

Senate File 446 - Reprinted

SENATE FILE 446
BY COMMITTEE ON APPROPRIATIONS

(SUCCESSOR TO SSB 1251)

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

A BILL FOR

1 An Act relating to appropriations for health and human services
2 and including other related provisions and appropriations,
3 providing penalties, and including effective, retroactive,
4 and applicability date provisions.
5 BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF IOWA:

1 by area agencies on aging that require compliance with both
2 state and federal laws, rules, and regulations, including but
3 not limited to all of the following:

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

7 (2) Prohibiting prepayment for goods or services not
8 received or performed prior to the end of the fiscal period
9 designated for use of the funds.

10 (3) Prohibiting the prepayment for goods or services
11 not defined specifically by good or service, time period, or
12 recipient.

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

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

23 4. Of the funds appropriated in this section, \$250,000
24 shall be used to fund services to meet the unmet needs of older
25 individuals as identified in the annual compilation of unmet
26 service units by the area agencies on aging.

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

32 6. Of the funds appropriated in this section, \$2,210,646
33 shall be used to administer the office of substitute decision
34 maker established pursuant to chapter 231E, on a statewide
35 basis.

1 7. Of the funds appropriated in this subsection, \$40,000
2 shall be used for implementation of a guardianship and
3 conservatorship monitoring and assistance pilot project as
4 specified in this Act.

5 DIVISION II

6 OFFICE OF LONG-TERM CARE RESIDENT'S ADVOCATE — FY 2013-2014

7 Sec. 2. OFFICE OF LONG-TERM CARE RESIDENT'S ADVOCATE. There
8 is appropriated from the general fund of the state to the
9 office of long-term care resident's advocate for the fiscal
10 year beginning July 1, 2013, and ending June 30, 2014, the
11 following amount, or so much thereof as is necessary, to be
12 used for the purposes designated:

13 For salaries, support, administration, maintenance, and
14 miscellaneous purposes, and for not more than the following
15 full-time equivalent positions:

16	\$	1,321,707
17	FTEs	16.00

18 1. Of the funds appropriated in this section, \$500,000
19 shall be used to provide five additional local long-term care
20 resident's advocates to continue moving toward the national
21 recommendation of one full-time equivalent paid staff ombudsman
22 per 2,000 long-term care beds in the state.

23 2. Of the funds appropriated in this section, \$210,000
24 shall be used to provide two local long-term care resident's
25 advocates to administer the certified volunteer long-term
26 care resident's advocate program pursuant to section 231.45,
27 including operational certification and training costs.

28 DIVISION III

29 DEPARTMENT OF PUBLIC HEALTH — FY 2013-2014

30 Sec. 3. DEPARTMENT OF PUBLIC HEALTH. There is appropriated
31 from the general fund of the state to the department of public
32 health for the fiscal year beginning July 1, 2013, and ending
33 June 30, 2014, the following amounts, or so much thereof as is
34 necessary, to be used for the purposes designated:

35 1. ADDICTIVE DISORDERS

1 For reducing the prevalence of use of tobacco, alcohol, and
2 other drugs, and treating individuals affected by addictive
3 behaviors, including gambling, and for not more than the
4 following full-time equivalent positions:

5 \$ 29,763,690
6 FTEs 13.00

7 a. (1) Of the funds appropriated in this subsection,
8 \$7,748,361 shall be used for the tobacco use prevention
9 and control initiative, including efforts at the state and
10 local levels, as provided in chapter 142A. The commission
11 on tobacco use prevention and control established pursuant
12 to section 142A.3 shall advise the director of public health
13 in prioritizing funding needs and the allocation of moneys
14 appropriated for the programs and activities of the initiative
15 under this subparagraph (1) and shall make recommendations to
16 the director in the development of budget requests relating to
17 the initiative.

18 (2) Of the funds allocated in this paragraph "a", \$50,000
19 shall be used for a social media campaign to address tobacco
20 use reduction.

21 (3) (a) Of the funds allocated in this paragraph "a",
22 \$453,067 shall be transferred to the alcoholic beverages
23 division of the department of commerce for enforcement of
24 tobacco laws, regulations, and ordinances and to engage in
25 tobacco control activities approved by the division of tobacco
26 use prevention and control as specified in the memorandum of
27 understanding entered into between the divisions.

28 (b) For the fiscal year beginning July 1, 2013, and ending
29 June 30, 2014, the terms of the memorandum of understanding,
30 entered into between the division of tobacco use prevention
31 and control of the department of public health and the
32 alcoholic beverages division of the department of commerce,
33 governing compliance checks conducted to ensure licensed retail
34 tobacco outlet conformity with tobacco laws, regulations, and
35 ordinances relating to persons under eighteen years of age,

1 shall restrict the number of such checks to one check per
2 retail outlet, and one additional check for any retail outlet
3 found to be in violation during the first check.

4 b. Of the funds appropriated in this subsection,
5 \$22,015,329 shall be used for problem gambling and
6 substance-related disorder prevention, treatment, and recovery
7 services, including a 24-hour helpline, public information
8 resources, professional training, and program evaluation.

9 (1) Of the funds allocated in this paragraph "b",
10 \$18,903,715 shall be used for substance-related disorder
11 prevention and treatment.

12 (a) Of the funds allocated in this subparagraph (1),
13 \$899,300 shall be used for the public purpose of a grant
14 program to provide substance-related disorder prevention
15 programming for children.

16 (i) Of the funds allocated in this subparagraph division
17 (a), \$427,539 shall be used for grant funding for organizations
18 that provide programming for children by utilizing mentors.
19 Programs approved for such grants shall be certified or will
20 be certified within six months of receiving the grant award
21 by the Iowa commission on volunteer services as utilizing the
22 standards for effective practice for mentoring programs.

23 (ii) Of the funds allocated in this subparagraph division
24 (a), \$426,839 shall be used for grant funding for organizations
25 that provide programming that includes youth development and
26 leadership. The programs shall also be recognized as being
27 programs that are scientifically based with evidence of their
28 effectiveness in reducing substance-related disorders in
29 children.

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

32 (iv) All grant recipients shall participate in a program
33 evaluation as a requirement for receiving grant funds.

34 (v) Of the funds allocated in this subparagraph division
35 (a), up to \$44,922 may be used to administer substance-related

1 disorder prevention grants and for program evaluations.

2 (b) Of the funds allocated in this subparagraph
3 (1), \$272,603 shall be used for culturally competent
4 substance-related disorder treatment pilot projects.

5 (i) The department shall utilize the amount allocated
6 in this subparagraph division (b) for at least three pilot
7 projects to provide culturally competent substance-related
8 disorder treatment in various areas of the state. Each pilot
9 project shall target a particular ethnic minority population.
10 The populations targeted shall include but are not limited to
11 African American, Asian, and Latino.

12 (ii) The pilot project requirements shall provide for
13 documentation or other means to ensure access to the cultural
14 competence approach used by a pilot project so that such
15 approach can be replicated and improved upon in successor
16 programs.

17 (2) Of the funds allocated in this paragraph "b", up
18 to \$3,111,614 may be used for problem gambling prevention,
19 treatment, and recovery services.

20 (a) Of the funds allocated in this subparagraph (2),
21 \$2,573,762 shall be used for problem gambling prevention and
22 treatment.

23 (b) Of the funds allocated in this subparagraph (2), up to
24 \$437,852 may be used for a 24-hour helpline, public information
25 resources, professional training, and program evaluation.

26 (c) Of the funds allocated in this subparagraph (2), up
27 to \$100,000 may be used for the licensing of problem gambling
28 treatment programs.

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

33 c. Notwithstanding any provision of law to the contrary,
34 to standardize the availability, delivery, cost of delivery,
35 and accountability of problem gambling and substance-related

1 disorder treatment services statewide, the department shall
2 continue implementation of a process to create a system
3 for delivery of treatment services in accordance with the
4 requirements specified in 2008 Iowa Acts, chapter 1187, section
5 3, subsection 4. To ensure the system provides a continuum
6 of treatment services that best meets the needs of Iowans,
7 the problem gambling and substance-related disorder treatment
8 services in any area may be provided either by a single agency
9 or by separate agencies submitting a joint proposal.

10 (1) The system for delivery of substance-related disorder
11 and problem gambling treatment shall include problem gambling
12 prevention.

13 (2) The system for delivery of substance-related disorder
14 and problem gambling treatment shall include substance-related
15 disorder prevention by July 1, 2014.

16 (3) Of the funds allocated in paragraph "b", the department
17 may use up to \$100,000 for administrative costs to continue
18 developing and implementing the process in accordance with this
19 paragraph "c".

20 d. The requirement of section 123.53, subsection 5, is met
21 by the appropriations and allocations made in this Act for
22 purposes of substance-related disorder treatment and addictive
23 disorders for the fiscal year beginning July 1, 2013.

24 e. The department of public health shall work with all
25 other departments that fund substance-related disorder
26 prevention and treatment services and all such departments
27 shall, to the extent necessary, collectively meet the state
28 maintenance of effort requirements for expenditures for
29 substance-related disorder services as required under the
30 federal substance-related disorder prevention and treatment
31 block grant.

32 2. HEALTHY CHILDREN AND FAMILIES

33 For promoting the optimum health status for children,
34 adolescents from birth through 21 years of age, and families,
35 and for not more than the following full-time equivalent

1 positions:

2	\$	6,996,099
3	FTEs	15.00

4 a. Of the funds appropriated in this subsection, not more
5 than \$734,841 shall be used for the healthy opportunities to
6 experience success (HOPES)-healthy families Iowa (HFI) program
7 established pursuant to section 135.106. The funding shall
8 be distributed to renew the grants that were provided to the
9 grantees that operated the program during the fiscal year
10 ending June 30, 2013.

11 b. In order to implement the legislative intent stated in
12 sections 135.106 and 256I.9, that priority for home visitation
13 program funding be given to programs using evidence-based or
14 promising models for home visitation, it is the intent of the
15 general assembly to phase-in the funding priority in accordance
16 with 2012 Iowa Acts, chapter 1133, section 2, subsection 2,
17 paragraph 0b.

18 c. Of the funds appropriated in this subsection, \$2,670,427
19 shall be used to expand the department's initiative to
20 provide for adequate developmental surveillance and screening
21 during a child's first five years statewide. The expansion
22 shall include enhancing the scope of the program through
23 collaboration with the child health specialty clinics to
24 promote healthy child development through early identification
25 and response to both biomedical and social determinants
26 of healthy development; by developing child health metrics
27 to inform practice, document long-term health impacts and
28 savings, and provide for continuous improvement through
29 training, education, and evaluation; and by providing for
30 practitioner consultation particularly for children with
31 behavioral conditions and needs. The department of public
32 health shall also collaborate with the Iowa Medicaid enterprise
33 and the child health specialty clinics to integrate the
34 activities of the first five initiative into the establishment
35 of patient-centered medical homes, community utilities,

1 accountable care organizations, and other integrated care
2 models developed to improve health quality and population
3 health while reducing health care costs. To the maximum extent
4 possible, funding allocated in this paragraph shall be utilized
5 as matching funds for medical assistance program reimbursement.

6 d. Of the funds appropriated in this subsection, \$31,597
7 shall be distributed to a statewide dental carrier to provide
8 funds to continue the donated dental services program patterned
9 after the projects developed by the lifeline network to provide
10 dental services to indigent elderly and disabled individuals.

11 e. Of the funds appropriated in this subsection, \$111,995
12 shall be used for childhood obesity prevention.

13 f. Of the funds appropriated in this subsection, \$162,768
14 shall be used to provide audiological services and hearing
15 aids for children. The department may enter into a contract
16 to administer this paragraph.

17 g. Of the funds appropriated in this subsection, \$25,000
18 shall be transferred to the university of Iowa college of
19 dentistry for provision of primary dental services to children.
20 State funds shall be matched on a dollar-for-dollar basis.
21 The university of Iowa college of dentistry shall coordinate
22 efforts with the department of public health, bureau of
23 oral and health delivery systems, to provide dental care to
24 underserved populations throughout the state.

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

27 i. Of the funds appropriated in this subsection, \$2,000,000
28 shall be used to expand the I-smile oral health program to
29 at-risk adults with a priority to serve individuals 60 years
30 of age or older to improve systemic health and quality of
31 life, including to individuals with disabilities and older
32 individuals with physical, cognitive, or behavioral limitations
33 or chronic or complex conditions that adversely affect oral
34 self-care, result in greater susceptibility to oral disease, or
35 limit accessibility to professional oral care.

1 3. CHRONIC CONDITIONS

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

5	\$	5,220,411
6	FTEs	7.00

7 a. Of the funds appropriated in this subsection, \$159,932
8 shall be used for grants to individual patients who have
9 phenylketonuria (PKU) to assist with the costs of necessary
10 special foods.

