

**Senate File 2306 - Introduced**

SENATE FILE 2306

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**A BILL FOR**

1 An Act relating to options for long-term care, and making  
2 appropriations.

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

1     Section 1.   MEDICAID — REIMBURSEMENT OF TRANSPORTATION  
2 COSTS — HOME HEALTH CARE PROVIDERS.   The department of  
3 health and human services shall establish a rate structure for  
4 reimbursement of the transportation costs of home health care  
5 providers by incorporating an increased reimbursement amount  
6 into the existing home health care provider reimbursement rate  
7 that reflects the total time expended by a home health care  
8 provider, including the provider's travel time, in the per  
9 visit reimbursement.   The department shall submit a report on  
10 the reimbursement rate structure and the projected cost of  
11 application of the reimbursement rate structure to the governor  
12 and the general assembly by December 1, 2024.

13     Sec. 2.   OPTIONS FOR LONG-TERM LIVING — STUDY — REPORT.

14     1.   Pursuant to section 231.58, and considering the intent of  
15 the general assembly for the long-term living system in Iowa  
16 pursuant to section 231F.1, including maximizing independence,  
17 choice, and dignity for consumers, the director of health  
18 and human services shall convene a study group to facilitate  
19 the coordination of long-term living system policy, service  
20 delivery, and long-range planning by performing a focused  
21 review of the alternatives for the long-term living system in  
22 the state.

23     2.   The study group shall include all of the following  
24 members:

25     a.   The director of health and human services.

26     b.   The division director of the division of aging and  
27 disability services of the department of health and human  
28 services.

29     c.   The director of the department of inspections, appeals,  
30 and licensing.

31     d.   The state director of AARP Iowa, or the director's  
32 designee.

33     e.   The executive director of each area agency on aging, or  
34 the director's designee.

35     f.   The co-chairpersons of the older Iowans legislature.

1 g. The executive director of the Iowa caregivers  
2 association, or the executive director's designee.

3 h. The executive director of the Alzheimer's association,  
4 Iowa chapter, or the executive director's designee.

5 i. The executive director of disability rights Iowa, or the  
6 executive director's designee.

7 j. The director of the Barbara and Richard Csomay center  
8 for gerontological excellence, at the state university of Iowa  
9 college of nursing, or the director's designee.

10 k. The director of the gerontology program at Iowa state  
11 university of science and technology, or the director's  
12 designee.

13 l. The director of the university of northern Iowa school of  
14 applied human sciences, or the director's designee.

15 m. The president and vice president of the Hale group.

16 3. The review shall include a survey of existing long-term  
17 living approaches utilized in other states and innovative  
18 approaches such as the greenhouse system, adult family homes,  
19 and elder group homes, with the goal of providing Iowans with  
20 access to an extensive range of high-quality, affordable, and  
21 cost-effective long-term living options. The review shall also  
22 consider how the state may assist nursing facilities which are  
23 not at full occupancy by incorporating other sectors including  
24 but not limited to child care, adult day care, and home health  
25 services.

26 4. The study group shall submit a report of its findings  
27 and recommendations including a summary of existing and  
28 innovative approaches, how other states have successfully  
29 implemented existing approaches, and how the state of Iowa can  
30 encourage development of the identified existing and innovative  
31 approaches in this state, to the governor and the general  
32 assembly by December 15, 2024.

33 Sec. 3. ADULT DAY CARE PROVIDERS — MEDICAID  
34 REIMBURSEMENT. For the fiscal year beginning July 1,  
35 2024, reimbursement rates under the Medicaid program for adult

1 day care providers who provide services to Medicaid home and  
2 community-based services waiver recipients shall be increased  
3 by five percent over the reimbursement rates in effect on June  
4 30, 2024.

5     Sec. 4. IOWA RETURN TO COMMUNITY PROGRAM —  
6 APPROPRIATION. There is appropriated from the general  
7 fund of the state to the department of health and human  
8 services for the fiscal year beginning July 1, 2024, and  
9 ending June 30, 2025, the following amount, or so much  
10 thereof as is necessary, to be used in collaboration with  
11 affected stakeholders to continue to expand the Iowa return to  
12 community program to assist non-Medicaid-eligible consumers  
13 who indicate a preference to return to the community and are  
14 deemed appropriate for discharge, to return to their community  
15 following a nursing facility or hospital stay:

16 ..... \$ 2,000,000

17     The department of health and human services shall submit to  
18 the governor and the general assembly by December 15, 2024, an  
19 estimate of the cost to fully fund an expansion of the Iowa  
20 return to community program to provide access to all interested  
21 consumers.

