24 Sec. 45. DECATEGORIZATION CARRYOVER FUNDING — TRANSFER TO
25 MEDICAID PROGRAM. Notwithstanding section 232.188, subsection
26 5, paragraph "b", any state appropriated moneys in the funding
27 pool that remained unencumbered or unobligated at the close
28 of the fiscal year beginning July 1, 2013, and were deemed
29 carryover funding to remain available for the two succeeding
30 fiscal years that still remain unencumbered or unobligated at
31 the close of the fiscal year beginning July 1, 2015, shall
32 not revert but shall be transferred to the medical assistance
33 program for the fiscal year beginning July 1, 2015.

34 Sec. 46. EFFECTIVE UPON ENACTMENT. This division of this
35 Act, being deemed of immediate importance, takes effect upon

1 enactment.

2 Sec. 47. RETROACTIVE APPLICABILITY. This division of this
3 Act is retroactively applicable to July 1, 2015.

4 DIVISION X
5 CODE CHANGES

6 LOCAL OFFICES OF SUBSTITUTE DECISION MAKER

7 Sec. 48. Section 231E.4, subsection 3, paragraph a, Code
8 2016, is amended to read as follows:

9 a. Select persons through a request for proposals process to
10 establish local offices of substitute decision maker in each
11 of the planning and service areas. Local offices shall be
12 established statewide on or before July 1, ~~2017~~ 2018.

13 INSTITUTIONS FOR PERSONS WITH AN INTELLECTUAL DISABILITY —
14 ASSESSMENT

15 Sec. 49. Section 222.60A, Code 2016, is amended to read as
16 follows:

17 **222.60A Cost of assessment.**

18 Notwithstanding any provision of ~~this chapter~~ to the
19 contrary, any amount attributable to any ~~fee assessed~~
20 assessment pursuant to ~~section 249A.21~~ that would otherwise
21 be the liability of any county shall be paid by the state.
22 The department may transfer funds from the appropriation for
23 medical assistance to pay any amount attributable to any ~~fee~~
24 ~~assessed~~ assessment pursuant to ~~section 249A.21~~ that is a
25 liability of the state.

26 Sec. 50. Section 249A.12, subsection 3, paragraph c, Code
27 2016, is amended to read as follows:

28 ~~c. Effective February 1, 2002, the~~ The state shall be
29 responsible for all of the nonfederal share of the costs of
30 intermediate care facility for persons with an intellectual
31 disability services provided under medical assistance
32 attributable to the assessment fee for intermediate care
33 facilities for individuals with an intellectual disability
34 imposed pursuant to ~~section 249A.21~~. ~~Effective February 1,~~
35 ~~2003,~~ a A county is not required to reimburse the department

1 and shall not be billed for the nonfederal share of the costs
2 of such services attributable to the assessment fee.

3 Sec. 51. Section 249A.21, Code 2016, is amended to read as
4 follows:

5 **249A.21 Intermediate care facilities for persons with an**
6 **intellectual disability — assessment.**

7 1. ~~The department may assess~~ An intermediate care
8 facilities facility for persons with an intellectual
9 disability, as defined in section 135C.1, ~~a fee in~~ shall be
10 assessed an amount for the preceding calendar quarter, not to
11 exceed six percent of the total annual revenue of the facility
12 for the preceding fiscal year.

13 2. The assessment shall be paid by each intermediate care
14 facility for persons with an intellectual disability to the
15 department ~~in equal monthly amounts on or before the fifteenth~~
16 ~~day of each month~~ on a quarterly basis. ~~The department may~~
17 ~~deduct the monthly amount from medical assistance payments to~~
18 ~~a facility described in subsection 1.~~ ~~The amount deducted~~
19 ~~from payments shall not exceed the total amount of the~~
20 ~~assessments due~~ An intermediate care facility for persons with
21 an intellectual disability shall submit the assessment amount
22 no later than thirty days following the end of each calendar
23 quarter.

24 3. ~~Revenue from the assessments shall be credited~~ The
25 department shall collect the assessment imposed and shall
26 credit all revenues collected to the state medical assistance
27 appropriation. This revenue may be used only for services
28 for which federal financial participation under the medical
29 assistance program is available to match state funds.

30 4. If the department determines that an intermediate care
31 facility for persons with an intellectual disability has
32 underpaid or overpaid the assessment, the department shall
33 notify the intermediate care facility for persons with an
34 intellectual disability of the amount of the unpaid assessment
35 or refund due. Such payment or refund shall be due or refunded

1 within thirty days of the issuance of the notice.

2 5. An intermediate care facility for persons with an
3 intellectual disability that fails to pay the assessment within
4 the time frame specified in this section shall pay, in addition
5 to the outstanding assessment, a penalty in the amount of one
6 and five-tenths percent of the assessment amount owed for
7 each month or portion of each month the payment is overdue.
8 However, if the department determines that good cause is shown
9 for failure to comply with payment of the assessment, the
10 department shall waive the penalty or a portion of the penalty.

11 6. If an assessment has not been received by the department
12 by the last day of the third month after the payment is due,
13 the department shall suspend payment due the intermediate care
14 facility for persons with an intellectual disability under the
15 medical assistance program including payments made on behalf
16 of the medical assistance program by a Medicaid managed care
17 organization contractor.

18 7. The assessment imposed under this section constitutes
19 a debt due and owing the state and may be collected by civil
20 action, including but not limited to the filing of tax liens,
21 and any other method provided for by law.

22 8. If federal financial participation to match the
23 assessments made under subsection 1 becomes unavailable under
24 federal law, the department shall terminate the imposing of the
25 assessments beginning on the date that the federal statutory,
26 regulatory, or interpretive change takes effect.

27 ~~5-~~ 9. The department of human services may procure a sole
28 source contract to implement the provisions of this section.

29 ~~6-~~ 10. The department may adopt administrative rules under
30 section 17A.4, subsection 3, and section 17A.5, subsection 2,
31 paragraph "b", to implement this section, and any fee assessed
32 pursuant to this section against an intermediate care facility
33 for persons with an intellectual disability that is operated by
34 the state may be made retroactive to October 1, 2003.

35

DIVISION XI

1 HOSPITAL HEALTH CARE ACCESS ASSESSMENT

2 Sec. 52. REPEAL. Section 249M.5, Code 2016, is repealed.

3 Sec. 53. REVIEW OF ALTERNATIVE ASSESSMENT METHODOLOGY. The
4 department of human services shall explore alternative hospital
5 health care access assessment methodologies and shall make
6 recommendations to the governor and the general assembly by
7 December 15, 2016, regarding continuation of the hospital
8 health care access assessment program beyond July 1, 2017, and
9 an alternative assessment methodology. Any continuation of
10 the program and assessment methodology shall meet all of the
11 following guidelines:

12 1. All funds generated by the assessment shall be returned
13 to participating hospitals in the form of higher Medicaid
14 payments.

15 2. Continuation of the program and any new assessment
16 methodology shall be subject to any required federal approval.

17 3. Any new assessment methodology shall minimize the
18 negative financial impact on participating hospitals to the
19 greatest extent possible.

20 4. Any new assessment methodology shall result in at least
21 the same if not a greater aggregate financial benefit to
22 participating hospitals compared with the benefit existing
23 under the program prior to July 1, 2016.

24 5. Only participating hospitals subject to imposition
25 of the assessment shall receive a financial return from the
26 program.

27 6. Any continuation of the program shall include a means
28 of tracking the financial return to individual participating
29 hospitals.

30 7. Any quality metrics utilized by the program, if
31 continued, shall align with similar metrics being used under
32 Medicare and the state innovation model initiative process.

33 8. Any new assessment methodology shall incorporate a
34 recognition of the increased costs attributable to care and
35 services such as inpatient psychiatric care, rehabilitation

1 services, and neonatal intensive care units.

2 9. Any continuation of the program shall include oversight
3 and review by representatives of the Iowa hospital association
4 and affected hospitals to ensure appropriate implementation and
5 administration of the program.

6 Sec. 54. EFFECTIVE UPON ENACTMENT. This division of this
7 Act, being deemed of immediate importance, takes effect upon
8 enactment.

9 Sec. 55. RETROACTIVE APPLICABILITY. This division of this
10 Act is retroactively applicable to June 30, 2016.

11 DIVISION XII

12 STATE FAMILY PLANNING SERVICES PROGRAM

13 Sec. 56. STATE FAMILY PLANNING SERVICES PROGRAM —
14 ESTABLISHMENT — DISCONTINUATION OF MEDICAID FAMILY PLANNING
15 NETWORK WAIVER.