11 b. Of the funds appropriated in this subsection, \$891,644
12 shall be used for the brain injury services program pursuant to
13 section 135.22B, including for continuation of the contracts
14 for resource facilitator services in accordance with section
15 135.22B, subsection 9, and to enhance brain injury training and
16 recruitment of service providers on a statewide basis. Of the
17 amount allocated in this paragraph, \$95,000 shall be used to
18 fund one full-time equivalent position to serve as the state
19 brain injury service program manager.

20 c. Of the funds appropriated in this subsection, \$547,982
21 shall be used as additional funding to leverage federal funding
22 through the federal Ryan White Care Act, Tit. II, AIDS drug
23 assistance program supplemental drug treatment grants.

24 d. Of the funds appropriated in this subsection, \$99,823
25 shall be used for the public purpose of continuing a grant
26 with an existing national-affiliated organization to provide
27 education, client-centered programs, and client and family
28 support for people living with epilepsy and their families.

29 e. Of the funds appropriated in this subsection, \$785,114
30 shall be used for child health specialty clinics.

31 f. Of the funds appropriated in this subsection, \$400,000
32 shall be used by the regional autism assistance program
33 established pursuant to section 256.35, and administered by
34 the child health specialty clinic located at the university of
35 Iowa hospitals and clinics. The funds shall be used to enhance

1 interagency collaboration and coordination of educational,
2 medical, and other human services for persons with autism,
3 their families, and providers of services, including delivering
4 regionalized services of care coordination, family navigation,
5 and integration of services through the statewide system of
6 regional child health specialty clinics and fulfilling other
7 requirements as specified in chapter 225D, creating the autism
8 support program, as enacted in this Act. The university of
9 Iowa shall not receive funds allocated under this paragraph for
10 indirect costs associated with the regional autism assistance
11 program.

12 g. Of the funds appropriated in this subsection, \$570,993
13 shall be used for the comprehensive cancer control program to
14 reduce the burden of cancer in Iowa through prevention, early
15 detection, effective treatment, and ensuring quality of life.
16 Of the funds allocated in this lettered paragraph, \$150,000
17 shall be used to support a melanoma research symposium, a
18 melanoma biorepository and registry, basic and translational
19 melanoma research, and clinical trials.

20 h. Of the funds appropriated in this subsection, \$126,450
21 shall be used for cervical and colon cancer screening, and
22 \$500,000 shall be used to enhance the capacity of the cervical
23 cancer screening program to include provision of recommended
24 prevention and early detection measures to a broader range of
25 low-income women.

26 i. Of the funds appropriated in this subsection, \$526,695
27 shall be used for the center for congenital and inherited
28 disorders.

29 j. Of the funds appropriated in this subsection, \$129,411
30 shall be used for the prescription drug donation repository
31 program created in chapter 135M.

32 k. Of the funds appropriated in this subsection, \$215,263
33 shall be used for the costs of the medical home system advisory
34 council established pursuant to section 135.159 including
35 incorporation of the development and implementation of the

1 prevention and chronic care management state initiative.

2 1. Of the funds appropriated in this subsection, \$139,719
3 shall be used to fund the state comprehensive Alzheimer's
4 disease response strategy as enacted in this Act.

5 4. COMMUNITY CAPACITY

6 For strengthening the health care delivery system at the
7 local level, and for not more than the following full-time
8 equivalent positions:

9	\$	7,514,110
10	FTEs	18.25

11 a. Of the funds appropriated in this subsection, \$99,414
12 is allocated for continuation of the child vision screening
13 program implemented through the university of Iowa hospitals
14 and clinics in collaboration with early childhood Iowa areas.
15 The program shall submit a report to the individuals identified
16 in this Act for submission of reports regarding the use of
17 funds allocated under this paragraph "a". The report shall
18 include the objectives and results for the program year
19 including the target population and how the funds allocated
20 assisted the program in meeting the objectives; the number,
21 age, and location within the state of individuals served;
22 the type of services provided to the individuals served; the
23 distribution of funds based on service provided; and the
24 continuing needs of the program.

25 b. Of the funds appropriated in this subsection, \$110,656 is
26 allocated for continuation of an initiative implemented at the
27 university of Iowa and \$99,904 is allocated for continuation of
28 an initiative at the state mental health institute at Cherokee
29 to expand and improve the workforce engaged in mental health
30 treatment and services. The initiatives shall receive input
31 from the university of Iowa, the department of human services,
32 the department of public health, and the mental health and
33 disability services commission to address the focus of the
34 initiatives.

35 c. Of the funds appropriated in this subsection, \$1,164,628

1 shall be used for essential public health services that promote
2 healthy aging throughout the lifespan, contracted through a
3 formula for local boards of health, to enhance health promotion
4 and disease prevention services.

5 d. Of the funds appropriated in this section, \$99,286 shall
6 be deposited in the governmental public health system fund
7 created in section 135A.8 to be used for the purposes of the
8 fund.

9 e. Of the funds appropriated in this subsection, \$105,448
10 shall be used for the mental health professional shortage area
11 program implemented pursuant to section 135.180.

12 f. Of the funds appropriated in this subsection,
13 \$38,263 shall be used for a grant to a statewide association
14 of psychologists that is affiliated with the American
15 psychological association to be used for continuation of a
16 program to rotate intern psychologists in placements in urban
17 and rural mental health professional shortage areas, as defined
18 in section 135.180.

19 g. Of the funds appropriated in this subsection, the
20 following amounts shall be allocated to the Iowa collaborative
21 safety net provider network established pursuant to section
22 135.153 to be used for the purposes designated. The following
23 amounts allocated under this lettered paragraph shall be
24 distributed to the specified provider and shall not be reduced
25 for administrative or other costs prior to distribution:

26 (1) For distribution to the Iowa primary care association
27 for statewide coordination of the Iowa collaborative safety net
28 provider network:

29 \$ 145,785

30 (2) For distribution to the Iowa primary care association
31 to be used to continue a training program for sexual assault
32 response team (SART) members, including representatives of
33 law enforcement, victim advocates, prosecutors, and certified
34 medical personnel:

35 \$ 50,000

1 (3) For distribution to federally qualified health centers
2 for necessary infrastructure, statewide coordination, provider
3 recruitment, service delivery, and provision of assistance to
4 patients in determining an appropriate medical home:

5 \$ 75,000

6 (4) For distribution to the local boards of health that
7 provide direct services for pilot programs in three counties to
8 assist patients in securing a medical home inclusive of dental
9 care:

10 \$ 77,153

11 (5) For distribution to maternal and child health centers
12 for pilot programs in three service areas to assist patients in
13 securing a medical home inclusive of dental care:

14 \$ 95,126

15 (6) For distribution to free clinics for necessary
16 infrastructure, statewide coordination, provider recruitment,
17 service delivery, and provision of assistance to patients in
18 securing a medical home inclusive of dental care:

19 \$ 399,272

20 (7) For distribution to rural health clinics for necessary
21 infrastructure, statewide coordination, provider recruitment,
22 service delivery, and provision of assistance to patients in
23 determining an appropriate medical home:

24 \$ 141,544

25 (8) For continuation of the safety net provider patient
26 access to a specialty health care initiative as described in
27 2007 Iowa Acts, chapter 218, section 109:

28 \$ 448,474

29 (9) For continuation of the pharmaceutical infrastructure
30 for safety net providers as described in 2007 Iowa Acts,
31 chapter 218, section 108:

32 \$ 413,415

33 (10) For distribution to the Iowa family planning network
34 agencies for necessary infrastructure, statewide coordination,
35 provider recruitment, service delivery, and provision of

1 assistance to patients in determining an appropriate medical
2 home:

3 \$ 100,000

4 The Iowa collaborative safety net provider network may
5 continue to distribute funds allocated pursuant to this
6 lettered paragraph through existing contracts or renewal of
7 existing contracts.

8 h. (1) Of the funds appropriated in this subsection,
9 \$204,775 shall be used for continuation of the work of the
10 direct care worker advisory council established pursuant to
11 2008 Iowa Acts, chapter 1188, section 69, in implementing the
12 recommendations in the final report submitted by the advisory
13 council to the governor and the general assembly in March 2012.

14 (2) The advisory council, in collaboration with the board
15 of direct care professionals created in chapter 152F, if
16 enacted in 2013 Iowa Acts, Senate File 232, or 2013 successor
17 legislation, shall do all of the following:

18 (a) Develop and conduct necessary outreach and education
19 for individuals providing direct care services, consumers,
20 training providers including but not limited to community
21 college health occupation and training centers, employers, and
22 other interested parties to provide information about and the
23 process for participation in direct care professional voluntary
24 certification.

25 (b) Determine data collection needs, collect data, and
26 track and analyze data to determine the effect of certification
27 on recruitment and retention, turnover rates, the cost of
28 turnover, consumer and employer satisfaction, and public
29 protection. The analysis of the data collected shall also be
30 used to inform changes in the certification system to provide
31 for continuous improvement for direct care professionals,
32 consumers and employers, and the public.

33 i. (1) Of the funds appropriated in this subsection,
34 \$207,750 shall be used for allocation to an independent
35 statewide direct care worker association under continuation

1 of the contract in effect during the fiscal year ending June
2 30, 2013, with terms determined by the director of public
3 health relating to education, outreach, leadership development,
4 mentoring, and other initiatives intended to enhance the
5 recruitment and retention of direct care workers in health care
6 and long-term care settings.

7 (2) Of the funds appropriated in this subsection, \$75,000
8 shall be used to provide scholarships or other forms of
9 subsidization for direct care worker educational conferences,
10 training, or outreach activities.

11 (3) Of the funds appropriated in this subsection, up
12 to \$184,530 shall be used for the board of direct care
13 professionals created pursuant to chapter 152F, if enacted in
14 2013 Iowa Acts, Senate File 232, or 2013 successor legislation.
15 A portion of the amount allocated in this subparagraph (3)
16 may be used for up to 4.25 full-time equivalent positions to
17 administer the board of direct care professionals.

18 j. Of the funds appropriated in this subsection, the
19 department may use up to \$58,175 for up to one full-time
20 equivalent position to administer the volunteer health care
21 provider program pursuant to section 135.24.

22 k. Of the funds appropriated in this subsection, \$49,707
23 shall be used for a matching dental education loan repayment
24 program to be allocated to a dental nonprofit health service
25 corporation to develop the criteria and implement the loan
26 repayment program.

27 l. Of the funds appropriated in this subsection, \$105,823
28 shall be transferred to the college student aid commission for
29 deposit in the rural Iowa primary care trust fund created in
30 section 261.113 to be used for the purposes of the fund.

31 m. Of the funds appropriated in this subsection, \$150,000
32 shall be used for the purposes of the Iowa donor registry as
33 specified in section 142C.18.

34 n. Of the funds appropriated in this subsection, \$100,000
35 shall be used for continuation of a grant to a nationally

1 affiliated volunteer eye organization that has an established
2 program for children and adults and that is solely dedicated to
3 preserving sight and preventing blindness through education,
4 nationally certified vision screening and training, and
5 community and patient service programs. The organization
6 shall submit a report to the individuals identified in this
7 Act for submission of reports regarding the use of funds
8 allocated under this paragraph "n". The report shall include
9 the objectives and results for the program year including
10 the target population and how the funds allocated assisted
11 the program in meeting the objectives; the number, age, and
12 location within the state of individuals served; the type of
13 services provided to the individuals served; the distribution
14 of funds based on service provided; and the continuing needs
15 of the program.

16 o. Of the funds appropriated in this subsection, \$25,000
17 shall be used for the establishment of wellness council under
18 the direction of the director of public health to increase
19 support for wellness activities in the state.

20 p. Of the funds appropriated in this section, \$1,158,150
21 is allocated to the Iowa collaborative safety net provider
22 network established pursuant to section 135.153 to be used for
23 development and implementation of a statewide regionally-based
24 network to provide an integrated approach to health care
25 delivery through care coordination that supports primary
26 care providers and links patients with community resources
27 necessary to empower patients in addressing biomedical and
28 social determinants of health to improve health outcomes. The
29 Iowa collaborative safety net provider network shall work in
30 conjunction with the department of human services to align the
31 integrated network with the health care delivery system model
32 developed under the state innovation models initiative grant.
33 The Iowa collaborative safety net provider network shall submit
34 a progress report to the individuals designated in this Act for
35 submission of reports by December 31, 2013, including progress

1 in developing and implementing the network, how the funds
2 were distributed and used in developing and implementing the
3 network, and the remaining needs in developing and implementing
4 the network.

5 q. Of the funds appropriated in this section, \$500,000 shall
6 be deposited in the area health education centers fund, as
7 enacted by this Act, to be used for the purposes of the fund.