22     Sec. 5. STATEWIDE DEMENTIA CARE COORDINATOR — DEMENTIA  
23 SERVICE SPECIALISTS — APPROPRIATION. There is appropriated  
24 from the general fund of the state to the department of health  
25 and human services for the fiscal year beginning July 1, 2024,  
26 and ending June 30, 2025, the following amount or so much  
27 thereof as is necessary, for the department of health and  
28 human services to employ a statewide dementia care coordinator  
29 within the department to provide statewide coordination of  
30 dementia-friendly initiatives including efforts pursuant to  
31 section 231.62; to coordinate dementia service specialists  
32 in each area agency on aging; to provide grants to each  
33 area agency on aging to employ a dementia service specialist  
34 to increase access and connections to local supports and  
35 services for persons living with dementia, their families,

1 and caregivers; to evaluate the availability of respite care  
2 for family caregivers of persons with dementia and to provide  
3 recommendations to the department and the general assembly  
4 on how to meet the demand; and to increase awareness about  
5 dementia within the network of area agency on aging providers  
6 as well as in communities, businesses, health care facilities,  
7 and assisted living programs throughout the state:

8 ..... \$ 750,000

9 EXPLANATION

10 The inclusion of this explanation does not constitute agreement with  
11 the explanation's substance by the members of the general assembly.

12 This bill relates to options for long-term living and  
13 funding of long-term care services.

14 The bill requires the department of health and human  
15 services (HHS) to establish a rate structure for reimbursement  
16 of the transportation costs of home health care providers by  
17 incorporating an increased reimbursement amount for travel  
18 time into the per visit reimbursement. The department shall  
19 submit a report of the rate structure and the projected cost of  
20 application of the reimbursement rate structure to the governor  
21 and the general assembly by December 1, 2024.

22 The bill requires that pursuant to Code section 231.58  
23 (long-term living coordination) and considering the intent of  
24 the general assembly for the long-term living system in Iowa  
25 pursuant to Code section 231F.1 (intent for Iowa's long-term  
26 living system), including maximizing independence, choice,  
27 and dignity for consumers, the director of HHS shall convene  
28 a study group that includes members specified in the bill to  
29 perform a focused review of the alternatives for long-term  
30 living options in the state. The review shall include a survey  
31 of existing approaches utilized in other states and innovative  
32 approaches such as the greenhouse system, adult family homes,  
33 and elder group homes, with the goal of providing Iowans with  
34 access to an extensive range of high-quality, affordable, and  
35 cost-effective long-term living options. The review shall also

1 consider how the state may assist nursing facilities not at  
2 full occupancy by incorporating other sectors, including child  
3 care, adult day care, and home health care. The study group  
4 shall submit a report of its findings and recommendations to  
5 the governor and the general assembly by December 15, 2024.

6 The bill provides that for FY 2024-2025, Medicaid  
7 reimbursement rates for adult day care providers who provide  
8 services to Medicaid home and community-based services waiver  
9 recipients shall be increased by 5 percent over the rates in  
10 effect on June 30, 2024.

11 The bill makes an appropriation to HHS for FY 2024-2025 from  
12 the general fund of the state to be used in collaboration with  
13 affected stakeholders to continue to expand the Iowa return  
14 to community program. The bill requires HHS to submit to the  
15 governor and the general assembly by December 15, 2024, an  
16 estimate of the cost to fully fund an expansion of the Iowa  
17 return to community program to provide access to all interested  
18 consumers.

19 The bill makes an appropriation to HHS for FY 2024-2025  
20 from the general fund of the state to be used by HHS to employ  
21 a statewide dementia care coordinator within HHS to provide  
22 statewide coordination of dementia-friendly initiatives  
23 including efforts pursuant to Code section 231.62 (Alzheimer's  
24 disease services and assistance); to coordinate dementia  
25 service specialists in each area agency on aging; to provide  
26 grants to each area agency on aging to employ a dementia  
27 service specialist to increase access and connections to local  
28 supports and services for persons living with dementia, their  
29 families, and caregivers; to evaluate the availability of  
30 respite for family caregivers of persons with dementia and make  
31 recommendations to meet the demand; and to increase awareness  
32 about dementia within the network of area agency on aging  
33 providers as well as in communities, businesses, health care  
34 facilities, and assisted living programs throughout the state.