16 1. The department of human services shall discontinue the
17 Medicaid family planning network waiver effective July 1, 2016,
18 and shall instead establish a state family planning services
19 program. The state program shall replicate the eligibility
20 requirements and other provisions included in the Medicaid
21 family planning network waiver as approved by the centers for
22 Medicare and Medicaid services of the United States department
23 of health and human services in effect on June 30, 2016, but
24 shall provide for distribution of the family planning services
25 program funds in accordance with this section.

26 2. Distribution of family planning services program funds
27 shall be made to eligible applicants in the following order of
28 priority:

29 a. Public entities that provide family planning services
30 including state, county, or local community health clinics and
31 federally qualified health centers.

32 b. Nonpublic entities that, in addition to family planning
33 services, provide required primary health services as described
34 in 42 U.S.C. §254b(b)(1)(A).

35 c. Nonpublic entities that provide family planning

1 services but do not provide required primary health services as
2 described in 42 U.S.C. §254b(b)(1)(A).

3 3. Distribution of family planning services program funds
4 under this section shall be made in a manner that continues
5 access to family planning services.

6 4. Distribution of family planning services program funds
7 shall not be made to any entity that performs abortions or that
8 maintains or operates a facility where abortions are performed.
9 For the purposes of this section, "abortion" does not include
10 any of the following:

11 a. The treatment of a woman for a physical disorder,
12 physical injury, or physical illness, including a
13 life-endangering physical condition caused by or arising from
14 the pregnancy itself, that would, as certified by a physician,
15 place the woman in danger of death.

16 b. The treatment of a woman for a spontaneous abortion,
17 commonly known as a miscarriage, when not all of the products
18 of human conception are expelled.

19 5. Family planning services program funds distributed in
20 accordance with this section shall not be used for direct or
21 indirect costs, including but not limited to administrative
22 costs or expenses, overhead, employee salaries, rent, and
23 telephone and other utility costs, related to providing
24 abortions as specified in subsection 4.

25 6. The department of human services shall submit a report to
26 the governor and the general assembly, annually by January 1,
27 listing any entities that received funds pursuant to subsection
28 2, paragraph "c", and the amount and type of funds received by
29 such entities during the preceding calendar year. The report
30 shall provide a detailed explanation of how the department
31 determined that distribution of family planning services
32 program funds to such an entity, instead of to an entity
33 described in subsection 2, paragraph "a" or "b", was necessary
34 to prevent severe limitation or elimination of access to family
35 planning services in the region of the state where the entity

1 is located.

2 DIVISION XIII

3 AUTISM SUPPORT PROGRAM

4 Sec. 57. Section 135.181, subsections 1 and 2, Code 2016,
5 are amended to read as follows:

6 1. The department shall establish a board-certified
7 behavior analyst and board-certified assistant behavior
8 analyst grants program to provide grants to Iowa resident and
9 nonresident applicants who have been accepted for admission or
10 are attending a ~~board of regents~~ university, community college,
11 or an accredited private institution, within or outside the
12 state of Iowa, are enrolled in a program that is accredited
13 and meets coursework requirements to prepare the applicant
14 to be eligible for board certification as a behavior analyst
15 or assistant behavior analyst, and demonstrate financial
16 need. ~~Priority in the awarding of a grant shall be given to~~
17 applicants who are residents of Iowa.

18 2. The department, in cooperation with the department
19 of education, shall adopt rules pursuant to [chapter 17A](#) to
20 establish minimum standards for applicants to be eligible for a
21 grant that address all of the following:

22 a. Eligibility requirements for and qualifications of
23 an applicant to receive a grant. The applicant shall agree
24 to practice in the state of Iowa for a period of time, not
25 to exceed four years, as specified in the contract entered
26 into between the applicant and the department at the time the
27 grant is awarded. In addition, the applicant shall agree, as
28 specified in the contract, that during the contract period,
29 the applicant will assist in supervising an individual working
30 toward board certification as a behavior analyst or assistant
31 behavior analyst or to consult with schools and service
32 providers that provide services and supports to individuals
33 with autism.

34 b. The application process for the grant.

35 c. Criteria for preference in awarding of the grants.

1 Priority in the awarding of a grant shall be given to
2 applicants who are residents of Iowa.

3 *d.* Determination of the amount of a grant. The amount
4 of funding awarded to each applicant shall be based on the
5 applicant's enrollment status, the number of applicants, and
6 the total amount of available funds. The total amount of funds
7 awarded to an individual applicant shall not exceed fifty
8 percent of the total costs attributable to program tuition and
9 fees, annually.

10 *e.* Use of the funds awarded. Funds awarded may be used
11 to offset the costs attributable to tuition and fees for the
12 accredited behavior analyst or assistant behavior analyst
13 program.

14 Sec. 58. Section 135.181, Code 2016, is amended by adding
15 the following new subsection:

16 NEW SUBSECTION. 4. The department shall submit a report
17 to the governor and the general assembly no later than January
18 1, annually, that includes but is not limited to all of the
19 following:

20 *a.* The number of applications received for the immediately
21 preceding fiscal year.

22 *b.* The number of applications approved and the total amount
23 of funding awarded in grants in the immediately preceding
24 fiscal year.

25 *c.* The cost of administering the program in the immediately
26 preceding fiscal year.

27 *d.* Recommendations for any changes to the program.

28 Sec. 59. Section 225D.1, subsection 8, Code 2016, is amended
29 to read as follows:

30 8. "*Eligible individual*" means a child less than ~~nine~~
31 fourteen years of age who has been diagnosed with autism based
32 on a diagnostic assessment of autism, is not otherwise eligible
33 for coverage for applied behavioral analysis treatment under
34 the medical assistance program, [section 514C.28](#), or private
35 insurance coverage, and whose household income does not exceed

1 ~~four~~ five hundred percent of the federal poverty level.

2 Sec. 60. Section 225D.2, subsection 2, paragraphs c and d,
3 Code 2016, are amended to read as follows:

4 c. Notwithstanding the age limitation for an eligible
5 individual, a provision that if an eligible individual reaches
6 ~~nine~~ fourteen years of age prior to completion of the maximum
7 applied behavioral analysis treatment period specified in
8 paragraph "b", the individual may complete such treatment in
9 accordance with the individual's treatment plan, not to exceed
10 the maximum treatment period.

11 d. A graduated schedule for cost-sharing by an eligible
12 individual based on a percentage of the total benefit amount
13 expended for the eligible individual, annually. Cost-sharing
14 shall be applicable to eligible individuals with household
15 incomes at or above two hundred percent of the federal poverty
16 level in incrementally increased amounts up to a maximum of ~~ten~~
17 fifteen percent. The rules shall provide a financial hardship
18 exemption from payment of the cost-sharing based on criteria
19 established by rule of the department.

20 Sec. 61. AUTISM SUPPORT FUND — CARRYFORWARD.

21 Notwithstanding section 225D.2, moneys credited to the fund
22 that remain unexpended or unobligated at the close of the
23 fiscal year beginning July 1, 2015, shall be transferred to the
24 appropriation in this Act for medical contracts to be used for
25 the purpose of that appropriation for the succeeding fiscal
26 year.

27 Sec. 62. EFFECTIVE DATE. The section of this division
28 of this Act providing for carryforward of moneys that remain
29 unexpended or unobligated at the close of the fiscal year
30 beginning July 1, 2015, being deemed of immediate importance,
31 takes effect upon enactment.

32 Sec. 63. RETROACTIVE APPLICABILITY. The section of this
33 division of this Act providing for carryforward of moneys that
34 remain unexpended or unobligated at the close of the fiscal
35 year beginning July 1, 2015, is retroactively applicable to

1 July 1, 2015.

2 DIVISION XIV

3 IOWA HIGH QUALITY HEALTH CARE INITIATIVE CONSUMER PROTECTION
4 OUTCOME ACHIEVEMENT AND PROGRAM INTEGRITY

5 Sec. 64. IOWA HIGH QUALITY HEALTH CARE INITIATIVE —
6 LEGISLATIVE GOALS. The goals of the Iowa high quality health
7 care initiative are to improve quality of and access to care
8 for Medicaid members, promote accountability for outcomes, and
9 create a more predictable and sustainable Medicaid budget. The
10 main focus in moving to managed care is to provide the Medicaid
11 members with the opportunity to realize improved health quality
12 and outcomes through wellness initiatives, preventive care, and
13 coordinated care.