8 r. Of the funds appropriated in this section, \$50,000 shall
9 be distributed to a statewide nonprofit organization to be used
10 for the public purpose of supporting a partnership between
11 medical providers and parents through community health centers
12 to promote reading and encourage literacy skills so children
13 enter school prepared for success in reading.

14 5. HEALTHY AGING

15 To provide public health services that reduce risks and
16 invest in promoting and protecting good health over the
17 course of a lifetime with a priority given to older Iowans and
18 vulnerable populations:

19 \$ 7,297,142

20 a. Of the funds appropriated in this subsection, \$2,009,187
21 shall be used for local public health nursing services.

22 b. Of the funds appropriated in this subsection, \$5,287,955
23 shall be used for home care aide services.

24 6. ENVIRONMENTAL HAZARDS

25 For reducing the public's exposure to hazards in the
26 environment, primarily chemical hazards, and for not more than
27 the following full-time equivalent positions:

28 \$ 803,870

29 FTEs 4.00

30 Of the funds appropriated in this subsection, \$537,750 shall
31 be used for childhood lead poisoning provisions.

32 7. INFECTIOUS DISEASES

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

1 \$ 1,335,155
 2 FTEs 4.00

3 8. 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 \$ 3,334,571
 8 FTEs 131.00

9 a. Of the funds appropriated in this subsection, not more
10 than \$454,700 shall be credited to the emergency medical
11 services fund created in section 135.25. Moneys in the
12 emergency medical services fund are appropriated to the
13 department to be used for the purposes of the fund.

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

22 c. Of the funds appropriated in this subsection, not more
23 than \$598,751 shall be used for the state poison control
24 center.

25 d. Of the funds appropriated in this section, \$368,000 shall
26 be used for maintenance of environmental health programs to
27 ensure public safety.

28 e. Of the funds appropriated in this section, \$28,000 shall
29 be used as one-time funding to transition the licensing of
30 orthotists, prosthetists, and pedorthists to a fee-supported
31 licensing model.

32 f. Of the funds appropriated in this section, \$28,644 shall
33 be used for the costs of the emergency medical services task
34 force as enacted in this Act.

35 g. Of the funds appropriated in this section, \$55,800 shall

1 be used as one-time funding for the board of behavioral science
2 to incorporate the provisions of 2013 Iowa Acts, House File
3 569, if enacted, relating to the licensure of professionals
4 practicing substance and addictive disorder counseling or
5 providing substance and addictive disorder prevention services.

6 9. RESOURCE MANAGEMENT

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

10	\$	804,054
11	FTEs	5.00

12 The university of Iowa hospitals and clinics under the
13 control of the state board of regents shall not receive
14 indirect costs from the funds appropriated in this section.

15 The university of Iowa hospitals and clinics billings to the
16 department shall be on at least a quarterly basis.

17 The department of public health shall submit a report to the
18 individuals specified in this Act for submission of reports by
19 December 15, 2013, providing recommendations for improvements
20 in the intraoperability and interoperability of communications
21 technology under the purview of the department to improve
22 efficiency and reduce costs.

23 DIVISION IV

24 DEPARTMENT OF VETERANS AFFAIRS — FY 2013-2014

25 Sec. 4. DEPARTMENT OF VETERANS AFFAIRS. There is
26 appropriated from the general fund of the state to the
27 department of veterans affairs for the fiscal year beginning
28 July 1, 2013, and ending June 30, 2014, the following amounts,
29 or so much thereof as is necessary, to be used for the purposes
30 designated:

31 1. DEPARTMENT OF VETERANS AFFAIRS ADMINISTRATION

32 For salaries, support, maintenance, and miscellaneous
33 purposes, including the war orphans educational assistance fund
34 created in section 35.8, or a successor funding provision for
35 war orphans educational assistance, if enacted, and for not

1 more than the following full-time equivalent positions:

2	\$	1,093,508
3	FTEs	13.00

4 2. IOWA VETERANS HOME

5 For salaries, support, maintenance, and miscellaneous
6 purposes:

7	\$	8,025,714
---------	----	-----------

8 a. The Iowa veterans home billings involving the department
9 of human services shall be submitted to the department on at
10 least a monthly basis.

11 b. If there is a change in the employer of employees
12 providing services at the Iowa veterans home under a collective
13 bargaining agreement, such employees and the agreement shall
14 be continued by the successor employer as though there had not
15 been a change in employer.

16 c. Within available resources and in conformance with
17 associated state and federal program eligibility requirements,
18 the Iowa veterans home may implement measures to provide
19 financial assistance to or on behalf of veterans or their
20 spouses who are participating in the community reentry program.

21 d. The Iowa veterans home expenditure report shall be
22 submitted monthly to the legislative services agency.

23 3. STATE EDUCATIONAL ASSISTANCE — CHILDREN OF DECEASED
24 VETERANS

25 For provision of educational assistance pursuant to section
26 35A.20:

27	\$	12,416
----------	----	--------

28 4. HOME OWNERSHIP ASSISTANCE PROGRAM

29 For transfer to the Iowa finance authority for the
30 continuation of the home ownership assistance program for
31 persons who are or were eligible members of the armed forces of
32 the United States, pursuant to section 16.54:

33	\$	1,600,000
----------	----	-----------

34 Sec. 5. LIMITATION OF COUNTY COMMISSIONS OF VETERAN AFFAIRS
35 FUND STANDING APPROPRIATIONS. Notwithstanding the standing

1 appropriation in the following designated section for the
2 fiscal year beginning July 1, 2013, and ending June 30, 2014,
3 the amounts appropriated from the general fund of the state
4 pursuant to that section for the following designated purposes
5 shall not exceed the following amount:

6 For the county commissions of veteran affairs fund under
7 section 35A.16:

8 \$ 990,000

9 DIVISION V

10 DEPARTMENT OF HUMAN SERVICES — FY 2013-2014

11 Sec. 6. TEMPORARY ASSISTANCE FOR NEEDY FAMILIES BLOCK

12 GRANT. There is appropriated from the fund created in section
13 8.41 to the department of human services for the fiscal year
14 beginning July 1, 2013, and ending June 30, 2014, from moneys
15 received under the federal temporary assistance for needy
16 families (TANF) block grant pursuant to the federal Personal
17 Responsibility and Work Opportunity Reconciliation Act of 1996,
18 Pub. L. No. 104-193, and successor legislation, the following
19 amounts, or so much thereof as is necessary, to be used for the
20 purposes designated:

21 1. To be credited to the family investment program account
22 and used for assistance under the family investment program
23 under chapter 239B:

24 \$ 18,116,948

25 2. To be credited to the family investment program account
26 and used for the job opportunities and basic skills (JOBS)
27 program and implementing family investment agreements in
28 accordance with chapter 239B:

29 \$ 11,866,439

30 3. To be used for the family development and
31 self-sufficiency grant program in accordance with section
32 216A.107:

33 \$ 2,898,980

34 Notwithstanding section 8.33, moneys appropriated in this
35 subsection that remain unencumbered or unobligated at the close

1 of the fiscal year shall not revert but shall remain available
2 for expenditure for the purposes designated until the close of
3 the succeeding fiscal year. However, unless such moneys are
4 encumbered or obligated on or before September 30, 2014, the
5 moneys shall revert.

6 4. For field operations:

7 \$ 31,296,232

8 5. For general administration:

9 \$ 3,744,000

10 6. For state child care assistance:

11 \$ 19,382,687

12 The funds appropriated in this subsection shall be
13 transferred to the child care and development block grant
14 appropriation made by the Eighty-fifth General Assembly, 2013
15 Session, for the federal fiscal year beginning October 1,
16 2013, and ending September 30, 2014. Of this amount, \$200,000
17 shall be used for provision of educational opportunities to
18 registered child care home providers in order to improve
19 services and programs offered by this category of providers
20 and to increase the number of providers. The department may
21 contract with institutions of higher education or child care
22 resource and referral centers to provide the educational
23 opportunities. Allowable administrative costs under the
24 contracts shall not exceed 5 percent. The application for a
25 grant shall not exceed two pages in length.

26 7. For distribution to counties and regions through the
27 property tax relief fund for mental health and disability
28 services as provided in an appropriation made for this purpose:

29 \$ 4,894,052

30 8. For child and family services:

31 \$ 32,084,430

32 9. For child abuse prevention grants:

33 \$ 125,000

34 10. For pregnancy prevention grants on the condition that
35 family planning services are funded:

1 \$ 1,930,067

2 Pregnancy prevention grants shall be awarded to programs
3 in existence on or before July 1, 2013, if the programs have
4 demonstrated positive outcomes. Grants shall be awarded to
5 pregnancy prevention programs which are developed after July
6 1, 2013, if the programs are based on existing models that
7 have demonstrated positive outcomes. Grants shall comply with
8 the requirements provided in 1997 Iowa Acts, chapter 208,
9 section 14, subsections 1 and 2, including the requirement that
10 grant programs must emphasize sexual abstinence. Priority in
11 the awarding of grants shall be given to programs that serve
12 areas of the state which demonstrate the highest percentage of
13 unplanned pregnancies of females of childbearing age within the
14 geographic area to be served by the grant.

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

18 \$ 1,037,186

19 12. To be credited to the state child care assistance
20 appropriation made in this section to be used for funding of
21 community-based early childhood programs targeted to children
22 from birth through five years of age developed by early
23 childhood Iowa areas as provided in section 256I.8:

24 \$ 6,350,000

25 The department shall transfer TANF block grant funding
26 appropriated and allocated in this subsection to the child care
27 and development block grant appropriation in accordance with
28 federal law as necessary to comply with the provisions of this
29 subsection.

30 13. For the family investment program share of the
31 costs to develop and maintain a new, integrated eligibility
32 determination system:

33 \$ 5,050,451

34 14. a. Notwithstanding any provision to the contrary,
35 including but not limited to requirements in section 8.41 or

1 provisions in 2012 or 2013 Iowa Acts regarding the receipt and
 2 appropriation of federal block grants, federal funds from the
 3 temporary assistance for needy families block grant received
 4 by the state not otherwise appropriated in this section and
 5 remaining available for the fiscal year beginning July 1,
 6 2013, are appropriated to the department of human services to
 7 the extent as may be necessary to be used in the following
 8 priority order: the family investment program, for state child
 9 care assistance program payments for individuals enrolled
 10 in the family investment program who are employed, and for
 11 the family investment program share of costs to develop and
 12 maintain a new, integrated eligibility determination system.
 13 The federal funds appropriated in this paragraph "a" shall be
 14 expended only after all other funds appropriated in subsection
 15 1 for the assistance under the family investment program, in
 16 subsection 6 for child care assistance, or in subsection 13 for
 17 the family investment program share of the costs to develop and
 18 maintain a new, integrated eligibility determination system, as
 19 applicable, have been expended.

20 b. The department shall, on a quarterly basis, advise the
 21 legislative services agency and department of management of
 22 the amount of funds appropriated in this subsection that was
 23 expended in the prior quarter.

24 15. Of the amounts appropriated in this section,
 25 \$12,962,008 for the fiscal year beginning July 1, 2013, shall
 26 be transferred to the appropriation of the federal social
 27 services block grant made to the department of human services
 28 for that fiscal year.

29 16. For continuation of the program providing categorical
 30 eligibility for the food assistance program as specified for
 31 the program in the section of this division relating to the
 32 family investment program account:

33 \$ 25,000

34 17. The department may transfer funds allocated in this
 35 section to the appropriations made in this division of this Act

1 for the same fiscal year for general administration and field
2 operations for resources necessary to implement and operate the
3 services referred to in this section and those funded in the
4 appropriation made in this division of this Act for the same
5 fiscal year for the family investment program from the general
6 fund of the state.

7 Sec. 7. FAMILY INVESTMENT PROGRAM ACCOUNT.

8 1. Moneys credited to the family investment program (FIP)
9 account for the fiscal year beginning July 1, 2013, and
10 ending June 30, 2014, shall be used to provide assistance in
11 accordance with chapter 239B.

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

15 3. The department may transfer funds allocated in this
16 section to the appropriations made in this division of this Act
17 for the same fiscal year for general administration and field
18 operations for resources necessary to implement and operate the
19 services referred to in this section and those funded in the
20 appropriation made in this division of this Act for the same
21 fiscal year for the family investment program from the general
22 fund of the state.

23 4. Moneys appropriated in this division of this Act and
24 credited to the FIP account for the fiscal year beginning July
25 1, 2013, and ending June 30, 2014, are allocated as follows:

26 a. To be retained by the department of human services to
27 be used for coordinating with the department of human rights
28 to more effectively serve participants in the FIP program and
29 other shared clients and to meet federal reporting requirements
30 under the federal temporary assistance for needy families block
31 grant:

32 \$ 20,000

33 b. To the department of human rights for staffing,
34 administration, and implementation of the family development
35 and self-sufficiency grant program in accordance with section

1 216A.107:

2 \$ 6,500,000

3 (1) Of the funds allocated for the family development and
4 self-sufficiency grant program in this lettered paragraph,
5 not more than 5 percent of the funds shall be used for the
6 administration of the grant program.

