

**Senate File 395 - Reprinted**

SENATE FILE 395  
BY COMMITTEE ON HUMAN  
RESOURCES

(SUCCESSOR TO SSB 1227)

(COMPANION TO LSB 1151HV BY  
COMMITTEE ON HUMAN RESOURCES)

(As Amended and Passed by the Senate March 18, 2013)

**A BILL FOR**

1 An Act relating to child, adult, and family services under  
2 the purview of the department of human services, making  
3 penalties applicable, and including effective date  
4 provisions.

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

1 Section 1. Section 225C.38, subsection 1, paragraph c, Code  
2 2013, is amended to read as follows:

3 c. Except as provided in section 225C.41, a family support  
4 subsidy for a fiscal year shall be in an amount determined by  
5 the department ~~in consultation with the comprehensive family~~  
6 ~~support council created in section 225C.48.~~ The parent or  
7 legal guardian receiving a family support subsidy may elect  
8 to receive a payment amount which is less than the amount  
9 determined in accordance with this paragraph.

10 Sec. 2. Section 225C.42, subsection 1, Code 2013, is amended  
11 to read as follows:

12 1. The department shall conduct an annual evaluation of  
13 the family support subsidy program ~~in conjunction with the~~  
14 ~~comprehensive family support council~~ and shall submit the  
15 evaluation report with recommendations to the governor and  
16 general assembly. The report shall be submitted on or before  
17 October 30 and provide an evaluation of the latest completed  
18 fiscal year.

19 Sec. 3. Section 225C.47, subsection 5, unnumbered paragraph  
20 1, Code 2013, is amended to read as follows:

21 The department shall design the program ~~in consultation with~~  
22 ~~the comprehensive family support council created in section~~  
23 ~~225C.48.~~ The department shall adopt rules to implement the  
24 program which provide for all of the following:

25 Sec. 4. Section 225C.49, subsection 4, Code 2013, is amended  
26 to read as follows:

27 4. The department shall designate one individual whose sole  
28 duties are to provide central coordination of the programs  
29 under sections 225C.36 and 225C.47 and ~~to work with the~~  
30 ~~comprehensive family support council~~ to oversee development and  
31 implementation of the programs.

32 Sec. 5. Section 239B.5, Code 2013, is amended by adding the  
33 following new subsection:

34 NEW SUBSECTION. 4. a. The department shall implement  
35 policies and procedures as necessary to comply with provisions

1 of the federal Middle Class Tax Relief and Job Creation Act  
2 of 2012, Pub. L. No. 112-96, to prevent assistance provided  
3 under this chapter from being used in any electronic benefit  
4 transfer transaction in any liquor store; any casino, gambling  
5 casino, or gaming establishment; or any retail establishment  
6 which provides adult-oriented entertainment in which performers  
7 disrobe or perform in an unclothed state for entertainment.  
8 For purposes of this paragraph, the definitions found in the  
9 federal Middle Class Tax Relief and Job Creation Act and  
10 related rules and statutes apply.

11 *b.* Unless otherwise precluded by federal law or regulation,  
12 policies and procedures implemented under this subsection shall  
13 at a minimum impose the prohibition described in paragraph "a"  
14 as a condition for continued eligibility for assistance under  
15 this chapter.

16 *c.* The department may implement additional measures as may  
17 be necessary to comply with federal regulations in implementing  
18 paragraph "a".

19 *d.* The department shall adopt rules as necessary to  
20 implement this subsection.

21 Sec. 6. Section 239B.14, subsection 1, Code 2013, is amended  
22 to read as follows:

23 1. *a.* An individual who obtains, or attempts to obtain,  
24 or aids or abets an individual to obtain, by means of a  
25 willfully false statement or representation, by knowingly  
26 failing to disclose a material fact, or by impersonation, or  
27 any fraudulent device, any assistance or other benefits under  
28 this chapter to which the individual is not entitled, commits  
29 a fraudulent practice.

30 *b.* An individual who accesses benefits provided under  
31 this chapter in violation of any prohibition imposed by the  
32 department pursuant to section 239B.5, subsection 4, commits  
33 a fraudulent practice.

34 Sec. 7. Section 249A.3, subsection 1, Code 2013, is amended  
35 by adding the following new paragraph:

1 NEW PARAGRAPH. v. Beginning January 1, 2014, is an  
2 individual who meets all of the following requirements:

3 (1) Is under twenty-six years of age.

4 (2) Was in foster care under the responsibility of the state  
5 on the date of attaining eighteen years of age or such higher  
6 age to which foster care is provided.

7 (3) Was enrolled in the medical assistance program under  
8 this chapter while in such foster care.