14 Sec. 65. IOWA HIGH QUALITY HEALTH CARE INITIATIVE —
15 DEPARTMENT OF HUMAN SERVICES — REPORTS. The department of
16 human services shall submit to the chairpersons and ranking
17 members of the human resources committees of the senate and the
18 house of representatives and to the chairpersons and ranking
19 members of the joint appropriations subcommittee on health
20 and human services, quarterly reports, and an annual report
21 beginning December 15, 2016, and annually by December 15,
22 thereafter, regarding Medicaid program consumer protections,
23 outcome achievement, and program integrity as specified in
24 this division. The reports shall be based on and updated to
25 include the most recent information available. The reports
26 shall include an executive summary of the information and
27 data compiled, an analysis of the information and data,
28 and any trends or issues identified through such analysis,
29 to the extent such information is not otherwise considered
30 confidential or protected information pursuant to federal or
31 state law. The joint appropriations subcommittee on health and
32 human services shall dedicate a meeting of the subcommittee
33 during the subsequent session of the general assembly to review
34 of the annual report.

35 1. CONSUMER PROTECTION.

1 The general assembly recognizes the need for ongoing review
2 of Medicaid member engagement with and feedback regarding
3 Medicaid managed care. The Iowa high quality health care
4 initiative shall ensure access to medically necessary services
5 and shall ensure that Medicaid members are fully engaged in
6 their own health care in order to achieve overall positive
7 health outcomes. The consumer protection component of the
8 reports submitted as required under this section shall be based
9 on all of the following reports relating to member and provider
10 services:

11 a. Member enrollment and disenrollment.

12 b. Member grievances and appeals including all of the
13 following:

14 (1) The percentage of grievances and appeals resolved
15 timely.

16 (2) The number of grievances and appeals received.

17 c. Member call center performance including the service
18 level for members, providers, and pharmacy.

19 d. Prior authorization denials and modifications including
20 all of the following:

21 (1) The percentage of prior authorizations approved,
22 denied, and modified.

23 (2) The percentage of prior authorizations processed within
24 required time frames.

25 e. Provider network access including key gaps in provider
26 coverage based on contract time and distance standards.

27 f. Care coordination, including the ratio of members to care
28 coordinators.

29 g. Level of care and functional assessments, including the
30 percentage of level of care assessments completed timely.

31 h. Population-specific reporting including all of the
32 following:

33 (1) General population.

34 (2) Special needs.

35 (3) Behavioral health.

1 (4) Elderly.

2 2. OUTCOME ACHIEVEMENT.

3 The primary focus of the general assembly in moving to
4 Medicaid managed care is to improve the quality of care and
5 outcomes for Medicaid members. The state has demonstrated
6 how preventive services and the coordination of care for all
7 of a Medicaid member's treatment significantly improve the
8 health and well-being of the state's most vulnerable citizens.
9 In order to ensure continued improvement, ongoing review of
10 member outcomes as well as of the process that supports a
11 strong provider network is necessary. The outcome achievement
12 component of the reports submitted as required under this
13 section shall be based on all of the following reports relating
14 to member health outcomes and contract management outcomes:

15 a. Contract management including all of the following:

16 (1) Claims processing including all of the following:

17 (a) The percentage of claims paid and denied.

18 (b) The percentage of claims adjudicated timely.

19 (2) Encounter data including all of the following:

20 (a) Timeliness.

21 (b) Completeness.

22 (c) Accuracy.

23 (3) Value-based purchasing (VBP) enrollment including the
24 percentage of members covered by a VBP arrangement.

25 (4) Financial information including all of the following:

26 (a) Managed care organization (MCO) capitation payments.

27 (b) The medical loss ratio.

28 (c) Program cost savings.

29 b. Member health outcomes including all of the following:

30 (1) Annual healthcare effectiveness and information set
31 (HEDIS) performance.

32 (2) Other quality measures including all of the following:

33 (a) Behavioral health.

34 (b) Children's health.

35 (c) Prenatal and birth outcomes.

- 1 (d) Chronic condition management.
- 2 (e) Adult preventative care.
- 3 (3) Value index score (VIS) performance.
- 4 (4) Annual consumer assessment of healthcare providers and
- 5 systems (CAHPS) performance.
- 6 (5) Utilization information including all of the following:
- 7 (a) Inpatient hospital admissions and potential
- 8 preventative admissions.
- 9 (b) Readmissions.
- 10 (c) Outpatient visits.
- 11 (d) Emergency department visits and potentially preventable
- 12 emergency department visits.

13 3. PROGRAM INTEGRITY.

14 The Medicaid program has traditionally included

15 comprehensive oversight and program integrity controls.

16 Under Medicaid managed care, federal, state, and contractual

17 safeguards will continue to be incorporated to prevent, detect,

18 and eliminate provider fraud, waste, and abuse to maintain a

19 sustainable Medicaid program. The program integrity component

20 of the reports submitted as required under this section shall

21 be based on all of the following reports relating to program

22 integrity:

- 23 a. The level of fraud, waste, and abuse identified by the
- 24 MCOs.
- 25 b. Managed care organization adherence to the program
- 26 integrity plan.
- 27 c. Notification of the state by the MCOs regarding fraud,
- 28 waste, and abuse.
- 29 d. The impact of program activities on capitation payments.
- 30 e. Enrollment and payment information including all of the
- 31 following:
 - 32 (1) Eligibility.
 - 33 (2) Third-party liability.
- 34 f. Managed care organization reserves compared to minimum
- 35 reserves required by the insurance division of the department

1 of commerce.

2 g. A summary report by the insurance division of the
3 department of commerce including information relating to health
4 maintenance organization licensure, the annual independent
5 audit, insurance division reporting, and reinsurance.

6 4. INCLUSION OF INFORMATION FROM OTHER OVERSIGHT
7 ENTITIES. The council on human services, the medical
8 assistance advisory council, the hawk-i board, the mental
9 health and disability services commission, and the office
10 of long-term care ombudsman shall regularly review Medicaid
11 managed care as it relates to the entity's respective statutory
12 duties. These entities shall submit executive summaries of
13 pertinent information regarding their deliberations during the
14 prior year relating to Medicaid managed care to the department
15 of human services no later than November 15, annually, for
16 inclusion in the annual report submitted as required under this
17 section.

18 Sec. 66. IOWA HIGH QUALITY HEALTH CARE INITIATIVE —
19 ADDITIONAL OVERSIGHT.

20 1. The council on human services, the medical assistance
21 advisory council, and the hawk-i board shall submit to the
22 chairpersons and ranking members of the human resources
23 committees of the senate and the house of representatives
24 and to the chairpersons and ranking members of the joint
25 appropriations subcommittee on health and human services, on a
26 quarterly basis, minutes of their respective meetings during
27 which the council or board addressed Medicaid managed care.

28 2. The director of human services shall submit the
29 compilation of the input and recommendations from stakeholders
30 and Medicaid members attending the public meetings convened
31 pursuant to 2015 Iowa Acts, chapter 137, section 63, to
32 the chairpersons and ranking members of the human resources
33 committees of the senate and the house of representatives
34 and to the chairpersons and ranking members of the joint
35 appropriations subcommittee on health and human services, on

1 a quarterly basis.

2 Sec. 67. IOWA HIGH QUALITY HEALTH CARE INITIATIVE —
3 POSTING OF PUBLIC INFORMATION. The department of human
4 services shall post information from all of the following
5 reports, as the information becomes available and to the extent
6 such information is not otherwise considered confidential or
7 protected information pursuant to federal or state law, on the
8 Iowa health link internet site:

9 1. CONSUMER PROTECTION:

10 a. Member enrollment and disenrollment.

11 b. Member grievances and appeals including all of the
12 following:

13 (1) The percentage of grievances and appeals resolved
14 timely.

15 (2) The number of grievances and appeals received.

16 c. Member call center performance including the service
17 level for members, providers, and pharmacy.

18 d. Prior authorization denials and modifications including
19 all of the following:

20 (1) The percentage of prior authorizations approved,
21 denied, and modified.

22 (2) The percentage of prior authorizations processed within
23 required time frames.

24 e. Provider network access including key gaps in provider
25 coverage based on contract time and distance standards.

26 f. Care coordination, including the ratio of members to care
27 coordinators.

28 g. Level of care and functional assessments, including the
29 percentage of level of care assessments completed timely.

30 h. Population-specific reporting including all of the
31 following:

32 (1) General population.

33 (2) Special needs.

34 (3) Behavioral health.

35 (4) Elderly.