7 (2) The department of human rights may continue to implement
8 the family development and self-sufficiency grant program
9 statewide during fiscal year 2013-2014.

10 c. For the diversion subaccount of the FIP account:

11 \$ 1,698,400

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

22 d. For the food assistance employment and training program:

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 \$ 19,690,816

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

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

31 Sec. 8. FAMILY INVESTMENT PROGRAM GENERAL FUND. There
32 is appropriated from the general fund of the state to the
33 department of human services for the fiscal year beginning July
34 1, 2013, and ending June 30, 2014, the following amount, or
35 so much thereof as is necessary, to be used for the purpose

1 designated:

2 To be credited to the family investment program (FIP)
3 account and used for family investment program assistance under
4 chapter 239B:

5 \$ 48,894,380

6 1. Of the funds appropriated in this section, \$7,824,377 is
7 allocated for the JOBS program.

8 2. Of the funds appropriated in this section, \$3,621,020 is
9 allocated for the family development and self-sufficiency grant
10 program.

11 3. Notwithstanding section 8.39, for the fiscal year
12 beginning July 1, 2013, if necessary to meet federal
13 maintenance of effort requirements or to transfer federal
14 temporary assistance for needy families block grant funding
15 to be used for purposes of the federal social services block
16 grant or to meet cash flow needs resulting from delays in
17 receiving federal funding or to implement, in accordance with
18 this division of this Act, activities currently funded with
19 juvenile court services, county, or community moneys and state
20 moneys used in combination with such moneys, the department
21 of human services may transfer funds within or between any
22 of the appropriations made in this division of this Act and
23 appropriations in law for the federal social services block
24 grant to the department for the following purposes, provided
25 that the combined amount of state and federal temporary
26 assistance for needy families block grant funding for each
27 appropriation remains the same before and after the transfer:

28 a. For the family investment program.

29 b. For child care assistance.

30 c. For child and family services.

31 d. For field operations.

32 e. For general administration.

33 f. For distribution to counties or regions for services to
34 persons with mental illness or an intellectual disability.

35 This subsection shall not be construed to prohibit the use

1 of existing state transfer authority for other purposes. The
2 department shall report any transfers made pursuant to this
3 subsection to the legislative services agency.

4 4. Of the funds appropriated in this section, \$195,678 shall
5 be used for continuation of a grant to an Iowa-based nonprofit
6 organization with a history of providing tax preparation
7 assistance to low-income Iowans in order to expand the usage of
8 the earned income tax credit. The purpose of the grant is to
9 supply this assistance to underserved areas of the state.

10 5. Of the funds appropriated in this section, \$40,000 shall
11 be used to fund the expansion of an unfunded pilot project, as
12 defined in 441 IAC 100.1, that has been in existence for at
13 least six months, relating to parental obligations, in which
14 the child support recovery unit participates, to support the
15 efforts of a nonprofit organization committed to strengthening
16 the community through youth development, healthy living, and
17 social responsibility in a county with a population over
18 350,000. The funds allocated in this subsection shall be used
19 by the recipient organization to develop a larger community
20 effort, through public and private partnerships, to support
21 a broad-based fatherhood initiative that promotes payment of
22 child support obligations, improved family relationships, and
23 full-time employment.

24 6. The department may transfer funds appropriated in this
25 section to the appropriations made in this division of this Act
26 for general administration and field operations as necessary
27 to administer this section and the overall family investment
28 program.

29 Sec. 9. CHILD SUPPORT RECOVERY. There is appropriated
30 from the general fund of the state to the department of human
31 services for the fiscal year beginning July 1, 2013, and ending
32 June 30, 2014, the following amount, or so much thereof as is
33 necessary, to be used for the purposes designated:

34 For child support recovery, including salaries, support,
35 maintenance, and miscellaneous purposes, and for not more than

1 the following full-time equivalent positions:

2	\$ 14,173,770
3	FTEs 464.00

4 1. The department shall expend up to \$24,329, including
5 federal financial participation, for the fiscal year beginning
6 July 1, 2013, for a child support public awareness campaign.
7 The department and the office of the attorney general shall
8 cooperate in continuation of the campaign. The public
9 awareness campaign shall emphasize, through a variety of
10 media activities, the importance of maximum involvement of
11 both parents in the lives of their children as well as the
12 importance of payment of child support obligations.

13 2. Federal access and visitation grant moneys shall be
14 issued directly to private not-for-profit agencies that provide
15 services designed to increase compliance with the child access
16 provisions of court orders, including but not limited to
17 neutral visitation sites and mediation services.

18 3. The appropriation made to the department for child
19 support recovery may be used throughout the fiscal year in the
20 manner necessary for purposes of cash flow management, and for
21 cash flow management purposes the department may temporarily
22 draw more than the amount appropriated, provided the amount
23 appropriated is not exceeded at the close of the fiscal year.

24 4. With the exception of the funding amount specified, the
25 requirements established under 2001 Iowa Acts, chapter 191,
26 section 3, subsection 5, paragraph "c", subparagraph (3), shall
27 be applicable to parental obligation pilot projects for the
28 fiscal year beginning July 1, 2013, and ending June 30, 2014.
29 Notwithstanding 441 IAC 100.8, providing for termination of
30 rules relating to the pilot projects, the rules shall remain
31 in effect until June 30, 2014.

32 Sec. 10. HEALTH CARE TRUST FUND — MEDICAL ASSISTANCE —
33 FY 2013-2014. Any funds remaining in the health care trust
34 fund created in section 453A.35A for the fiscal year beginning
35 July 1, 2013, and ending June 30, 2014, are appropriated to

1 the department of human services to supplement the medical
2 assistance program appropriations made in this division of this
3 Act, for medical assistance reimbursement and associated costs,
4 including program administration and costs associated with
5 program implementation.

6 Sec. 11. MEDICAL ASSISTANCE. 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, 2013, and ending June 30,
9 2014, the following amount, or so much thereof as is necessary,
10 to be used for the purpose designated:

11 For medical assistance program reimbursement and associated
12 costs as specifically provided in the reimbursement
13 methodologies in effect on June 30, 2013, except as otherwise
14 expressly authorized by law, and consistent with options under
15 federal law and regulations:

16 \$ 1,301,686,445

17 1. The funds appropriated in this section shall be used
18 in accordance with 2011 Iowa Acts, chapter 129, section 10,
19 subsection 1.

20 2. The department shall utilize not more than \$60,000 of
21 the funds appropriated in this section to continue the AIDS/HIV
22 health insurance premium payment program as established in 1992
23 Iowa Acts, Second Extraordinary Session, chapter 1001, section
24 409, subsection 6. Of the funds allocated in this subsection,
25 not more than \$5,000 may be expended for administrative
26 purposes.

27 3. Of the funds appropriated in this Act to the department
28 of public health for addictive disorders, \$950,000 for the
29 fiscal year beginning July 1, 2013, shall be transferred
30 to the department of human services for an integrated
31 substance-related disorder managed care system. The department
32 shall not assume management of the substance-related disorder
33 system in place of the managed care contractor unless such
34 a change in approach is specifically authorized in law.
35 The departments of human services and public health shall

1 work together to maintain the level of mental health and
2 substance-related disorder treatment services provided by the
3 managed care contractor through the Iowa plan for behavioral
4 health. Each department shall take the steps necessary to
5 continue the federal waivers as necessary to maintain the level
6 of services.

7 4. a. The department shall aggressively pursue options for
8 providing medical assistance or other assistance to individuals
9 with special needs who become ineligible to continue receiving
10 services under the early and periodic screening, diagnostic,
11 and treatment program under the medical assistance program
12 due to becoming 21 years of age who have been approved for
13 additional assistance through the department's exception to
14 policy provisions, but who have health care needs in excess
15 of the funding available through the exception to policy
16 provisions.

17 b. Of the funds appropriated in this section, \$100,000
18 shall be used for participation in one or more pilot projects
19 operated by a private provider to allow the individual or
20 individuals to receive service in the community in accordance
21 with principles established in *Olmstead v. L.C.*, 527 U.S. 581
22 (1999), for the purpose of providing medical assistance or
23 other assistance to individuals with special needs who become
24 ineligible to continue receiving services under the early and
25 periodic screening, diagnostic, and treatment program under
26 the medical assistance program due to becoming 21 years of
27 age who have been approved for additional assistance through
28 the department's exception to policy provisions, but who have
29 health care needs in excess of the funding available through
30 the exception to the policy provisions.

31 5. Of the funds appropriated in this section, up to
32 \$3,050,082 may be transferred to the field operations or
33 general administration appropriations in this division of this
34 Act for operational costs associated with Part D of the federal
35 Medicare Prescription Drug Improvement and Modernization Act

1 of 2003, Pub. L. No. 108-173.

2 6. Of the funds appropriated in this section, up to \$442,100
3 may be transferred to the appropriation in this division
4 of this Act for medical contracts to be used for clinical
5 assessment services and prior authorization of services.

6 7. A portion of the funds appropriated in this section
7 may be transferred to the appropriations in this division of
8 this Act for general administration, medical contracts, the
9 children's health insurance program, or field operations to be
10 used for the state match cost to comply with the payment error
11 rate measurement (PERM) program for both the medical assistance
12 and children's health insurance programs as developed by the
13 centers for Medicare and Medicaid services of the United States
14 department of health and human services to comply with the
15 federal Improper Payments Information Act of 2002, Pub. L. No.
16 107-300.

17 8. It is the intent of the general assembly that the
18 department continue to implement the recommendations of
19 the assuring better child health and development initiative
20 II (ABCDII) clinical panel to the Iowa early and periodic
21 screening, diagnostic, and treatment services healthy mental
22 development collaborative board regarding changes to billing
23 procedures, codes, and eligible service providers.

24 9. Of the funds appropriated in this section, a sufficient
25 amount is allocated to supplement the incomes of residents of
26 nursing facilities, intermediate care facilities for persons
27 with mental illness, and intermediate care facilities for
28 persons with an intellectual disability, with incomes of less
29 than \$50 in the amount necessary for the residents to receive a
30 personal needs allowance of \$50 per month pursuant to section
31 249A.30A.

32 10. Of the funds appropriated in this section, the following
33 amounts shall be transferred to the appropriations made in this
34 division of this Act for the state mental health institutes:

35 a. Cherokee mental health institute..... \$ 9,098,425

- 1 b. Clarinda mental health institute..... \$ 1,977,305
- 2 c. Independence mental health institute..... \$ 9,045,894
- 3 d. Mount Pleasant mental health institute..... \$ 5,752,587

4 11. a. Of the funds appropriated in this section,
5 \$7,969,074 is allocated for the state match for a
6 disproportionate share hospital payment of \$19,133,430 to
7 hospitals that meet both of the conditions specified in
8 subparagraphs (1) and (2). In addition, the hospitals that
9 meet the conditions specified shall either certify public
10 expenditures or transfer to the medical assistance program
11 an amount equal to provide the nonfederal share for a
12 disproportionate share hospital payment of \$7,500,000. The
13 hospitals that meet the conditions specified shall receive and
14 retain 100 percent of the total disproportionate share hospital
15 payment of \$26,633,430.

16 (1) The hospital qualifies for disproportionate share and
17 graduate medical education payments.

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

22 b. Distribution of the disproportionate share payments
23 shall be made on a monthly basis. The total amount of
24 disproportionate share payments including graduate medical
25 education, enhanced disproportionate share, and Iowa
26 state-owned teaching hospital payments shall not exceed the
27 amount of the state's allotment under Pub. L. No. 102-234.
28 In addition, the total amount of all disproportionate
29 share payments shall not exceed the hospital-specific
30 disproportionate share limits under Pub. L. No. 103-66.

31 12. The university of Iowa hospitals and clinics shall
32 either certify public expenditures or transfer to the
33 appropriations made in this division of this Act for medical
34 assistance an amount equal to provide the nonfederal share
35 for increased medical assistance payments for inpatient and

1 outpatient hospital services of \$9,900,000. The university of
2 Iowa hospitals and clinics shall receive and retain 100 percent
3 of the total increase in medical assistance payments.

4 13. Of the funds appropriated in this section, up to
5 \$11,921,225 may be transferred to the IowaCare account created
6 in section 249J.24.

7 14. One hundred percent of the nonfederal share of payments
8 to area education agencies that are medical assistance
9 providers for medical assistance-covered services provided to
10 medical assistance-covered children, shall be made from the
11 appropriation made in this section.

12 15. Any new or renewed contract entered into by the
13 department with a third party to administer behavioral health
14 services under the medical assistance program shall provide
15 that any interest earned on payments from the state during
16 the state fiscal year shall be remitted to the department
17 and treated as recoveries to offset the costs of the medical
18 assistance program.