9 Sec. 8. Section 249A.3, subsection 2, paragraph a,  
10 subparagraph (2), Code 2013, is amended to read as follows:

11 (2) (a) As provided under the federal Breast and Cervical  
12 Cancer Prevention and Treatment Act of 2000, Pub. L. No.  
13 106-354, ~~women~~ individuals who meet all of the following  
14 criteria:

15 (i) Are not described in 42 U.S.C. § 1396a(a)(10)(A)(i).

16 (ii) Have not attained age sixty-five.

17 (iii) Have been screened for breast and cervical cancer  
18 under the United States centers for disease control and  
19 prevention breast and cervical cancer early detection program  
20 established under 42 U.S.C. § 300k et seq., in accordance  
21 with the requirements of 42 U.S.C. § 300n, and need treatment  
22 for breast or cervical cancer. ~~A woman~~ An individual is  
23 considered screened for breast and cervical cancer under this  
24 subparagraph subdivision if the ~~woman~~ individual is screened  
25 by any provider or entity, and the state grantee of the United  
26 States centers for disease control and prevention funds under  
27 Tit. XV of the federal Public Health Services Act has elected  
28 to include screening activities by that provider or entity  
29 as screening activities pursuant to Tit. XV of the federal  
30 Public Health Services Act. This screening includes ~~but is~~  
31 ~~not limited to~~ breast or cervical cancer screenings or related  
32 diagnostic services provided or funded by family planning ~~or~~  
33 centers, community health centers ~~and breast cancer screenings~~  
34 ~~funded by the Susan G. Komen foundation which~~, or nonprofit  
35 organizations, and the screenings or services are provided

1 to ~~women~~ individuals who meet the eligibility requirements  
2 established by the state grantee of the United States centers  
3 for disease control and prevention funds under Tit. XV of the  
4 federal Public Health Services Act.

5 (iv) Are not otherwise covered under creditable coverage as  
6 defined in 42 U.S.C. § 300gg(c).

7 (b) ~~A woman~~ An individual who meets the criteria of this  
8 subparagraph (2) shall be presumptively eligible for medical  
9 assistance.

10 Sec. 9. Section 249A.3, subsection 2, paragraph a,  
11 subparagraph (9), Code 2013, is amended by striking the  
12 subparagraph.

13 Sec. 10. Section 249J.26, subsection 2, Code 2013, is  
14 amended to read as follows:

15 2. This chapter is repealed ~~October~~ December 31, 2013.

16 Sec. 11. Section 514I.4, subsection 5, paragraph a, Code  
17 2013, is amended by striking the paragraph.

18 Sec. 12. Section 514I.5, subsection 7, paragraph f, Code  
19 2013, is amended to read as follows:

20 *f.* Review, in consultation with the department, and take  
21 necessary steps to improve interaction between the program and  
22 other public and private programs which provide services to the  
23 population of eligible children. ~~The board, in consultation~~  
24 ~~with the department, shall also develop and implement a plan~~  
25 ~~to improve the medical assistance program in coordination with~~  
26 ~~the hawk-i program, including but not limited to a provision to~~  
27 ~~coordinate eligibility between the medical assistance program~~  
28 ~~and the hawk-i program, and to provide for common processes~~  
29 ~~and procedures under both programs to reduce duplication and~~  
30 ~~bureaucracy.~~

31 Sec. 13. Section 514I.5, subsection 8, paragraphs b and f,  
32 Code 2013, are amended by striking the paragraphs.

33 Sec. 14. Section 514I.7, subsection 2, paragraphs a and g,  
34 Code 2013, are amended to read as follows:

35 *a.* Determine ~~individual~~ eligibility for program enrollment

1 ~~based upon review of completed applications and supporting~~  
2 ~~documentation as prescribed by federal law and regulation,~~  
3 ~~using policies and procedures adopted by rule of the department~~  
4 ~~pursuant to chapter 17A.~~ The administrative contractor shall  
5 not enroll a child who has group health coverage, unless  
6 expressly authorized by such rules.

7 ~~g. Create and Utilize the department's eligibility system~~  
8 ~~to maintain eligibility files that are compatible with the~~  
9 ~~data system of the department with pertinent eligibility~~  
10 ~~determination and ongoing enrollment information including,~~ but  
11 not limited to, data regarding beneficiaries, enrollment dates,  
12 disenrollments, and annual financial redeterminations.

13 Sec. 15. Section 514I.7, subsection 2, paragraphs c, d, e,  
14 f, and k, Code 2013, are amended by striking the paragraphs.

15 Sec. 16. Section 514I.8, subsection 1, Code 2013, is amended  
16 to read as follows:

17 1. a. Effective July 1, 1998, and notwithstanding any  
18 medical assistance program eligibility criteria to the  
19 contrary, medical assistance shall be provided to, or on behalf  
20 of, an eligible child under the age of nineteen whose family  
21 income does not exceed one hundred thirty-three percent of the  
22 federal poverty level, as defined by the most recently revised  
23 poverty income guidelines published by the United States  
24 department of health and human services.

