

House File 876 - Reprinted

HOUSE FILE _____
BY COMMITTEE ON WAYS AND MEANS

(SUCCESSOR TO HF 785)
(SUCCESSOR TO HSB 223)

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

A BILL FOR

1 An Act relating to mental health, mental retardation,
2 developmental disabilities, and brain injury service
3 requirements and including an effective and applicability
4 date.
5 BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF IOWA:
6 TLSB 1611HZ 81
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1 1 Section 1. NEW SECTION. 225C.8A STATE CASES == MINIMUM
1 2 STANDARDS.
1 3 If a person receiving services or other support provided
1 4 under chapter 222, 230, or 249A has no legal settlement or the
1 5 legal settlement is unknown so that the person is deemed to be
1 6 a state case, the state's responsibility is limited to the
1 7 cost of services or other support under the minimum standards
1 8 required to be available to persons covered by a county
1 9 management plan in accordance with the rules adopted by the
1 10 commission pursuant to section 331.439A. However, a person
1 11 receiving services or other support as a state case as of June
1 12 30, 2006, shall remain eligible for the services or other
1 13 support available to the person on that date and the state
1 14 shall continue to be responsible for the cost.
1 15 Sec. 2. Section 331.439, Code 2005, is amended by adding
1 16 the following new subsection:
1 17 NEW SUBSECTION. 9. The county management plan shall
1 18 designate at least one hospital licensed under chapter 135B
1 19 that the county has contracted with to provide services
1 20 covered under the plan. If the designated hospital does not
1 21 have a bed available to provide the services, the county is
1 22 responsible for the cost of covered services provided at an
1 23 alternate hospital licensed under chapter 135B.
1 24 Sec. 3. NEW SECTION. 331.439A COUNTY MANAGEMENT PLANS ==
1 25 MINIMUM STANDARDS.
1 26 The county management plan approved in accordance with
1 27 section 331.439 shall comply with the minimum standards for
1 28 the services and other support required to be available to
1 29 persons covered by the plan in accordance with administrative
1 30 rules adopted by the state commission to implement this
1 31 section. The rules shall address processes for managing
1 32 utilization and access to services and other support,
1 33 including but not limited to the usage of fiscal management
1 34 practices if state or county funding is insufficient to pay
1 35 the costs of the services and other support required to be
2 1 available. The initial minimum standards shall require the
2 2 provision of the services provided to persons covered by the
2 3 plan under the medical assistance program for which the county
2 4 is responsible for the nonfederal share and the availability
2 5 of the following services and other support, based upon an
2 6 individual having the specified primary diagnosis:
2 7 1. For persons with mental illness:
2 8 a. Payment of costs associated with commitment proceedings
2 9 that are a county responsibility, including but not limited to
2 10 costs for diagnostic evaluations, transportation by the
2 11 sheriff, legal representation, and the patient advocate.
2 12 b. Inpatient psychiatric evaluation and treatment in a
2 13 county-designated hospital.
2 14 c. Inpatient treatment provided at a state mental health
2 15 institute.