19 16. The department shall continue to implement the
20 provisions in 2007 Iowa Acts, chapter 218, section 124 and
21 section 126, as amended by 2008 Iowa Acts, chapter 1188,
22 section 55, relating to eligibility for certain persons with
23 disabilities under the medical assistance program in accordance
24 with the federal Family Opportunity Act.

25 17. A portion of the funds appropriated in this section
26 may be transferred to the appropriation in this division of
27 this Act for medical contracts to be used for administrative
28 activities associated with the money follows the person
29 demonstration project.

30 18. Of the funds appropriated in this section, \$349,011
31 shall be used for the administration of the health insurance
32 premium payment program, including salaries, support,
33 maintenance, and miscellaneous purposes.

34 19. a. The department shall implement the following cost
35 containment strategies for the medical assistance program and

1 shall adopt emergency rules for such implementation:

2 (1) Notwithstanding any provision of law to the contrary,
3 the department shall integrate medical assistance program
4 habilitation services into the Iowa plan contract for the
5 fiscal year beginning July 1, 2013.

6 (2) The department shall require prior authorization for
7 provision of any home health services for adults in excess of
8 one hundred visits per year.

9 (3) The department shall prohibit coverage for elective,
10 nonmedically necessary cesarean sections.

11 (4) The department shall require prior authorization based
12 on specified criteria before providing reimbursement for
13 hospital swing bed placements and continued stays.

14 (5) The department shall align payment methodologies and
15 rates between medical and nonmedical transportation services
16 through the transportation brokerage provider.

17 (6) The department shall require that all fees for employee
18 records checks shall be paid by the medical assistance home and
19 community-based waiver services consumer-directed attendant
20 care or consumer choices option provider, with the exception
21 of one initial state records check per employee which shall be
22 paid by the Iowa Medicaid enterprise.

23 (7) The department shall require transition of the
24 provision by individual providers of personal care under the
25 consumer-directed attendant care option to agency-provided
26 personal care services and shall retain the consumer choice
27 option for those individuals able and desiring to self-direct
28 services.

29 (8) The department shall require that persons with an
30 intellectual disability receiving services under the medical
31 assistance program receive a functional assessment utilizing
32 the supports intensity scale tool. The department shall
33 contract with an independent entity to perform the functional
34 assessments. The department shall implement a tiered resource
35 allocation methodology for service plans under the medical

1 assistance home and community-based services waiver for persons
2 with an intellectual disability.

3 (9) The department shall develop a new reimbursement
4 methodology for medical assistance targeted case management
5 that applies appropriate cost limits.

6 (10) The department shall implement an integrated health
7 home approach under the medical assistance program for persons
8 with chronic mental illness. The approach shall integrate the
9 functions of medical assistance targeted case management.

10 (11) The department shall expand the categories of diabetic
11 supplies for which a rebate may be received.

12 (12) The department shall limit initial authorizations
13 for institutional-based care to 30 days for members following
14 discharge from a hospital if the member previously lived in a
15 community-based setting.

16 b. The department shall not implement the cost containment
17 strategy to require a primary care referral for the provision
18 of chiropractic services.

19 c. The department may increase the amounts allocated for
20 salaries, support, maintenance, and miscellaneous purposes
21 associated with the medical assistance program, as necessary,
22 to implement the cost containment strategies. The department
23 shall report any such increase to the legislative services
24 agency and the department of management.

25 d. If the savings to the medical assistance program exceed
26 the cost for the fiscal year, the department may transfer any
27 savings generated for the fiscal year due to medical assistance
28 program cost containment efforts to the appropriation
29 made in this division of this Act for medical contracts or
30 general administration to defray the increased contract costs
31 associated with implementing such efforts.

32 e. The department shall report the implementation of
33 any cost containment strategies under this subsection to
34 the individuals specified in this division of this Act for
35 submission of reports on a quarterly basis.

1 20. Of the funds appropriated in this section, \$11,549,479
2 shall be used to implement reductions in the waiting lists
3 of all medical assistance home and community-based services
4 waivers.

5 21. a. Of the funds appropriated in this section, \$900,000
6 shall be used to implement the children's mental health
7 home project proposed by the department of human services
8 and reported to the general assembly's mental health and
9 disability services study committee in December 2011. Of this
10 amount, up to \$50,000 may be transferred by the department to
11 the appropriation made in this division of this Act to the
12 department for the same fiscal year for general administration
13 to be used for associated administrative expenses and for not
14 more than one full-time equivalent position, in addition to
15 those authorized for the same fiscal year, to be assigned to
16 implementing the project.

17 b. Of the funds appropriated in this section, up to \$400,000
18 may be transferred by the department to the appropriation
19 made to the department in this division of this Act for
20 the same fiscal year for general administration to support
21 the redesign of mental health and disability services and
22 the state balancing incentive payments program planning and
23 implementation activities. The funds may be used for contracts
24 or for personnel in addition to the amounts appropriated for
25 and the positions authorized for general administration for the
26 same fiscal year.

27 c. Of the funds appropriated in this section, up to
28 \$3,000,000 may be transferred by the department to the
29 appropriations made to the department in this division of
30 this Act for the same fiscal year for general administration
31 or medical contracts to be used to support the development
32 and implementation of standardized assessment tools for
33 persons with mental illness, an intellectual disability, a
34 developmental disability, or a brain injury.

35 d. For the fiscal year beginning July 1, 2013, and ending

1 June 30, 2014, the replacement generation tax revenues required
2 to be deposited in the property tax relief fund pursuant to
3 section 437A.8, subsection 4, paragraph "d", and section
4 437A.15, subsection 3, paragraph "f", shall instead be credited
5 to and supplement the appropriation made in this section and
6 used for the allocations made in this subsection.

7 22. Of the funds appropriated in this section, \$250,000
8 shall be used for lodging expenses associated with care
9 provided at the university of Iowa hospitals and clinics
10 under chapter 249J for patients with cancer whose travel
11 distance is 30 miles or more from the university of Iowa
12 hospitals and clinics. The department of human services
13 shall establish the maximum number of overnight stays and the
14 maximum rate reimbursed for overnight lodging, which may be
15 based on the state employee rate established by the department
16 of administrative services. The funds allocated in this
17 subsection shall not be used as nonfederal share matching
18 funds.

19 23. The department shall continue to administer the state
20 balancing incentive payments program as specified in 2012 Iowa
21 Acts, chapter 1133, section 14.

22 Sec. 12. MEDICAL CONTRACTS. There is appropriated from the
23 general fund of the state to the department of human services
24 for the fiscal year beginning July 1, 2013, and ending June 30,
25 2014, the following amount, or so much thereof as is necessary,
26 to be used for the purpose designated:

27 For medical contracts:

28 \$ 14,225,569

29 1. The department of inspections and appeals shall
30 provide all state matching funds for survey and certification
31 activities performed by the department of inspections
32 and appeals. The department of human services is solely
33 responsible for distributing the federal matching funds for
34 such activities.

35 2. Of the funds appropriated in this section, \$50,000 shall

1 be used for continuation of home and community-based services
2 waiver quality assurance programs, including the review and
3 streamlining of processes and policies related to oversight and
4 quality management to meet state and federal requirements.

5 3. Of the amount appropriated in this section, up to
6 \$200,000 may be transferred to the appropriation for general
7 administration in this division of this Act to be used for
8 additional full-time equivalent positions in the development of
9 key health initiatives such as cost containment, development
10 and oversight of managed care programs, and development of
11 health strategies targeted toward improved quality and reduced
12 costs in the Medicaid program.

13 4. Of the funds appropriated in this section, \$64,398 shall
14 be used for provision of the IowaCare program nurse helpline
15 for the expansion population as provided in section 249J.6.

16 5. Of the funds appropriated in this section, \$80,000 shall
17 be used for costs related to audits, performance evaluations,
18 and studies required pursuant to chapter 249J.

19 6. Of the funds appropriated in this section, \$194,654 shall
20 be used for administrative costs associated with chapter 249J.

21 7. Of the funds appropriated in this section, \$1,000,000
22 shall be used for planning and development, in cooperation with
23 the department of public health, of a phased-in program to
24 provide a dental home for children in accordance with section
25 249J.14.

26 8. Of the funds appropriated in this section, \$270,000 shall
27 be used for payment to the publicly owned acute care teaching
28 hospital located in a county with a population of over 350,000
29 that is a participating provider pursuant to chapter 249J.
30 Disbursements under this subsection shall be made monthly.
31 The hospital shall submit a report following the close of
32 the fiscal year regarding use of the funds allocated in this
33 subsection to the persons specified in this Act to receive
34 reports.

35 9. Of the funds appropriated in this section, \$100,000 shall

1 be used for continuation of an accountable care organization
2 pilot project.

3 10. Of the funds appropriated in this section, \$75,000 shall
4 be used for continued implementation of a uniform cost report.

5 11. Of the funds appropriated in this section, \$3,300,000
6 shall be used for the autism support program created in chapter
7 225D, as enacted in this Act.

8 12. Of the funds appropriated in this section, \$534,000
9 shall be used for administration of the state innovation models
10 initiative grant from the federal government to support the
11 development and testing of a state-based model for multi-payer
12 payment and health care delivery system transformation to
13 improve health system performance resulting in improved health,
14 improved health care, and lower costs.

15 Sec. 13. STATE SUPPLEMENTARY ASSISTANCE.

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, 2013, and ending June 30, 2014, the following
19 amount, or so much thereof as is necessary, to be used for the
20 purpose designated:

21 For the state supplementary assistance program:
22 \$ 16,512,174

23 2. The department shall increase the personal needs
24 allowance for residents of residential care facilities by the
25 same percentage and at the same time as federal supplemental
26 security income and federal social security benefits are
27 increased due to a recognized increase in the cost of living.
28 The department may adopt emergency rules to implement this
29 subsection.

30 3. If during the fiscal year beginning July 1, 2013,
31 the department projects that state supplementary assistance
32 expenditures for a calendar year will not meet the federal
33 pass-through requirement specified in Tit. XVI of the federal
34 Social Security Act, section 1618, as codified in 42 U.S.C.
35 § 1382g, the department may take actions including but not

1 limited to increasing the personal needs allowance for
2 residential care facility residents and making programmatic
3 adjustments or upward adjustments of the residential care
4 facility or in-home health-related care reimbursement rates
5 prescribed in this division of this Act to ensure that federal
6 requirements are met. In addition, the department may make
7 other programmatic and rate adjustments necessary to remain
8 within the amount appropriated in this section while ensuring
9 compliance with federal requirements. The department may adopt
10 emergency rules to implement the provisions of this subsection.

11 Sec. 14. CHILDREN'S HEALTH INSURANCE PROGRAM.

12 1. There is appropriated from the general fund of the
13 state to the department of human services for the fiscal year
14 beginning July 1, 2013, and ending June 30, 2014, the following
15 amount, or so much thereof as is necessary, to be used for the
16 purpose designated:

17 For maintenance of the healthy and well kids in Iowa (hawk-i)
18 program pursuant to chapter 514I, including supplemental dental
19 services, for receipt of federal financial participation under
20 Tit. XXI of the federal Social Security Act, which creates the
21 children's health insurance program:

22 \$ 36,806,102

23 2. Of the funds appropriated in this section, \$141,450 is
24 allocated for continuation of the contract for outreach with
25 the department of public health.

26 Sec. 15. CHILD CARE ASSISTANCE. There is appropriated
27 from the general fund of the state to the department of human
28 services for the fiscal year beginning July 1, 2013, and ending
29 June 30, 2014, the following amount, or so much thereof as is
30 necessary, to be used for the purpose designated:

31 For child care programs:

32 \$ 69,282,163

33 1. Of the funds appropriated in this section, \$68,248,353
34 shall be used for state child care assistance in accordance
35 with section 237A.13.

1 2. Nothing in this section shall be construed or is
2 intended as or shall imply a grant of entitlement for services
3 to persons who are eligible for assistance due to an income
4 level consistent with the waiting list requirements of section
5 237A.13. Any state obligation to provide services pursuant to
6 this section is limited to the extent of the funds appropriated
7 in this section.

8 3. Of the funds appropriated in this section, \$432,453 is
9 allocated for the statewide program for child care resource
10 and referral services under section 237A.26. A list of the
11 registered and licensed child care facilities operating in the
12 area served by a child care resource and referral service shall
13 be made available to the families receiving state child care
14 assistance in that area.

15 4. Of the funds appropriated in this section, \$936,974
16 is allocated for child care quality improvement initiatives
17 including but not limited to the voluntary quality rating
18 system in accordance with section 237A.30.