- 1 2. OUTCOME ACHIEVEMENT:
- 2 a. Contract management:
- 3 (1) Claims processing including all of the following:
- 4 (a) The percentage of claims paid and denied.
- 5 (b) The percentage of claims adjudicated timely.
- 6 (2) Encounter data including all of the following:
- 7 (a) Timeliness.
- 8 (b) Completeness.
- 9 (c) Accuracy.
- 10 (3) Value-based purchasing (VBP) enrollment including the
- 11 percentage of members covered by a VBP arrangement.
- 12 (4) Financial information including all of the following:
- 13 (a) Managed care organization capitation payments.
- 14 (b) Medical loss ratio.
- 15 (c) Program cost savings.
- 16 b. Member health outcomes including all of the following:
- 17 (1) Annual healthcare effectiveness and information set
- 18 (HEDIS) performance.
- 19 (2) Other quality measures including all of the following:
- 20 (a) Behavioral health.
- 21 (b) Children's health.
- 22 (c) Prenatal and birth outcomes.
- 23 (d) Chronic condition management.
- 24 (e) Adult preventative care.
- 25 (3) Value index score (VIS) performance.
- 26 (4) Annual consumer assessment of healthcare providers and
- 27 systems (CAHPS) performance.
- 28 (5) Utilization information including all of the following:
- 29 (a) Inpatient admissions and potential preventative
- 30 admissions.
- 31 (b) Readmissions.
- 32 (c) Outpatient visits.
- 33 (d) Emergency department visits and potentially preventable
- 34 emergency department visits.
- 35 3. PROGRAM INTEGRITY:

1 a. The level of fraud, waste, and abuse identified by the
2 MCOs.

3 b. Managed care organization adherence to the program
4 integrity plan.

5 c. Notification of the state by the MCOs regarding fraud,
6 waste, and abuse.

7 d. The impact of program activities on capitation payments.

8 e. Enrollment and payment information including all of the
9 following:

10 (1) Eligibility.

11 (2) Third-party liability.

12 f. Managed care organization reserves compared to minimum
13 reserves required by the insurance division of the department
14 of commerce.

15 g. A summary report by the insurance division of the
16 department of commerce including information relating to health
17 maintenance organization licensure, the annual independent
18 audit, insurance division reporting, and reinsurance.

19 DIVISION XV

20 CHILDREN'S MENTAL HEALTH AND WELL-BEING

21 Sec. 68. CHILDREN'S MENTAL HEALTH CRISIS SERVICES —
22 PLANNING GRANTS.

23 1. The department of human services shall establish
24 a request for proposals process, in cooperation with the
25 departments of public health and education and the judicial
26 branch, which shall be based upon recommendations for
27 children's mental health crisis services described in the
28 children's mental health and well-being workgroup final report
29 submitted to the department on December 15, 2015.

30 2. Planning grants shall be awarded to two lead entities.
31 Each lead entity should be a member of a specifically
32 designated coalition of three to four other entities that
33 propose to serve different geographically defined areas of
34 the state, but a lead entity shall not be a mental health and
35 disability services region.

1 3. The request for proposals shall require each grantee to
2 develop a plan for children's mental health crisis services for
3 the grantee's defined geographic area that includes all of the
4 following:

5 a. Identification of the existing children's mental health
6 crisis services in the defined area.

7 b. Identification of gaps in children's mental health
8 crisis services in the defined area.

9 c. A plan for collection of data that demonstrates the
10 effects of children's mental health crisis services through the
11 collection of outcome data and surveys of the children affected
12 and their families.

13 d. A method for using federal, state, and other funding
14 including funding currently available, to implement and support
15 children's mental health crisis services.

16 e. Utilization of collaborative processes developed from
17 the recommendations from the children's mental health and
18 well-being workgroup final report submitted to the department
19 on December 15, 2015.

20 f. A recommendation for any additional state funding needed
21 to establish a children's mental health crisis service system
22 in the defined area.

23 g. A recommendation for statewide standard requirements for
24 children's mental health crisis services, as defined in the
25 children's mental health and well-being workgroup final report
26 submitted to the department of human services on December 15,
27 2015, including but not limited to all of the following:

28 (1) Standardized primary care practitioner screenings.

29 (2) Standardized mental health crisis screenings.

30 (3) Standardized mental health and substance use disorder
31 assessments.

32 (4) Requirements for certain inpatient psychiatric
33 hospitals and psychiatric medical institutions for children to
34 accept and treat all children regardless of the acuity of their
35 condition.

1 4. Each grantee shall submit a report to the department by
2 December 15, 2016. The department shall combine the essentials
3 of each report and shall submit a report to the general
4 assembly by January 15, 2017, regarding the department's
5 conclusions and recommendations.

6 Sec. 69. CHILDREN'S WELL-BEING LEARNING LABS. The
7 department of human services, utilizing existing departmental
8 resources and with the continued assistance of a private child
9 welfare foundation focused on improving child well-being, shall
10 study and collect data on emerging, collaborative efforts
11 in existing programs engaged in addressing well-being for
12 children with complex needs and their families in communities
13 across the state. The department shall establish guidelines
14 based upon recommendations in the children's mental health and
15 well-being workgroup final report submitted to the department
16 on December 15, 2015, to select three to five such programs
17 to be designated learning labs to enable the department
18 to engage in a multi-site learning process during the 2016
19 calendar year with a goal of creating an expansive structured
20 learning network. The department shall submit a report with
21 recommendations including lessons learned, suggested program
22 design refinements, and implications for funding, policy
23 changes, and best practices to the general assembly by January
24 15, 2017.

25 Sec. 70. DEPARTMENT OF HUMAN SERVICES — ADDITIONAL
26 STUDY REPORTS. The department of human services shall, in
27 consultation with the department of public health, the mental
28 health and disability services commission, and the mental
29 health planning council, submit a report with recommendations
30 to the general assembly by December 15, 2016, regarding all of
31 the following:

32 1. The creation and implementation of a statewide
33 children's mental health crisis service system to include but
34 not be limited to an inventory of all current children's mental
35 health crisis service systems in the state including children's

1 mental health crisis service system telephone lines. The
2 report shall include recommendations regarding proposed changes
3 to improve the effectiveness of and access to children's mental
4 health crisis services.

5 2. The development and implementation of a children's
6 mental health public education and awareness campaign that
7 targets the reduction of stigma for children with mental
8 illness and that supports children with mental illness and
9 their families in seeking effective treatment. The plan shall
10 include potential methods for funding such a campaign.

11 Sec. 71. CHILDREN'S MENTAL HEALTH AND WELL-BEING ADVISORY
12 COMMITTEE. The department of human services shall create and
13 provide support to a children's mental health and well-being
14 advisory committee to continue the coordinated efforts of
15 the children's mental health subcommittee and the children's
16 well-being subcommittee of the children's mental health
17 and well-being workgroup. Consideration shall be given to
18 continued service by members of the children's mental health
19 and well-being workgroup created pursuant to 2015 Iowa Acts,
20 ch. 137, and representatives from the departments of human
21 services, public health, and education; the judicial branch;
22 and other appropriate stakeholders designated by the director.
23 The advisory committee shall do all of the following:

24 1. Provide guidance regarding implementation of the
25 recommendations in the children's mental health and well-being
26 workgroup final report submitted to the department on December
27 15, 2015, and subsequent reports required by this Act.

28 2. Select and study additional children's well-being
29 learning labs to assure a continued commitment to joint
30 learning and comparison for all learning lab sites.

31 DIVISION XVI

32 OPIOID ANTAGONIST REVISION

33 Sec. 72. Section 147A.18, subsection 5, as enacted by 2016
34 Iowa Acts, Senate File 2218, section 3, is amended to read as
35 follows:

1 5. The department ~~shall~~ may adopt rules pursuant to chapter
2 17A to implement and administer this section, ~~including but~~
3 ~~not limited to standards and procedures for the prescription,~~
4 ~~distribution, storage, replacement, and administration of~~
5 ~~opioid antagonists, and for the training and authorization~~
6 ~~to be required for first responders to administer an opioid~~
7 ~~antagonist.~~

8 Sec. 73. OPIOID ANTAGONIST IMPLEMENTATION
9 CONTINGENCY. 2016 Iowa Acts, Senate File 2218, section
10 4, is amended by striking the section.