2 16 d. Outpatient treatment.
2 17 2. For persons with chronic mental illness:
2 18 a. Case management or service coordination that is funded
2 19 under the medical assistance program.
2 20 b. Payment of costs associated with commitment proceedings
2 21 that are a county responsibility, including but not limited to
2 22 costs for diagnostic evaluations, transportation by the
2 23 sheriff, legal representation, and the patient advocate.
2 24 c. Inpatient psychiatric evaluation and treatment in a
2 25 county-designated hospital.
2 26 d. Inpatient treatment provided at a state mental health
2 27 institute.
2 28 e. Outpatient treatment.
2 29 3. For persons with mental retardation:
2 30 a. Case management or service coordination that is funded
2 31 through the medical assistance program.
2 32 b. Payment of costs associated with commitment proceedings
2 33 that are a county responsibility, including but not limited to
2 34 costs for diagnostic evaluations, transportation by the
2 35 sheriff, and legal representation.
3 1 c. Employment-related services, including but not limited
3 2 to adult day care, sheltered workshop, work activity, and
3 3 supported employment.
3 4 d. Inpatient behavioral health evaluation and treatment in
3 5 a county-designated hospital.
3 6 e. Inpatient treatment provided at a state resource
3 7 center.
3 8 f. Outpatient treatment, including but not limited to
3 9 partial hospitalization and day treatment.
3 10 g. Residential services covered under the medical
3 11 assistance program.
3 12 4. For persons with a developmental disability other than
3 13 mental retardation:
3 14 a. Case management funded through the medical assistance
3 15 program.
3 16 b. Payment of costs associated with commitment proceedings
3 17 that are a county responsibility, including but not limited to
3 18 costs for diagnostic evaluations, transportation by the
3 19 sheriff, and legal representation.
3 20 c. Inpatient treatment provided at a state resource
3 21 center.
3 22 5. For persons with brain injury, services under the
3 23 medical assistance program home and community-based services
3 24 brain injury waiver that are received while utilizing an
3 25 approved waiver opening and are a county responsibility under
3 26 section 249A.26.
3 27 Sec. 4. PSYCHOACTIVE MEDICATION PILOT PROJECT. The
3 28 department of human services shall issue a request for
3 29 proposals during the fiscal year beginning July 1, 2005, for a
3 30 pilot project based out of a community mental health center
3 31 for providing no or low cost psychoactive medications to low=
3 32 income persons who are in need of treatment with the
3 33 medications.
3 34 Sec. 5. STATE CASES == FISCAL YEAR 2005=2006. If the
3 35 costs of the services provided to a person with mental
4 1 retardation receiving services as a state case can be covered
4 2 under a medical assistance program home and community-based
4 3 waiver or other medical assistance program provision, the
4 4 department of human services may transfer moneys to cover the
4 5 nonfederal share of such costs from the appropriation made for
4 6 the fiscal year beginning July 1, 2005, for state cases to the
4 7 appropriation made for the medical assistance program. The
4 8 department shall act expeditiously to obtain federal approval
4 9 for additional waiver slots to cover the state cases beginning
4 10 at the earliest possible time in the fiscal year, if such
4 11 approval is necessary.
4 12 Sec. 6. SERVICES FOR PERSONS WITH BRAIN INJURY ==
4 13 LEGISLATIVE INTENT.
4 14 1. The general assembly intends to enact legislation in
4 15 the 2006 regular legislative session authorizing coverage
4 16 under county management plans of additional services and other
4 17 support for persons with brain injury, based upon the
4 18 information provided pursuant to this section. The general
4 19 assembly intends to provide for the availability of cost share
4 20 with counties for the coverage as part of the allowed growth
4 21 funding provided by the state for county mental health, mental
4 22 retardation, and developmental disabilities services
4 23 commencing in the fiscal year beginning July 1, 2006.
4 24 2. For the purposes of developing options under subsection
4 25 3, "individual with brain injury" means an individual resident
4 26 of this state who has a diagnosis of brain injury and is

4 27 described by all of the following:

4 28 a. The individual is age twenty=two through sixty=four
4 29 years.

4 30 b. The individual would be eligible under the income,
4 31 resource, and other eligibility requirements for the medical
4 32 assistance program home and community=based waiver for persons
4 33 with brain injury except the individual does not have
4 34 sufficient deficits under the waiver's functional assessment
4 35 requirements to qualify but the individual could achieve a
5 1 higher level of functioning or maintain the current level of
5 2 functioning with support from the services available under the
5 3 waiver.

5 4 c. The individual meets statewide functional assessment
5 5 eligibility requirements to be determined pursuant to this
5 6 section.

5 7 3. It is the intent of the general assembly to enact a
5 8 directive during the 2006 regular legislative session for the
5 9 mental health, mental retardation, developmental disabilities,
5 10 and brain injury commission to adopt functional assessment
5 11 eligibility requirements in rule that may be used to complete
5 12 the definition in subsection 2 and to identify parameters for
5 13 the eligibility requirements in the statutory directive. The
5 14 department of human services shall provide for the
5 15 department's contractor for medical assistance eligibility
5 16 determination to identify options that may be used for the
5 17 functional assessment eligibility requirements. A work group
5 18 consisting of representatives of the department of management,
5 19 department of human services, and the legislative services
5 20 agency shall develop cost projections for the options in
5 21 consultation with representatives of the Iowa state
5 22 association of counties and service providers. The work group
5 23 may provide for the options to be reviewed and revised by the
5 24 contractor based upon the cost projections. In addition,
5 25 proposals may be provided by the work group for revising the
5 26 definition in subsection 2 if necessary to develop improved
5 27 options. In addition to the functional assessment eligibility
5 28 requirements, the work group shall also identify options for a
5 29 minimum set of services and other support that may be made
5 30 available to persons with brain injury. The options shall be
5 31 designed in a manner so that the state and county funding
5 32 designated for provision of services to persons with brain
5 33 injury is not exceeded.

5 34 4. The work group shall submit a report of the options
5 35 developed pursuant to subsection 3 along with any findings and
6 1 recommendations to the governor, general assembly, and the
6 2 commission on or before December 16, 2005.

6 3 Sec. 7. EFFECTIVE AND APPLICABILITY DATE. The sections of
6 4 this Act enacting sections 225C.8A and 331.439A take effect
6 5 July 1, 2006. The mental health, mental retardation,
6 6 developmental disabilities, and brain injury commission shall
6 7 act in advance of that effective date by adopting rules to
6 8 implement the provisions that take effect July 1, 2006.

6 9 HF 876

6 10 jp/es/25