19 5. Of the funds appropriated in this section, \$135,178 shall
20 be used to conduct fingerprint-based national criminal history
21 record checks of home-based child care providers pursuant
22 to section 237A.5, subsection 2, through the United States
23 department of justice, federal bureau of investigation.

24 6. Of the amount appropriated in this section, up to
25 \$25,000 shall be used to implement a searchable internet-based
26 application as part of the consumer information made available
27 under section 237A.25. The application shall provide a listing
28 of the child care providers in this state that have received
29 a rating under the quality rating system implemented pursuant
30 to section 237A.30 and information on whether a provider
31 specializes in child care for infants, school-age children,
32 children with special needs, or other populations or provides
33 any other specialized services to support family needs.

34 7. Of the amount appropriated in this section, up to \$75,000
35 shall be used by the department to conduct an independent

1 evaluation of Iowa's child care quality rating system. The
2 evaluation shall address the system's strengths and weaknesses,
3 and shall provide recommendations for change. The department
4 shall submit a final report on or before December 16, 2013, to
5 the governor and general assembly concerning the evaluation.
6 The evaluation shall also include but is not limited to all of
7 the following:

8 a. An assessment of the validity of the system's key
9 underlying concepts.

10 b. An assessment of the techniques utilized and
11 psychometric properties of the measures used in the system to
12 assess quality.

13 c. An analysis of the outputs quantified by the rating
14 process.

15 d. An analysis of the relationship between the ratings
16 utilized and child outcomes realized.

17 8. The department shall change the standard period for
18 redetermining the eligibility of a state child care assistance
19 program participant to 12 months and increase the income
20 eligibility for employed families under the program to 148
21 percent of the federal poverty level, in accordance with the
22 amendments in this Act to section 237A.13.

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

1 or innovation projects.

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

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

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

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

35 Sec. 16. JUVENILE INSTITUTIONS. There is appropriated

1 from the general fund of the state to the department of human
2 services for the fiscal year beginning July 1, 2013, and ending
3 June 30, 2014, the following amounts, or so much thereof as is
4 necessary, to be used for the purposes designated:

5 1. For operation of the Iowa juvenile home at Toledo and for
6 salaries, support, maintenance, and miscellaneous purposes, and
7 for not more than the following full-time equivalent positions:
8 \$ 8,859,355
9 FTEs 114.00

10 2. For operation of the state training school at Eldora and
11 for salaries, support, maintenance, and miscellaneous purposes,
12 and for not more than the following full-time equivalent
13 positions:
14 \$ 11,256,969
15 FTEs 164.30

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

21 3. A portion of the moneys appropriated in this section
22 shall be used by the state training school and by the Iowa
23 juvenile home for grants for adolescent pregnancy prevention
24 activities at the institutions in the fiscal year beginning
25 July 1, 2013.

26 Sec. 17. CHILD AND FAMILY SERVICES.

27 1. There is appropriated from the general fund of the
28 state to the department of human services for the fiscal year
29 beginning July 1, 2013, and ending June 30, 2014, the following
30 amount, or so much thereof as is necessary, to be used for the
31 purpose designated:

32 For child and family services:
33 \$ 96,613,770

34 2. Up to \$5,200,000 of the amount of federal temporary
35 assistance for needy families block grant funding appropriated

1 in this division of this Act for child and family services
2 shall be made available for purposes of juvenile delinquent
3 graduated sanction services.

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

14 4. a. Of the funds appropriated in this section, up to
15 \$36,012,098 is allocated as the statewide expenditure target
16 under section 232.143 for group foster care maintenance and
17 services. If the department projects that such expenditures
18 for the fiscal year will be less than the target amount
19 allocated in this lettered paragraph, the department may
20 reallocate the excess to provide additional funding for shelter
21 care or the child welfare emergency services addressed with the
22 allocation for shelter care.

23 b. If at any time after September 30, 2013, annualization
24 of a service area's current expenditures indicates a service
25 area is at risk of exceeding its group foster care expenditure
26 target under section 232.143 by more than 5 percent, the
27 department and juvenile court services shall examine all
28 group foster care placements in that service area in order to
29 identify those which might be appropriate for termination.
30 In addition, any aftercare services believed to be needed
31 for the children whose placements may be terminated shall be
32 identified. The department and juvenile court services shall
33 initiate action to set dispositional review hearings for the
34 placements identified. In such a dispositional review hearing,
35 the juvenile court shall determine whether needed aftercare

1 services are available and whether termination of the placement
2 is in the best interest of the child and the community.

3 5. In accordance with the provisions of section 232.188,
4 the department shall continue the child welfare and juvenile
5 justice funding initiative during fiscal year 2013-2014. Of
6 the funds appropriated in this section, \$1,717,753 is allocated
7 specifically for expenditure for fiscal year 2013-2014 through
8 the decategorization service funding pools and governance
9 boards established pursuant to section 232.188.

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

15 7. Notwithstanding section 234.35 or any other provision
16 of law to the contrary, state funding for shelter care and
17 the child welfare emergency services contracting implemented
18 to provide for or prevent the need for shelter care shall be
19 limited to \$7,616,048.

20 8. Federal funds received by the state during the fiscal
21 year beginning July 1, 2013, as the result of the expenditure
22 of state funds appropriated during a previous state fiscal
23 year for a service or activity funded under this section are
24 appropriated to the department to be used as additional funding
25 for services and purposes provided for under this section.
26 Notwithstanding section 8.33, moneys received in accordance
27 with this subsection that remain unencumbered or unobligated at
28 the close of the fiscal year shall not revert to any fund but
29 shall remain available for the purposes designated until the
30 close of the succeeding fiscal year.

31 9. a. Of the funds appropriated in this section, up to
32 \$3,290,000 is allocated for the payment of the expenses of
33 court-ordered services provided to juveniles who are under the
34 supervision of juvenile court services, which expenses are a
35 charge upon the state pursuant to section 232.141, subsection

1 4. Of the amount allocated in this lettered paragraph, up to
2 \$1,556,287 shall be made available to provide school-based
3 supervision of children adjudicated under chapter 232, of which
4 not more than \$15,000 may be used for the purpose of training.
5 A portion of the cost of each school-based liaison officer
6 shall be paid by the school district or other funding source as
7 approved by the chief juvenile court officer.

8 b. Of the funds appropriated in this section, up to \$748,985
9 is allocated for the payment of the expenses of court-ordered
10 services provided to children who are under the supervision
11 of the department, which expenses are a charge upon the state
12 pursuant to section 232.141, subsection 4.

13 c. Notwithstanding section 232.141 or any other provision
14 of law to the contrary, the amounts allocated in this
15 subsection shall be distributed to the judicial districts
16 as determined by the state court administrator and to the
17 department's service areas as determined by the administrator
18 of the department's division of child and family services. The
19 state court administrator and the division administrator shall
20 make the determination of the distribution amounts on or before
21 June 15, 2013.

22 d. Notwithstanding chapter 232 or any other provision of
23 law to the contrary, a district or juvenile court shall not
24 order any service which is a charge upon the state pursuant
25 to section 232.141 if there are insufficient court-ordered
26 services funds available in the district court or departmental
27 service area distribution amounts to pay for the service. The
28 chief juvenile court officer and the departmental service area
29 manager shall encourage use of the funds allocated in this
30 subsection such that there are sufficient funds to pay for
31 all court-related services during the entire year. The chief
32 juvenile court officers and departmental service area managers
33 shall attempt to anticipate potential surpluses and shortfalls
34 in the distribution amounts and shall cooperatively request the
35 state court administrator or division administrator to transfer

1 funds between the judicial districts' or departmental service
2 areas' distribution amounts as prudent.

3 e. Notwithstanding any provision of law to the contrary,
4 a district or juvenile court shall not order a county to pay
5 for any service provided to a juvenile pursuant to an order
6 entered under chapter 232 which is a charge upon the state
7 under section 232.141, subsection 4.

8 f. Of the funds allocated in this subsection, not more than
9 \$83,000 may be used by the judicial branch for administration
10 of the requirements under this subsection.

11 g. Of the funds allocated in this subsection, \$17,000
12 shall be used by the department of human services to support
13 the interstate commission for juveniles in accordance with
14 the interstate compact for juveniles as provided in section
15 232.173.

16 10. Of the funds appropriated in this section, \$9,053,226 is
17 allocated for juvenile delinquent graduated sanctions services.
18 Any state funds saved as a result of efforts by juvenile court
19 services to earn federal Tit. IV-E match for juvenile court
20 services administration may be used for the juvenile delinquent
21 graduated sanctions services.

22 11. Of the funds appropriated in this section, \$1,933,285
23 shall be transferred to the department of public health to be
24 used for equalization and renewal of the grants under the child
25 protection center grant program in accordance with section
26 135.118. Of the amount allocated in this subsection, \$245,000
27 shall be used for a center in the Black Hawk county area.

28 12. If the department receives federal approval to
29 implement a waiver under Tit. IV-E of the federal Social
30 Security Act to enable providers to serve children who remain
31 in the children's families and communities, for purposes of
32 eligibility under the medical assistance program, children who
33 participate in the waiver shall be considered to be placed in
34 foster care.

35 13. Of the funds appropriated in this section, \$3,256,980 is

1 allocated for the preparation for adult living program pursuant
2 to section 234.46.

3 14. Of the funds appropriated in this section, \$1,000,000
4 shall be used for juvenile drug courts. The amount allocated
5 in this subsection shall be distributed as follows:

6 To the judicial branch for salaries to assist with the
7 operation of juvenile drug court programs operated in the
8 following jurisdictions:

- 9 a. Marshall county:
- 10 \$ 99,540
- 11 b. Woodbury county:
- 12 \$ 258,804
- 13 c. Polk county:
- 14 \$ 430,843
- 15 d. The third judicial district:
- 16 \$ 111,274
- 17 e. The eighth judicial district:
- 18 \$ 99,539

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

27 16. Of the funds appropriated in this section, \$200,590
28 is allocated for the foster care youth council approach of
29 providing a support network to children placed in foster care.

30 17. Of the funds appropriated in this section, \$202,000 is
31 allocated for use pursuant to section 235A.1 for continuation
32 of the initiative to address child sexual abuse implemented
33 pursuant to 2007 Iowa Acts, chapter 218, section 18, subsection
34 21.

35 18. Of the funds appropriated in this section, \$630,240 is

1 allocated for the community partnership for child protection
2 sites.

3 19. Of the funds appropriated in this section, \$371,250
4 is allocated for the department's minority youth and family
5 projects under the redesign of the child welfare system.

6 20. Of the funds appropriated in this section, \$1,436,595
7 is allocated for funding of the community circle of care
8 collaboration for children and youth in northeast Iowa.

9 21. Of the funds appropriated in this section, at least
10 \$147,158 shall be used for the child welfare training academy.

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

21 23. Of the funds appropriated in this section, \$25,000
22 shall be used for the public purpose of continuing a grant to
23 a hospital-based provider headquartered in a county with a
24 population between 90,000 and 95,000 in the latest certified
25 federal census that provides multiple services including
26 but not limited to diagnostic, therapeutic, and behavioral
27 services to individuals with autism spectrum disorder across
28 the lifespan. The grant recipient shall utilize the funds
29 to continue the pilot project to determine the necessary
30 support services for children with autism spectrum disorder and
31 their families to be included in the children's disabilities
32 services system. The grant recipient shall submit findings and
33 recommendations based upon the results of the pilot project
34 to the individuals specified in this division of this Act for
35 submission of reports by December 31, 2013.

1 24. Of the funds appropriated in this section, \$327,947
2 shall be used for continuation of the central Iowa system of
3 care program grant through June 30, 2014.

4 25. Of the funds appropriated in this section, \$160,000
5 shall be used for the public purpose of the continuation of
6 a system of care grant implemented in Cerro Gordo and Linn
7 counties.

8 26. Of the funds appropriated in this section, at least
9 \$25,000 shall be used to continue and to expand the foster
10 care respite pilot program in which postsecondary students in
11 social work and other human services-related programs receive
12 experience by assisting family foster care providers with
13 respite and other support.

14 27. Of the funds appropriated in this section, up to \$25,000
15 shall be used to implement a children's cabinet under the
16 department of human services, if enacted by 2013 Iowa Acts,
17 Senate File 440 or 2013 successor legislation.

18 Sec. 18. ADOPTION SUBSIDY.

19 1. There is appropriated from the general fund of the
20 state to the department of human services for the fiscal year
21 beginning July 1, 2013, and ending June 30, 2014, the following
22 amount, or so much thereof as is necessary, to be used for the
23 purpose designated:

24 For adoption subsidy payments and services:
25 \$ 35,644,083

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

30 3. Federal funds received by the state during the
31 fiscal year beginning July 1, 2013, as the result of the
32 expenditure of state funds during a previous state fiscal
33 year for a service or activity funded under this section are
34 appropriated to the department to be used as additional funding
35 for the services and activities funded under this section.