11 DIVISION XVII

12 NURSING GRANT PROGRAMS

13 Sec. 74. Section 135.178, Code 2016, is amended to read as
14 follows:

15 **135.178 Nurse residency state matching grants program —**
16 ~~repeal.~~

17 ~~1.~~ The department shall establish a nurse residency state
18 matching grants program to provide matching state funding
19 to sponsors of nurse residency programs in this state to
20 establish, expand, or support nurse residency programs that
21 meet standards adopted by rule of the department. Funding for
22 the program may be provided through the health care workforce
23 shortage fund or the nurse residency state matching grants
24 program account created in [section 135.175](#). The department,
25 in cooperation with the Iowa board of nursing, the department
26 of education, Iowa institutions of higher education with board
27 of nursing-approved programs to educate nurses, and the Iowa
28 nurses association, shall adopt rules pursuant to [chapter 17A](#)
29 to establish minimum standards for nurse residency programs
30 to be eligible for a matching grant that address all of the
31 following:

32 ~~a.~~ 1. Eligibility requirements for and qualifications of
33 a sponsor of a nurse residency program to receive a grant,
34 including that the program includes both rural and urban
35 components.

1 ~~b.~~ 2. The application process for the grant.

2 ~~c.~~ 3. Criteria for preference in awarding of the grants.

3 ~~d.~~ 4. Determination of the amount of a grant.

4 ~~e.~~ 5. Use of the funds awarded. Funds may be used to pay
5 the costs of establishing, expanding, or supporting a nurse
6 residency program as specified in [this section](#), including but
7 not limited to the costs associated with residency stipends and
8 nursing faculty stipends.

9 ~~2. [This section](#) is repealed June 30, 2016.~~

10 Sec. 75. Section 261.129, Code 2016, is amended to read as
11 follows:

12 **261.129 Iowa needs nurses now initiative —repeal.**

13 1. *Nurse educator incentive payment program.*

14 a. The commission shall establish a nurse educator
15 incentive payment program. Funding for the program may be
16 provided through the health care workforce shortage fund or the
17 health care professional and Iowa needs nurses now initiative
18 account created in [section 135.175](#). For the purposes of this
19 subsection, "nurse educator" means a registered nurse who holds
20 a master's degree or doctorate degree and is employed as a
21 faculty member who teaches nursing in a nursing education
22 program as provided in [655 IAC 2.6](#) at a community college, an
23 accredited private institution, or an institution of higher
24 education governed by the state board of regents.

25 b. The program shall consist of incentive payments to
26 recruit and retain nurse educators. The program shall provide
27 for incentive payments of up to twenty thousand dollars for a
28 nurse educator who remains teaching in a qualifying teaching
29 position for a period of not less than four consecutive
30 academic years.

31 c. The nurse educator and the commission shall enter into an
32 agreement specifying the obligations of the nurse educator and
33 the commission. If the nurse educator leaves the qualifying
34 teaching position prior to teaching for four consecutive
35 academic years, the nurse educator shall be liable to repay

1 the incentive payment amount to the state, plus interest as
2 specified by rule. However, if the nurse educator leaves
3 the qualifying teaching position involuntarily, the nurse
4 educator shall be liable to repay only a pro rata amount of the
5 incentive payment based on incompleting years of service.

6 *d.* The commission, in consultation with the department
7 of public health, the board of nursing, the department of
8 education, and the Iowa nurses association, shall adopt rules
9 pursuant to [chapter 17A](#) relating to the establishment and
10 administration of the nurse educator incentive payment program.
11 The rules shall include provisions specifying what constitutes
12 a qualifying teaching position.

13 *2. Nursing faculty fellowship program.*

14 *a.* The commission shall establish a nursing faculty
15 fellowship program to provide funds to nursing schools in the
16 state, including but not limited to nursing schools located at
17 community colleges, for fellowships for individuals employed
18 in qualifying positions on the nursing faculty. Funding for
19 the program may be provided through the health care workforce
20 shortage fund or the health care professional and the Iowa
21 needs nurses now initiative account created in [section 135.175](#).
22 The program shall be designed to assist nursing schools in
23 filling vacancies in qualifying positions throughout the state.

24 *b.* The commission, in consultation with the department
25 of public health, the board of nursing, the department of
26 education, and the Iowa nurses association, and in cooperation
27 with nursing schools throughout the state, shall develop a
28 distribution formula which shall provide that no more than
29 thirty percent of the available moneys are awarded to a single
30 nursing school. Additionally, the program shall limit funding
31 for a qualifying position in a nursing school to no more than
32 ten thousand dollars per year for up to three years.

33 *c.* The commission, in consultation with the department
34 of public health, the board of nursing, the department of
35 education, and the Iowa nurses association, shall adopt

1 rules pursuant to [chapter 17A](#) to administer the program. The
2 rules shall include provisions specifying what constitutes a
3 qualifying position at a nursing school.

4 *d.* In determining eligibility for a fellowship, the
5 commission shall consider all of the following:

6 (1) The length of time a qualifying position has gone
7 unfilled at a nursing school.

8 (2) Documented recruiting efforts by a nursing school.

9 (3) The geographic location of a nursing school.

10 (4) The type of nursing program offered at the nursing
11 school, including associate, bachelor's, master's, or doctoral
12 degrees in nursing, and the need for the specific nursing
13 program in the state.

14 3. *Nurse educator scholarship program.*

15 *a.* The commission shall establish a nurse educator
16 scholarship program. Funding for the program may be provided
17 through the health care workforce shortage fund or the health
18 care professional and the Iowa needs nurses now initiative
19 account created in [section 135.175](#). The goal of the nurse
20 educator scholarship program is to address the waiting list of
21 qualified applicants to Iowa's nursing schools by providing
22 incentives for the training of additional nursing educators.
23 For the purposes of [this subsection](#), "nurse educator" means
24 a registered nurse who holds a master's degree or doctorate
25 degree and is employed as a faculty member who teaches nursing
26 in a nursing education program as provided in [655 IAC 2.6](#) at
27 a community college, an accredited private institution, or an
28 institution of higher education governed by the state board of
29 regents.

30 *b.* The program shall consist of scholarships to further
31 advance the education of nurses to become nurse educators. The
32 program shall provide for scholarship payments in an amount
33 established by rule for students who are preparing to teach in
34 qualifying teaching positions.

35 *c.* The commission, in consultation with the department

1 of public health, the board of nursing, the department of
2 education, and the Iowa nurses association, shall adopt rules
3 pursuant to [chapter 17A](#) relating to the establishment and
4 administration of the nurse educator scholarship program. The
5 rules shall include provisions specifying what constitutes a
6 qualifying teaching position and the amount of any scholarship.

7 4. *Nurse educator scholarship-in-exchange-for-service*
8 *program.*

9 a. The commission shall establish a nurse educator
10 scholarship-in-exchange-for-service program. Funding for the
11 program may be provided through the health care workforce
12 shortage fund or the health care professional and Iowa needs
13 nurses now initiative account created in [section 135.175](#). The
14 goal of the nurse educator scholarship-in-exchange-for-service
15 program is to address the waiting list of qualified applicants
16 to Iowa's nursing schools by providing incentives for the
17 education of additional nursing educators. For the purposes
18 of [this subsection](#), "nurse educator" means a registered nurse
19 who holds a master's degree or doctorate degree and is employed
20 as a faculty member who teaches nursing in a nursing education
21 program as provided in [655 IAC 2.6](#) at a community college, an
22 accredited private institution, or an institution of higher
23 education governed by the state board of regents.

24 b. The program shall consist of scholarships to further
25 advance the education of nurses to become nurse educators. The
26 program shall provide for scholarship-in-exchange-for-service
27 payments in an amount established by rule for students who
28 are preparing to teach in qualifying teaching positions for a
29 period of not less than four consecutive academic years.

30 c. The scholarship-in-exchange-for-service recipient
31 and the commission shall enter into an agreement specifying
32 the obligations of the applicant and the commission.

33 If the nurse educator leaves the qualifying teaching
34 position prior to teaching for four consecutive academic
35 years, the nurse educator shall be liable to repay the

1 scholarship-in-exchange-for-service amount to the state plus
2 interest as specified by rule. However, if the nurse educator
3 leaves the qualified teaching position involuntarily, the nurse
4 educator shall be liable to repay only a pro rata amount of the
5 scholarship based on incomplete years of service.

6 *d.* The receipt of a nurse educator
7 scholarship-in-exchange-for-service shall not impact
8 eligibility of an individual for other financial incentives
9 including but not limited to loan forgiveness programs.

10 *e.* The commission, in consultation with the department
11 of public health, the board of nursing, the department
12 of education, and the Iowa nurses association, shall
13 adopt rules pursuant to [chapter 17A](#) relating to the
14 establishment and administration of the nurse educator
15 scholarship-in-exchange-for-service program. The rules
16 shall include the provisions specifying what constitutes
17 a qualifying teaching position and the amount of any
18 scholarship-in-exchange-for-service.