25 ~~b. Additionally, effective~~ Effective July 1, 2000, and  
26 notwithstanding any medical assistance program eligibility  
27 criteria to the contrary, medical assistance shall be provided  
28 to, or on behalf of, an eligible infant whose family income  
29 does not exceed two hundred percent of the federal poverty  
30 level, as defined by the most recently revised poverty income  
31 guidelines published by the United States department of health  
32 and human services.

33 c. Effective July 1, 2009, and notwithstanding any medical  
34 assistance program eligibility criteria to the contrary,  
35 medical assistance shall be provided to, or on behalf of, a

1 pregnant woman or an eligible child who is an infant and whose  
2 family income is at or below three hundred percent of the  
3 federal poverty level, as defined by the most recently revised  
4 poverty income guidelines published by the United States  
5 department of health and human services.

6 Sec. 17. Section 514I.8, subsection 2, paragraph c, Code  
7 2013, is amended to read as follows:

8 c. Is a member of a family whose income does not exceed  
9 three hundred percent of the federal poverty level, as defined  
10 in 42 U.S.C. § 9902(2), including any revision required by  
11 such section, and in accordance with the federal Children's  
12 Health Insurance Program Reauthorization Act of 2009, Pub. L.  
13 No. 111-3. The modified adjusted gross income methodology  
14 prescribed in section 2101 of the federal Patient Protection  
15 and Affordable Care Act, Pub. L. No. 111-148, to determine  
16 family income under this paragraph.

17 Sec. 18. Section 514I.8, subsections 3 and 4, Code 2013, are  
18 amended to read as follows:

19 3. In accordance with the rules adopted by the board,  
20 a child may be determined to be presumptively eligible for  
21 the program pending a final eligibility determination.  
22 Following final determination of eligibility ~~by the~~  
23 ~~administrative contractor~~, a child shall be eligible for a  
24 twelve-month period. At the end of the twelve-month period,  
25 ~~the administrative contractor shall conduct~~ a review of the  
26 circumstances of the eligible child's family shall be conducted  
27 to establish eligibility and cost sharing for the subsequent  
28 twelve-month period.

29 4. Once an eligible child is enrolled in a plan, the  
30 ~~eligible child shall remain enrolled in the plan unless a~~  
31 ~~determination is made, according to criteria established by the~~  
32 ~~board, that the eligible child should be allowed to enroll in~~  
33 ~~another qualified child health plan or should be disenrolled.~~  
34 An enrollee may request to change plans within ninety days of  
35 initial enrollment for any reason and at any time for cause, as

1 defined in 42 C.F.R. § 438.56(d)(2). Otherwise, an enrollee  
2 may change plan enrollment once a year on the enrollee's  
3 anniversary date.

4 Sec. 19. Section 514I.8, subsections 5 and 6, Code 2013, are  
5 amended by striking the subsections.

6 Sec. 20. Section 514I.9, Code 2013, is amended to read as  
7 follows:

8 **514I.9 Program benefits.**

9 ~~1. Until June 30, 1999, the benefits provided under the~~  
10 ~~program shall be those benefits established by rule of the~~  
11 ~~board and in compliance with Tit. XXI of the federal Social~~  
12 ~~Security Act.~~

13 ~~2. On or before June 30, 1999, the hawk-i board shall adopt~~  
14 ~~rules to amend the benefits package based upon review of the~~  
15 ~~results of the initial benefits package used.~~

16 ~~3. Subsequent to June 30, 1999, the The hawk-i board shall~~  
17 ~~review the benefits package annually and shall determine~~  
18 ~~additions to or deletions from the benefits package offered.~~  
19 ~~The hawk-i board shall submit the recommendations to the~~  
20 ~~general assembly for any amendment to the benefits package.~~

21 ~~4. 2.~~ Benefits, in addition to those required by rule, may  
22 be provided to eligible children by a participating insurer if  
23 the benefits are provided at no additional cost to the state.

24 Sec. 21. REPEAL. Section 225C.48, Code 2013, is repealed.

25 Sec. 22. MEDICAID STATE PLAN AMENDMENT. The department of  
26 human services shall submit a medical assistance state plan  
27 amendment to the centers for Medicare and Medicaid services of  
28 the United States department of health and human services to  
29 provide for applicability of the federal Breast and Cervical  
30 Cancer Prevention and Treatment Act of 2000, Pub. L. No.  
31 106-354, to both men and women. The department shall implement  
32 applicability of the program to both men and women upon receipt  
33 of federal approval.

34 Sec. 23. EFFECTIVE DATE. The following provision or  
35 provisions of this Act take effect December 31, 2013:



S.F. 395

1     1. The section of this Act amending section 249A.3,  
2 subsection 2, paragraph "a", subparagraph (9).