1 Notwithstanding section 8.33, moneys received in accordance
2 with this subsection that remain unencumbered or unobligated
3 at the close of the fiscal year shall not revert to any fund
4 but shall remain available for expenditure for the purposes
5 designated until the close of the succeeding fiscal year.

6 Sec. 19. JUVENILE DETENTION HOME FUND. Moneys deposited
7 in the juvenile detention home fund created in section 232.142
8 during the fiscal year beginning July 1, 2013, and ending June
9 30, 2014, are appropriated to the department of human services
10 for the fiscal year beginning July 1, 2013, and ending June 30,
11 2014, for distribution of an amount equal to a percentage of
12 the costs of the establishment, improvement, operation, and
13 maintenance of county or multicounty juvenile detention homes
14 in the fiscal year beginning July 1, 2012. Moneys appropriated
15 for distribution in accordance with this section shall be
16 allocated among eligible detention homes, prorated on the basis
17 of an eligible detention home's proportion of the costs of all
18 eligible detention homes in the fiscal year beginning July
19 1, 2012. The percentage figure shall be determined by the
20 department based on the amount available for distribution for
21 the fund. Notwithstanding section 232.142, subsection 3, the
22 financial aid payable by the state under that provision for the
23 fiscal year beginning July 1, 2013, shall be limited to the
24 amount appropriated for the purposes of this section.

25 Sec. 20. FAMILY SUPPORT SUBSIDY PROGRAM.

26 1. There is appropriated from the general fund of the
27 state to the department of human services for the fiscal year
28 beginning July 1, 2013, and ending June 30, 2014, the following
29 amount, or so much thereof as is necessary, to be used for the
30 purpose designated:

31 For the family support subsidy program subject to the
32 enrollment restrictions in section 225C.37, subsection 3:
33 \$ 1,092,955

34 2. The department shall use at least \$483,500 of the moneys
35 appropriated in this section for the family support center

1 component of the comprehensive family support program under
2 section 225C.47. Not more than \$25,000 of the amount allocated
3 in this subsection shall be used for administrative costs.

4 3. If at any time during the fiscal year, the amount of
5 funding available for the family support subsidy program
6 is reduced from the amount initially used to establish the
7 figure for the number of family members for whom a subsidy
8 is to be provided at any one time during the fiscal year,
9 notwithstanding section 225C.38, subsection 2, the department
10 shall revise the figure as necessary to conform to the amount
11 of funding available.

12 Sec. 21. CONNER DECREE. There is appropriated from the
13 general fund of the state to the department of human services
14 for the fiscal year beginning July 1, 2013, and ending June 30,
15 2014, the following amount, or so much thereof as is necessary,
16 to be used for the purpose designated:

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

21 \$ 33,622

22 Sec. 22. MENTAL HEALTH INSTITUTES. 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, 2013, and ending
25 June 30, 2014, the following amounts, or so much thereof as is
26 necessary, to be used for the purposes designated:

27 1. For the state mental health institute at Cherokee for
28 salaries, support, maintenance, and miscellaneous purposes, and
29 for not more than the following full-time equivalent positions:
30 \$ 5,954,464
31 FTEs 169.20

32 2. For the state mental health institute at Clarinda for
33 salaries, support, maintenance, and miscellaneous purposes, and
34 for not more than the following full-time equivalent positions:
35 \$ 6,751,868

1 FTEs 86.10
 2 3. For the state mental health institute at Independence for
 3 salaries, support, maintenance, and miscellaneous purposes, and
 4 for not more than the following full-time equivalent positions:
 5 \$ 10,318,778
 6 FTEs 233.00
 7 4. For the state mental health institute at Mount Pleasant
 8 for salaries, support, maintenance, and miscellaneous purposes,
 9 and for not more than the following full-time equivalent
 10 positions:
 11 \$ 1,366,686
 12 FTEs 97.92

13 Sec. 23. STATE RESOURCE CENTERS.

14 1. There is appropriated from the general fund of the
 15 state to the department of human services for the fiscal year
 16 beginning July 1, 2013, and ending June 30, 2014, the following
 17 amounts, or so much thereof as is necessary, to be used for the
 18 purposes designated:

19 a. For the state resource center at Glenwood for salaries,
 20 support, maintenance, and miscellaneous purposes:
 21 \$ 20,502,425

22 b. For the state resource center at Woodward for salaries,
 23 support, maintenance, and miscellaneous purposes:
 24 \$ 14,631,359

25 2. The department may continue to bill for state resource
 26 center services utilizing a scope of services approach used for
 27 private providers of ICFID services, in a manner which does not
 28 shift costs between the medical assistance program, counties,
 29 or other sources of funding for the state resource centers.

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

32 4. If the department's administration and the department
 33 of management concur with a finding by a state resource
 34 center's superintendent that projected revenues can reasonably
 35 be expected to pay the salary and support costs for a new

1 employee position, or that such costs for adding a particular
2 number of new positions for the fiscal year would be less
3 than the overtime costs if new positions would not be added,
4 the superintendent may add the new position or positions. If
5 the vacant positions available to a resource center do not
6 include the position classification desired to be filled, the
7 state resource center's superintendent may reclassify any
8 vacant position as necessary to fill the desired position. The
9 superintendents of the state resource centers may, by mutual
10 agreement, pool vacant positions and position classifications
11 during the course of the fiscal year in order to assist one
12 another in filling necessary positions.

13 5. If existing capacity limitations are reached in
14 operating units, a waiting list is in effect for a service or
15 a special need for which a payment source or other funding
16 is available for the service or to address the special need,
17 and facilities for the service or to address the special need
18 can be provided within the available payment source or other
19 funding, the superintendent of a state resource center may
20 authorize opening not more than two units or other facilities
21 and begin implementing the service or addressing the special
22 need during fiscal year 2013-2014.

23 Sec. 24. SEXUALLY VIOLENT PREDATORS.

24 1. There is appropriated from the general fund of the
25 state to the department of human services for the fiscal year
26 beginning July 1, 2013, and ending June 30, 2014, the following
27 amount, or so much thereof as is necessary, to be used for the
28 purpose designated:

29 For costs associated with the commitment and treatment of
30 sexually violent predators in the unit located at the state
31 mental health institute at Cherokee, including costs of legal
32 services and other associated costs, including salaries,
33 support, maintenance, and miscellaneous purposes, and for not
34 more than the following full-time equivalent positions:
35 \$ 11,142,979

1 FTEs 124.50

2 2. Unless specifically prohibited by law, if the amount
3 charged provides for recoupment of at least the entire amount
4 of direct and indirect costs, the department of human services
5 may contract with other states to provide care and treatment
6 of persons placed by the other states at the unit for sexually
7 violent predators at Cherokee. The moneys received under
8 such a contract shall be considered to be repayment receipts
9 and used for the purposes of the appropriation made in this
10 section.

11 Sec. 25. FIELD OPERATIONS. There is appropriated from the
12 general fund of the state to the department of human services
13 for the fiscal year beginning July 1, 2013, and ending June 30,
14 2014, the following amount, or so much thereof as is necessary,
15 to be used for the purposes designated:

16 For field operations, including salaries, support,
17 maintenance, and miscellaneous purposes, and for not more than
18 the following full-time equivalent positions:

19 \$ 67,008,683
20 FTEs 1,837.00

21 1. As a condition of this appropriation, the department
22 shall make every possible effort to fill the entire number of
23 positions authorized by this section and, unless specifically
24 provided otherwise by an applicable collective bargaining
25 agreement, the department is not subject to any approval
26 requirement external to the department to fill a field
27 operations vacancy within the number of full-time equivalent
28 positions authorized by this section. The department shall
29 report on the first of each month to the chairpersons and
30 ranking members of the appropriations committees of the senate
31 and house of representatives, and the persons designated by
32 this Act for submission of reports concerning the status of
33 filling the positions.

34 2. Priority in filling full-time equivalent positions
35 shall be given to those positions related to child protection

1 services and eligibility determination for low-income families.

2 Sec. 26. GENERAL ADMINISTRATION. There is appropriated
3 from the general fund of the state to the department of human
4 services for the fiscal year beginning July 1, 2013, and ending
5 June 30, 2014, the following amount, or so much thereof as is
6 necessary, to be used for the purpose designated:

7 For general administration, including salaries, support,
8 maintenance, and miscellaneous purposes, and for not more than
9 the following full-time equivalent positions:

10	\$ 16,231,171
11	FTEs 309.00

12 1. Of the funds appropriated in this section, \$63,543
13 allocated for the prevention of disabilities policy council
14 established in section 225B.3. Of the amount allocated
15 in this subsection, \$25,000 shall be passed through to the
16 council for the costs involved with holding a summit meeting
17 of the multiple entities providing services to persons with
18 disabilities. The focus of the summit meeting shall be to
19 review existing disability prevention activities in order to
20 identify cost effective public policy options for reaching
21 the greatest number of children and adults in order to
22 eliminate the risk of disabilities. The review shall also
23 address options for health care services available to youth
24 transitioning to the adult system of health care.

25 2. The department shall report at least monthly to the
26 legislative services agency concerning the department's
27 operational and program expenditures.

28 3. Of the funds appropriated in this section, \$132,300 shall
29 be used to continue the contract for the provision of a program
30 to provide technical assistance, support, and consultation to
31 providers of habilitation services and home and community-based
32 services waiver services for adults with disabilities under the
33 medical assistance program.

34 4. Of the funds appropriated in this section, \$176,400 shall
35 be used to continue the contract to expand the provision of

1 nationally accredited and recognized internet-based training to
2 include mental health and disability services providers.

3 5. Of the funds appropriated in this section, \$50,000
4 shall be transferred to the Iowa finance authority to be used
5 for administrative support of the council on homelessness
6 established in section 16.100A and for the council to fulfill
7 its duties in addressing and reducing homelessness in the
8 state.

9 Sec. 27. VOLUNTEERS. There is appropriated from the general
10 fund of the state to the department of human services for the
11 fiscal year beginning July 1, 2013, and ending June 30, 2014,
12 the following amount, or so much thereof as is necessary, to be
13 used for the purpose designated:

14 For development and coordination of volunteer services:
15 \$ 84,660

16 Sec. 28. MEDICAL ASSISTANCE, STATE SUPPLEMENTARY
17 ASSISTANCE, AND SOCIAL SERVICE PROVIDERS REIMBURSED UNDER THE
18 DEPARTMENT OF HUMAN SERVICES.

19 1. a. (1) For the fiscal year beginning July 1, 2013,
20 the total state funding amount for the nursing facility budget
21 shall not exceed \$271,712,511.

22 (2) For the fiscal year beginning July 1, 2013, the
23 department shall rebase case-mix nursing facility rates
24 effective July 1, 2013. However, total nursing facility budget
25 expenditures, including both case-mix and noncase-mix, shall
26 not exceed the amount specified in subparagraph (1). When
27 calculating case-mix per diem cost and the patient-day-weighted
28 medians used in rate-setting for nursing facilities effective
29 July 1, 2013, the inflation factor applied from the midpoint
30 of the cost report period to the first day of the state fiscal
31 year rate period shall be adjusted to maintain state funding
32 within the amount specified in subparagraph (1).

33 (3) The department, in cooperation with nursing facility
34 representatives, shall review projections for state funding
35 expenditures for reimbursement of nursing facilities on a

1 quarterly basis and the department shall determine if an
2 adjustment to the medical assistance reimbursement rate is
3 necessary in order to provide reimbursement within the state
4 funding amount for the fiscal year. Notwithstanding 2001
5 Iowa Acts, chapter 192, section 4, subsection 2, paragraph
6 "c", and subsection 3, paragraph "a", subparagraph (2),
7 if the state funding expenditures for the nursing facility
8 budget for the fiscal year is projected to exceed the amount
9 specified in subparagraph (1), the department shall adjust
10 the reimbursement for nursing facilities reimbursed under the
11 case-mix reimbursement system to maintain expenditures of the
12 nursing facility budget within the specified amount for the
13 fiscal year.

14 (4) For the fiscal year beginning July 1, 2013, special
15 population nursing facilities shall be reimbursed in accordance
16 with the methodology in effect on June 30, 2013.

17 b. (1) For the fiscal year beginning July 1, 2013,
18 the department shall establish the pharmacy dispensing fee
19 reimbursement at \$10.02 per prescription. Any subsequent
20 actual dispensing fee shall be established within the range
21 determined by a cost of dispensing survey performed by
22 the department and required to be completed by all medical
23 assistance program participating pharmacies every two years
24 beginning in FY 2014-2015.

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

30 c. (1) For the fiscal year beginning July 1, 2013,
31 reimbursement rates for outpatient hospital services shall be
32 increased 1.5 percent over the rates in effect on June 30,
33 2013, subject to Medicaid program upper payment limit rules.