19 ~~5. *Repeal.* [This section](#) is repealed June 30, 2016.~~

20 Sec. 76. EFFECTIVE UPON ENACTMENT. This division of this
21 Act, being deemed of immediate importance, takes effect upon
22 enactment.

23 Sec. 77. RETROACTIVE APPLICABILITY. This division of this
24 Act is retroactively applicable to June 30, 2016.

25 DIVISION XVIII

26 NON-STATE GOVERNMENT-OWNED NURSING FACILITY UPPER PAYMENT LIMIT
27 SUPPLEMENTAL PAYMENT PROGRAM

28 Sec. 78. Section 249L.2, subsection 6, Code 2016, is amended
29 to read as follows:

30 6. "*Nursing facility*" means a licensed nursing facility as
31 defined in [section 135C.1](#) that is a freestanding facility or
32 a nursing facility operated by a hospital licensed pursuant
33 to [chapter 135B](#), but does not include a distinct-part skilled
34 nursing unit or a swing-bed unit operated by a hospital, or
35 a nursing facility owned by the state or federal government

1 ~~or other governmental unit.~~ "Nursing facility" includes a
2 non-state government-owned nursing facility if the nursing
3 facility participates in the non-state government-owned nursing
4 facility upper payment limit supplemental payment program.

5 Sec. 79. NON-STATE GOVERNMENT-OWNED NURSING FACILITY UPPER
6 PAYMENT LIMIT SUPPLEMENTAL PAYMENT PROGRAM.

7 1. The department of human services shall submit to the
8 centers for Medicare and Medicaid services (CMS) of the United
9 States department of health and human services, no later
10 than June 30, 2016, a Medicaid state plan amendment to allow
11 qualifying non-state government-owned nursing facilities to
12 receive a supplemental payment in accordance with the upper
13 payment limit requirements pursuant to 42 C.F.R. §447.272. The
14 supplemental payment shall be in addition to the greater of the
15 Medicaid fee-for-service per diem reimbursement rate or the
16 per diem payment established for the nursing facility under a
17 Medicaid managed care contract.

18 2. At a minimum, the Medicaid state plan amendment shall
19 provide for all of the following:

20 a. A non-state governmental entity shall provide the state
21 share of the expected supplemental payment in the form of an
22 intergovernmental transfer to the state.

23 b. The state shall claim federal matching funds and shall
24 make supplemental payments to eligible non-state governmental
25 entities based on the supplemental amount as calculated by
26 the state for each nursing facility for which a non-state
27 governmental entity owns the nursing facility's license.

28 c. The supplemental payment program shall be budget neutral
29 to the state. No general fund revenue shall be expended under
30 the program including for costs of administration. If payments
31 under the program result in overpayment to a nursing facility,
32 or if CMS disallows federal participation related to a nursing
33 facility's receipt or use of supplemental payments authorized
34 under the program, the state may recoup an amount equivalent
35 to the amount of supplemental payments overpaid or disallowed.

1 Supplemental payments shall be subject to any adjustment
2 for payments made in error, including but not limited to
3 adjustments made by state or federal law, and the state may
4 recoup an amount equivalent to any such adjustment.

5 d. A nursing facility participating in the program shall
6 notify the state of any changes in ownership that may affect
7 the nursing facility's continued eligibility for the program
8 within thirty days of any such change.

9 e. A portion of the supplemental payment paid to a
10 participating nursing facility, not to exceed five percent,
11 annually, may be used to pay contingent fees, consulting fees,
12 or legal fees associated with the nursing facility's receipt
13 of the supplemental funds, and any such expenditures shall be
14 reported to the department of human services.

15 f. The supplemental payment paid to a participating nursing
16 facility shall only be used as specified in state and federal
17 law. Supplemental payments paid to a participating nursing
18 facility shall only be used as follows:

19 (1) A portion of the amount received may be used for nursing
20 facility quality improvement initiatives including but not
21 limited to educational scholarships and nonmandatory training.
22 Priority in the awarding of contracts for such training shall
23 be for Iowa-based organizations.

24 (2) A portion of the amount received may be used for nursing
25 facility remodeling or renovation. Priority in the awarding
26 of contracts for such remodeling or renovations shall be for
27 Iowa-based organizations and skilled laborers.

28 (3) A portion of the amount received may be used for health
29 information technology infrastructure and software. Priority
30 in the awarding of contracts for such health information
31 technology infrastructure and software shall be for Iowa-based
32 organizations.

33 (4) A portion of the amount received may be used for
34 endowments to offset costs associated with maintenance of
35 hospitals licensed under chapter 135B and nursing facilities

1 licensed under chapter 135C.

2 (5) A portion of the amount received may be used for
3 improved care coordination between participating nursing
4 facilities and hospitals.

5 g. A non-state governmental entity shall only be eligible
6 for supplemental payments attributable to up to 10 percent of
7 the non-state government-owned nursing facilities licensed in
8 the state.

9 3. Following receipt of approval and implementation of the
10 program, the department shall submit a report to the governor
11 and the general assembly, annually, on or before December 15,
12 regarding the program. The report shall include, at a minimum,
13 the name and location of participating non-state governmental
14 entities and the non-state government-owned nursing facilities
15 with which the non-state governmental entities have partnered
16 to participate in the program; the amount of the matching
17 funds provided by each non-state governmental entity; the net
18 supplemental payment amount received by each participating
19 non-governmental entity and non-state government-owned nursing
20 facility; and the amount expended for each of the specified
21 categories of approved expenditure.

22 4. As used in this section:

23 a. "Non-state governmental entity" means a hospital
24 authority, hospital district, health care district, city, or
25 county.

26 b. "Non-state government-owned nursing facility" means a
27 nursing facility for which a non-state governmental entity
28 holds the nursing facility's license and is party to the
29 nursing facility's Medicaid contract.

30 Sec. 80. EFFECTIVE UPON ENACTMENT. This division of this
31 Act, being deemed of immediate importance, takes effect upon
32 enactment.

33 Sec. 81. CONTINGENT IMPLEMENTATION. The section of this
34 division of this Act amending section 249L.2 shall only be
35 implemented upon receipt by the department of human services

1 of approval of the Medicaid state plan amendment by the
2 centers for Medicare and Medicaid services of the United States
3 department of health and human services.

4 DIVISION XIX

5 CAREGIVER DESIGNATION

6 Sec. 82. NEW SECTION. 144E.1 Definitions.

7 As used in this chapter, unless the context otherwise
8 requires:

9 1. "*After-care assistance*" means any assistance provided
10 by a caregiver to a patient following the patient's discharge
11 from a hospital that is related to the patient's condition
12 at the time of discharge, including but not limited to
13 assisting with basic activities of daily living, assisting
14 with instrumental activities of daily living, and performing
15 other tasks including but not limited to managing wound care,
16 assisting in the administering of medications, and operating
17 medical equipment, as determined to be appropriate by the
18 patient's discharging physician or other licensed health care
19 professional.

20 2. "*Caregiver*" means any individual designated as a
21 caregiver by a patient who provides after-care assistance to a
22 patient in the patient's residence. "*Caregiver*" includes but is
23 not limited to a relative, spouse, partner, friend, or neighbor
24 who has a significant relationship with the patient.

25 3. "*Discharge*" means a patient's exit or release from a
26 hospital to the patient's residence following an inpatient
27 admission.

28 4. "*Entry*" means a patient's admission into a hospital for
29 the purposes of receiving inpatient medical care.

30 5. "*Facility*" means a health care facility as defined in
31 section 135C.1, an elder group home as defined in section
32 231B.1, or an assisted living program as defined in section
33 231C.2.

34 6. "*Hospital*" means a licensed hospital as defined in
35 section 135B.1.

1 7. "Residence" means the dwelling that the patient considers
2 to be the patient's home. "Residence" does not include any
3 rehabilitation facility, hospital, nursing home, assisted
4 living facility, or group home licensed by the department of
5 inspections and appeals.

6 Sec. 83. NEW SECTION. 144E.2 Caregiver — opportunity to
7 designate.

8 1. a. A hospital shall provide each patient or, if
9 applicable, the patient's legal guardian with an opportunity
10 to designate at least one caregiver within twenty-four hours
11 following the patient's entry into a hospital, and prior to
12 the patient's discharge or transfer to another hospital or
13 facility.

14 b. If the patient is unconscious or otherwise incapacitated
15 upon entry into the hospital, the hospital shall provide the
16 patient or the patient's legal guardian with an opportunity to
17 designate a caregiver within twenty-four hours following the
18 patient's recovery of consciousness or capacity.

19 c. If the patient or legal guardian declines to designate
20 a caregiver, the hospital shall promptly document this
21 declination in the patient's medical record.

22 d. If the patient or the patient's legal guardian designates
23 an individual as a caregiver, all of the following shall apply:

24 (1) The hospital shall promptly request the written consent
25 of the patient or the patient's legal guardian to release
26 medical information to the patient's caregiver following the
27 hospital's established procedures for releasing personal health
28 information and in compliance with all federal and state
29 laws. If the patient or the patient's legal guardian declines
30 to consent to release medical information to the patient's
31 caregiver, the hospital shall not be required to provide notice
32 to the caregiver under section 144E.3 or to provide information
33 contained in the patient's discharge plan to the caregiver
34 under section 144E.4.

35 (2) The hospital shall record the patient's designation of

1 caregiver, the relationship of the caregiver to the patient,
2 and the name, telephone number, and address of the patient's
3 caregiver in the patient's medical record.

4 e. A patient or the patient's legal guardian may elect to
5 change the designation of the patient's caregiver at any time,
6 and the hospital shall record such change in the patient's
7 medical record prior to the patient's discharge.

8 2. The designation of a caregiver by a patient or a
9 patient's legal guardian does not obligate the designated
10 individual to perform any after-care assistance for the
11 patient.

12 3. This section shall not be construed to require a patient
13 or a patient's legal guardian to designate any individual as a
14 caregiver.

15 Sec. 84. NEW SECTION. 144E.3 **Notification of caregiver.**

16 A hospital shall notify the patient's caregiver of the
17 patient's discharge or transfer to another hospital or facility
18 as soon as possible upon issuance of a discharge or transfer
19 order by the patient's attending physician and prior to the
20 patient's actual discharge or transfer to another hospital or
21 facility. If the hospital is unable to contact the caregiver,
22 the lack of contact shall not interfere with, delay, or
23 otherwise affect the medical care provided to the patient, or
24 an appropriate discharge or transfer of the patient.

25 Sec. 85. NEW SECTION. 144E.4 **Instructions to caregiver.**

26 1. a. As soon as possible and prior to a patient's
27 discharge from a hospital, the hospital shall consult with the
28 caregiver along with the patient regarding the caregiver's
29 capabilities and limitations and issue a discharge plan that
30 describes the patient's after-care assistance needs at the
31 patient's residence. At a minimum, the discharge plan shall
32 include:

33 (1) The name and contact information of the caregiver.

34 (2) A description of all after-care assistance tasks
35 necessary to maintain the patient's ability to reside at the

1 patient's residence.

2 (3) Contact information for any health care, community
3 resource, and long-term services and supports necessary to
4 successfully carry out the patient's discharge plan.

5 b. If the hospital is unable to contact the caregiver,
6 the lack of contact shall not interfere with, delay, or
7 otherwise affect the medical care provided to the patient, or
8 an appropriate discharge or transfer of the patient.

9 2. The hospital issuing the discharge plan shall offer
10 to provide a caregiver with instructions for all after-care
11 assistance tasks described in the discharge plan. At a
12 minimum, this instruction shall include:

13 a. A live demonstration or video instruction of the
14 after-care tasks, performed by a hospital employee or
15 an individual with whom the hospital has a contractual
16 relationship, who has the appropriate education and competency
17 in the task to be performed and is authorized to perform the
18 task, in a culturally-competent manner and in accordance with
19 the hospital's requirements to provide language access services
20 under state and federal law.

21 b. An opportunity for the caregiver to ask questions about
22 the after-care assistance tasks.

23 c. Answers to the caregiver's questions provided in
24 a culturally-competent manner and in accordance with the
25 hospital's requirements to provide language access services
26 under state and federal law.

27 Sec. 86. NEW SECTION. 144E.5 Adoption of rules.

28 The department of inspections and appeals, in consultation
29 with the department of public health, may adopt rules pursuant
30 to chapter 17A to administer this chapter including but not
31 limited to rules to further define the content and scope of any
32 instructions provided to caregivers under this chapter.

33 Sec. 87. NEW SECTION. 144E.6 Construction of chapter
34 relative to other health care directive.

35 Nothing in this chapter shall be construed to interfere with

1 the rights of an agent operating under a valid durable power of
2 attorney for health care pursuant to chapter 144B.

3 Sec. 88. NEW SECTION. 144E.7 Limitations.

4 1. Nothing in this chapter shall be construed to create
5 a private right of action against a hospital, a hospital
6 employee, or any consultant or contractor with whom a hospital
7 has a contractual relationship, or to limit or otherwise
8 supersede or replace existing rights or remedies under any
9 other provision of law.

10 2. Nothing in this chapter shall delay the appropriate
11 discharge or transfer of a patient.

12 3. Nothing in this chapter shall be construed to interfere
13 with or supersede a health care provider's instructions
14 regarding a Medicare-certified home health agency or any other
15 postacute care provider.

16 4. Nothing in this chapter shall be construed to grant
17 decision-making authority to a caregiver to determine the type
18 of provider or provider of the patient's posthospital care as
19 specified in the patient's discharge plan.

20 DIVISION XX

21 TRAUMA CARE SYSTEM

22 Sec. 89. Section 147A.23, subsection 2, paragraph c, Code
23 2016, is amended to read as follows:

24 c. Upon verification and the issuance of a certificate of
25 verification, a hospital or emergency care facility agrees
26 to maintain a level of commitment and resources sufficient
27 to meet responsibilities and standards as required by the
28 trauma care criteria established by rule under [this subchapter](#).
29 Verifications are valid for a period of three years or as
30 determined by the department and are renewable. As part of
31 the verification and renewal process, the department may
32 conduct periodic on-site reviews of the services and facilities
33 of the hospital or emergency care facility. However, the
34 department shall not decrease a hospital's trauma care
35 services categorization level for which a hospital was issued

1 a certificate of verification prior to July 1, 2015, unless
2 the hospital subsequently fails to maintain the requirements
3 existing at the time of the issuance of the certification of
4 verification for that categorization level of trauma care
5 services.

6 Sec. 90. EFFECTIVE UPON ENACTMENT. This division of this
7 Act, being deemed of immediate importance, takes effect upon
8 enactment.

9 Sec. 91. RETROACTIVE APPLICABILITY. This division of this
10 Act applies retroactively to June 30, 2015.

11 DIVISION XXI

12 MENTAL HEALTH AND DISABILITY SERVICES REGIONS — FUNDING

13 Sec. 92. MENTAL HEALTH AND DISABILITY SERVICES REGIONS —
14 FUNDING.

15 1. There is appropriated from the general fund of the
16 state to the department of human services for the fiscal year
17 beginning July 1, 2016, and ending June 30, 2017, the following
18 amount, or so much thereof as is necessary, to be used for the
19 purpose designated:

20 For a grant to a five-county mental health and disability
21 services region with a population of between 290,000 to 300,000
22 as determined by the latest federal decennial census, for the
23 provision of mental health and disability services within the
24 region:

25 \$ 1,000,000

26 The moneys appropriated in this subsection are contingent
27 upon the continuation of sustainable service funding
28 relationships between all counties in the region for the fiscal
29 year beginning July 1, 2016, and ending June 30, 2017. The
30 department and the region shall enter into a memorandum of
31 understanding regarding the use of the moneys by the region
32 prior to the region's receipt of moneys under this subsection.

33 2. There is appropriated from the general fund of the
34 state to the department of human services for the fiscal year
35 beginning July 1, 2016, and ending June 30, 2017, the following

1 amount, or so much thereof as is necessary, to be used for the
2 purpose designated:

3 For a grant to a single-county mental health and disability
4 services region with a population of over 350,000 as determined
5 by the latest federal decennial census, for the provision of
6 mental health and disability services:

7 \$ 2,000,000

8 The department shall work with the region awarded moneys
9 pursuant to this subsection to complete a three-year
10 sustainable cash flow funding plan for the delivery of mental
11 health and disability services in the region to be submitted to
12 the department by November 15, 2016. The department and the
13 region shall enter into a memorandum of understanding regarding
14 the use of the moneys and detailing the provisions of the plan
15 prior to the region's receipt of moneys under this subsection.

16 3. The department shall distribute moneys appropriated
17 in this section within 60 days of the date of signing of the
18 memorandum of understanding between the department and each
19 region.

20 4. Moneys awarded under this section shall be used by the
21 regions consistent with each region's service system management
22 plan as approved by the department.

23 DIVISION XXII

24 MENTAL HEALTH AND DISABILITY SERVICES REDESIGN PROGRESS REPORT

25 Sec. 93. MENTAL HEALTH AND DISABILITY SERVICES REDESIGN
26 PROGRESS REPORT. The department of human services shall review
27 and report progress on the implementation of the adult mental
28 health and disability services redesign and shall identify
29 any challenges faced in achieving the goals of the redesign.
30 The progress report shall include but not be limited to
31 information regarding the mental health and disability services
32 regional service system including governance, management, and
33 administration; the implementation of best practices including
34 evidence-based best practices; the availability of, access
35 to, and provision of initial core services and additional

1 core services to and for required core service populations
2 and additional core service populations; and the financial
3 stability and fiscal viability of the redesign. The department
4 shall submit its report with findings to the governor and the
5 general assembly no later than November 15, 2016.

6 EXPLANATION

7 The inclusion of this explanation does not constitute agreement with
8 the explanation's substance by the members of the general assembly.

9 This bill relates to appropriations for health and human
10 services made in fiscal year 2016-2017 to the department of
11 veterans affairs, Iowa veterans home, department on aging
12 (IDA), office of long-term care ombudsman, department of public
13 health (DPH), Iowa finance authority, department of human
14 rights, and department of human services (DHS).

15 The bill is organized into divisions.

16 DEPARTMENT ON AGING. This division amends appropriations
17 made from the general fund of the state for the department on
18 aging for FY 2016-2017.

19 OFFICE OF LONG-TERM CARE OMBUDSMAN. This division amends
20 appropriations made from the general fund of the state for the
21 office of long-term care ombudsman for FY 2016-2017.

22 DEPARTMENT OF PUBLIC HEALTH. This division amends
23 appropriations made from the general fund of the state for the
24 department of public health for FY 2016-2017.

25 DEPARTMENT OF VETERANS AFFAIRS AND IOWA VETERANS HOME.
26 This division amends appropriations made from the general
27 fund of the state for the department of veterans affairs for
28 FY 2016-2017 for administration, the Iowa veterans home, for
29 transfer to the Iowa finance authority for the home ownership
30 assistance program, and for the county commissions of veteran
31 affairs.

32 DEPARTMENT OF HUMAN SERVICES. This division amends
33 appropriations from the general fund of the state and the
34 federal temporary assistance for needy families block grant
35 to DHS for FY 2016-2017. The allocation for the family

1 development and self-sufficiency grant program is made directly
2 to the department of human rights. The reimbursement section
3 addresses reimbursement for providers reimbursed by the
4 department of human services.

5 HEALTH CARE ACCOUNTS AND FUNDS. This division amends
6 certain health-related appropriations for FY 2016-2017. A
7 number of the appropriations are made for purposes of the
8 medical assistance (Medicaid) program in addition to the
9 general fund appropriations made for this purpose for the same
10 fiscal year.

11 PRIOR YEAR APPROPRIATIONS AND OTHER PROVISIONS. This
12 division amends the appropriations for the family investment
13 program account, the family investment program general fund,
14 medical assistance, state supplementary assistance, child care
15 assistance, and the nursing facility budget for FY 2015-2016.
16 The bill also amends the date for adoption of emergency rules
17 for the Medicaid modernization initiative to provide for the
18 initiative to begin April 1, 2016, rather than January 1, 2016.
19 This division takes effect upon enactment and is retroactively
20 applicable to July 1, 2015.

21 DECATEGORIZATION. This division provides that
22 decategorization carryover funds that are unencumbered or
23 unobligated at the close of FY 2015-2016 are to be transferred
24 to the Medicaid appropriation for the same fiscal year. The
25 provision takes effect upon enactment and is retroactively
26 applicable to July 1, 2015.

27 CODE CHANGES. This division includes Code changes relating
28 to local offices of substitute decision maker to extend the
29 date by which local offices shall be established statewide and
30 amends provisions relating to institutions for persons with an
31 intellectual disability relating to assessments.

32 HOSPITAL HEALTH CARE ACCESS ASSESSMENT. This division
33 eliminates the repeal of the hospital health care access
34 assessment chapter (Code chapter 249M) and provides for a
35 review of an alternative assessment methodology and report.

1 The division takes effect upon enactment and is retroactively
2 applicable to June 30, 2016.

3 STATE FAMILY PLANNING SERVICES PROGRAM. This division
4 directs DHS to terminate the Medicaid family planning network
5 waiver effective July 1, 2016, and instead establish a state
6 family planning services program. The state program is
7 required to replicate the eligibility requirements and other
8 provisions of the waiver, but provides for a prioritized
9 distribution of the funds. Funds are prohibited from being
10 made to any entity that performs abortions or that maintains or
11 operates a facility where abortions are performed and specifies
12 what an abortion does not include. The bill requires DHS to
13 report annually on the distribution of the funds.

14 AUTISM SUPPORT FUND. This division relates to the autism
15 support program by increasing the eligibility to those
16 individuals less than 14 years of age rather than to children
17 less than 9 years of age, increasing the income eligibility
18 level to 500 percent of the federal poverty level in place
19 of 400 percent of the federal poverty level, and adjusting
20 the level of cost sharing by a recipient of funding. The
21 division also amends the board-certified behavior analyst and
22 board-certified assistant behavior analyst grants program
23 and fund to specify duties of a person awarded a grant, the
24 maximum amount of the grant awarded, the use of the funds, and
25 reporting requirements regarding the awarding of grants; and
26 provides that moneys in the fund at the close of FY 2015-2016
27 are to be transferred to the appropriation for medical
28 contracts to be used for the purposes of the appropriation for
29 the succeeding fiscal year. The provision of the division
30 relating to the carryforward of the moneys takes effect upon
31 enactment and is retroactively applicable to July 1, 2015.

32 MEDICAID MANAGED CARE OVERSIGHT. This division includes
33 provisions for oversight of the Medicaid managed care program.

34 CHILDREN'S MENTAL HEALTH AND WELL-BEING. This division
35 includes provisions relating to children's mental health crisis

1 services planning grants, children's well-being learning labs,
2 children's mental health study reports, and a children's mental
3 health and well-being advisory committee.

4 OPIOID ANTAGONIST REVISIONS. This division amends
5 provisions enacted in 2016 Iowa Acts, Senate File 2218,
6 relating to immunity for possession and administration
7 of an opioid antagonist, to authorize rather than require
8 the department of public health to adopt general rather
9 than specific rules, and by eliminating the provision that
10 implementation of the provision is contingent upon the
11 availability of funding.

12 NURSING GRANT PROGRAMS. This division eliminates the
13 repeal provisions for the nurse residency state matching
14 grants program and the Iowa needs nurses now initiatives. The
15 division takes effect upon enactment and is retroactively
16 applicable to June 30, 2016.

17 NURSING FACILITY SUPPLEMENTAL PAYMENT PROGRAM. This
18 division directs DHS to submit a Medicaid state plan amendment
19 to CMS no later than June 30, 2016, to allow qualifying
20 non-state government-owned nursing facilities to receive
21 a supplemental payment, in addition to the greater of the
22 Medicaid fee-for-service per diem or the per diem payment
23 established under the Medicaid managed care contract. The
24 division specifies provisions to be included in the Medicaid
25 state plan amendment. The division also provides that a
26 nursing facility that participates in the supplemental payment
27 program is also considered a nursing facility for purposes
28 of the nursing facility quality assurance assessment program
29 under Code chapter 249L. The division takes effect upon
30 enactment. Implementation of the amendment to Code section
31 249L.2 to include a nursing facility that participates in the
32 supplemental payment program as a nursing facility for purposes
33 of the nursing facility quality assurance assessment program
34 under Code chapter 249L is contingent upon federal approval of
35 the supplemental payment program.

1 CAREGIVER DESIGNATION. This division relates to the
2 designation of a caregiver relative to an inpatient admission
3 of a patient to a hospital to provide after-care assistance
4 to the patient upon discharge of the patient to the patient's
5 residence.

6 TRAUMA CARE SYSTEM. This division provides for continuation
7 of a hospital's trauma care services categorization level for
8 which the hospital was issued a certificate of verification
9 prior to July 1, 2015, unless the hospital subsequently
10 fails to maintain the requirements existing at the time of
11 the issuance of the certification of verification for that
12 categorization level of trauma care services.

13 MENTAL HEALTH AND DISABILITY SERVICES REGIONS — FUNDING.
14 This division makes appropriations from the general fund of the
15 state to the department of human services for FY 2016-2017 for
16 certain mental health and disability (MH/DS) services regions.

17 MENTAL HEALTH AND DISABILITY SERVICES PROGRESS REPORT. This
18 division requires the department of human services to review
19 and report progress on the implementation of the adult MH/DS
20 redesign including any challenges faced in achieving the goals
21 of the redesign.