34 (2) For the fiscal year beginning July 1, 2013,
35 reimbursement rates for inpatient hospital services shall by

1 increased by 1.5 percent over the rates in effect on June 30,
2 2013, subject to Medicaid program upper payment limit rules.

3 (3) For the fiscal year beginning July 1, 2013, the graduate
4 medical education and disproportionate share hospital fund
5 shall be increased by 1.5 percent over the amount in effect on
6 June 30, 2013, except that the portion of the fund attributable
7 to graduate medical education shall be reduced in an amount
8 that reflects the elimination of graduate medical education
9 payments made to out-of-state hospitals.

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

16 d. For the fiscal year beginning July 1, 2013, reimbursement
17 rates for rural health clinics, hospices, and acute mental
18 hospitals shall be increased in accordance with increases under
19 the federal Medicare program or as supported by their Medicare
20 audited costs.

21 e. For the fiscal year beginning July 1, 2013, independent
22 laboratories shall be reimbursed using the same methodology in
23 effect on June 30, 2013, and reimbursement for rehabilitation
24 agencies shall be increased by 1.5 percent over the rates in
25 effect on June 30, 2013.

26 f. (1) For the fiscal year beginning July 1, 2013, rates
27 for home health services shall be reimbursed based on the
28 Medicare low utilization payment amount (LUPA) methodology
29 with state geographic wage adjustments. The Medicare LUPA
30 per-visit rates in effect on July 1, 2013, shall be utilized
31 as the basis for establishing the initial reimbursement
32 schedule. The department shall update the rates every two
33 years to reflect the most recent Medicare LUPA rates. For the
34 fiscal year beginning July 1, 2013, the department shall adjust
35 the reimbursement rate as calculated under this paragraph to

1 reflect the most recent Medicare LUPA rates for home health
2 services, not to exceed an additional \$2,765,655.

3 (2) For the fiscal year beginning July 1, 2013, rates for
4 private duty nursing and personal care services under the
5 early and periodic screening, diagnostic and treatment program
6 benefit shall be established based on an hourly interim rate
7 subject to cost settlement up to a limit calculated by the
8 department, and subject to approval by the centers for Medicare
9 and Medicaid services of the United States department of health
10 and human services.

11 g. For the fiscal year beginning July 1, 2013, federally
12 qualified health centers shall receive cost-based reimbursement
13 for 100 percent of the reasonable costs for the provision of
14 services to recipients of medical assistance.

15 h. For the fiscal year beginning July 1, 2013, the
16 reimbursement rates for dental services shall be increased by
17 1.5 percent over the rates in effect on June 30, 2013.

18 i. (1) For the fiscal year beginning July 1, 2013,
19 state-owned psychiatric medical institutions for children shall
20 receive cost-based reimbursement for 100 percent of the actual
21 and allowable costs for the provision of services to recipients
22 of medical assistance.

23 (2) For the nonstate-owned psychiatric medical institutions
24 for children, reimbursement rates shall be based on the
25 reimbursement methodology developed by the department as
26 required for federal compliance.

27 (3) As a condition of participation in the medical
28 assistance program, enrolled providers shall accept the medical
29 assistance reimbursement rate for any covered goods or services
30 provided to recipients of medical assistance who are children
31 under the custody of a psychiatric medical institution for
32 children.

33 j. For the fiscal year beginning July 1, 2013, unless
34 otherwise specified in this Act, all noninstitutional medical
35 assistance provider reimbursement rates shall be increased

1 by 1.5 percent over the rates in effect on June 30, 2013,
2 except for area education agencies, local education agencies,
3 infant and toddler services providers, home and community-based
4 services providers including consumer-directed attendant care
5 providers under a section 1915C or 1915I waiver, targeted case
6 management providers, and those providers whose rates are
7 required to be determined pursuant to section 249A.20.

8 k. Notwithstanding any provision to the contrary, for the
9 fiscal year beginning July 1, 2013, the reimbursement rate for
10 anesthesiologists shall be increased by 1.5 percent over the
11 rate in effect on June 30, 2013.

12 l. Notwithstanding section 249A.20, for the fiscal year
13 beginning July 1, 2013, the average reimbursement rate for
14 health care providers eligible for use of the federal Medicare
15 resource-based relative value scale reimbursement methodology
16 under that section shall be increased by 1.5 percent over the
17 rate in effect on June 30, 2013; however, this rate shall not
18 exceed the maximum level authorized by the federal government.

19 m. For the fiscal year beginning July 1, 2013, the
20 reimbursement rate for residential care facilities shall not
21 be less than the minimum payment level as established by the
22 federal government to meet the federally mandated maintenance
23 of effort requirement. The flat reimbursement rate for
24 facilities electing not to file annual cost reports shall not
25 be less than the minimum payment level as established by the
26 federal government to meet the federally mandated maintenance
27 of effort requirement.

28 n. For the fiscal year beginning July 1, 2013, inpatient
29 mental health services provided at hospitals shall be increased
30 by 1.5 percent over the rates in effect on June 30, 2013,
31 subject to Medicaid program upper payment limit rules;
32 community mental health centers and providers of mental health
33 services to county residents pursuant to a waiver approved
34 under section 225C.7, subsection 3, shall be reimbursed at 100
35 percent of the reasonable costs for the provision of services

1 to recipients of medical assistance; and psychiatrists shall be
2 reimbursed at the medical assistance program fee-for-service
3 rate.

4 o. For the fiscal year beginning July 1, 2013, the
5 reimbursement rate for providers of family planning services
6 that are eligible to receive a 90 percent federal match shall
7 be increased by 1.5 percent over the rates in effect on June
8 30, 2013.

9 p. For the fiscal year beginning July 1, 2013, the upper
10 limits on reimbursement rates for providers of home and
11 community-based services waiver services shall be the limits
12 in effect on June 30, 2013, pursuant to 441 IAC 79.1(2) based
13 on federal Medicare rates, federal veterans administration
14 rates, or the dollar amount specified in the rule, increased
15 by 3 percent.

16 q. For the fiscal year beginning July 1, 2013, the
17 reimbursement rate for emergency medical services providers
18 shall be increased by 10 percent over the rates in effect on
19 June 30, 2013.

20 2. For the fiscal year beginning July 1, 2013, the
21 reimbursement rate for providers reimbursed under the
22 in-home-related care program shall not be less than the minimum
23 payment level as established by the federal government to meet
24 the federally mandated maintenance of effort requirement.

25 3. Unless otherwise directed in this section, when the
26 department's reimbursement methodology for any provider
27 reimbursed in accordance with this section includes an
28 inflation factor, this factor shall not exceed the amount
29 by which the consumer price index for all urban consumers
30 increased during the calendar year ending December 31, 2002.

31 4. a. For the fiscal year beginning July 1, 2013,
32 notwithstanding section 234.38, the foster family basic daily
33 maintenance rate and the maximum adoption subsidy rate for
34 children ages 0 through 5 years shall be \$16.78, the rate for
35 children ages 6 through 11 years shall be \$17.45, the rate for

1 children ages 12 through 15 years shall be \$19.10, and the
2 rate for children and young adults ages 16 and older shall be
3 \$19.35. For youth ages 18 to 21 who have exited foster care,
4 the maximum preparation for adult living program maintenance
5 rate shall be \$602.70 per month. The maximum payment for
6 adoption subsidy nonrecurring expenses shall be limited to \$500
7 and the disallowance of additional amounts for court costs and
8 other related legal expenses implemented pursuant to 2010 Iowa
9 Acts, chapter 1031, section 408 shall be continued.

10 b. (1) For the fiscal year beginning July 1, 2013, the
11 reimbursement rates for child welfare services providers shall
12 be increased by 5 percent over the rates in effect on June
13 30, 2013, and the maximum reimbursement rate for group foster
14 care providers, including service and maintenance costs, shall
15 be rebased to be equal to the maximum rate allowed for each
16 service level as of June 30, 2013, and the rebased rate shall
17 be increased by 5 percent or a percentage amount identified
18 by the department so that expenditures for group foster care
19 remain within the state expenditure target for group foster
20 care maintenance and services allocated under the appropriation
21 made in this division of this Act for child and family
22 services, whichever percentage amount is lower.

23 (2) For purposes of this lettered paragraph, "child welfare
24 services providers" means the resource family recruitment and
25 retention contractors, the family safety, risk, and permanency
26 services (family-centered) contractors, the child welfare
27 emergency services contractors, and supervised apartment living
28 foster care providers. The reimbursement rates for child
29 welfare services providers and group foster care providers in
30 succeeding fiscal years, including base rates and incentive
31 payments, shall incorporate an inflation factor. The inflation
32 factor shall be equal to the percentage amount by which the
33 annual average consumer price index for all urban consumers,
34 United States city average, issued by the United States
35 department of labor, bureau of labor statistics, increased

1 during the average of the three preceding calendar years ending
2 December 31.

3 c. For the fiscal year beginning July 1, 2013, the maximum
4 reimbursement rates under the supervised apartment living
5 program other than foster care-related, and for social services
6 providers under contract, shall be increased by 5 percent over
7 the rates in effect on June 30, 2013, or the provider's actual
8 and allowable cost plus inflation for each service, whichever
9 is less. However, if a new service or service provider is
10 added after June 30, 2013, the initial reimbursement rate for
11 the service or provider shall be based upon a weighted average
12 of provider rates for similar services.

13 d. The group foster care reimbursement rates paid for
14 placement of children out of state shall be calculated
15 according to the same rate-setting principles as those used for
16 in-state providers, unless the director of human services or
17 the director's designee determines that appropriate care cannot
18 be provided within the state. The payment of the daily rate
19 shall be based on the number of days in the calendar month in
20 which service is provided.

21 5. a. For the fiscal year beginning July 1, 2013, the
22 reimbursement rate paid for shelter care and the child welfare
23 emergency services implemented to provide or prevent the need
24 for shelter care shall be established by contract.

25 b. For the fiscal year beginning July 1, 2013, the combined
26 service and maintenance components of the reimbursement rate
27 paid for shelter care services shall be based on the financial
28 and statistical report submitted to the department. The
29 maximum reimbursement rate shall be \$96.98 per day. The
30 department shall reimburse a shelter care provider at the
31 provider's actual and allowable unit cost, plus inflation, not
32 to exceed the maximum reimbursement rate.

33 c. Notwithstanding section 232.141, subsection 8, for the
34 fiscal year beginning July 1, 2013, the amount of the statewide
35 average of the actual and allowable rates for reimbursement of

1 juvenile shelter care homes that is utilized for the limitation
2 on recovery of unpaid costs shall be increased by \$4.62 over
3 the amount in effect for this purpose in the preceding fiscal
4 year.

5 6. For the fiscal year beginning July 1, 2013, the
6 department shall calculate reimbursement rates for intermediate
7 care facilities for persons with intellectual disabilities
8 at the 80th percentile. Beginning July 1, 2013, the rate
9 calculation methodology shall utilize the consumer price index
10 inflation factor applicable to the fiscal year beginning July
11 1, 2013.

12 7. For the fiscal year beginning July 1, 2013, for child
13 care providers reimbursed under the state child care assistance
14 program, the department shall set provider reimbursement rates
15 based on the rate reimbursement survey completed in December
16 2006. The department shall set rates in a manner so as to
17 provide incentives for a nonregistered provider to become
18 registered by applying the increase only to registered and
19 licensed providers.

20 8. Any increase specified in a provider's reimbursement
21 rate in accordance with this section shall be used to increase
22 compensation and costs of employment, including benefits, for
23 nonadministrative staff.

24 9. The department may adopt emergency rules to implement
25 this section.

26 Sec. 29. EMERGENCY RULES.

27 1. If specifically authorized by a provision of this
28 division of this Act for the fiscal year beginning July 1,
29 2013, the department of human services or the mental health
30 and disability services commission may adopt administrative
31 rules under section 17A.4, subsection 3, and section 17A.5,
32 subsection 2, paragraph "b", to implement the provisions and
33 the rules shall become effective immediately upon filing or
34 on a later effective date specified in the rules, unless the
35 effective date is delayed by the administrative rules review

1 committee. Any rules adopted in accordance with this section
2 shall not take effect before the rules are reviewed by the
3 administrative rules review committee. The delay authority
4 provided to the administrative rules review committee under
5 section 17A.4, subsection 7, and section 17A.8, subsection 9,
6 shall be applicable to a delay imposed under this section,
7 notwithstanding a provision in those sections making them
8 inapplicable to section 17A.5, subsection 2, paragraph "b".
9 Any rules adopted in accordance with the provisions of this
10 section shall also be published as notice of intended action
11 as provided in section 17A.4.

12 2. If during the fiscal year beginning July 1, 2013, the
13 department of human services is adopting rules in accordance
14 with this section or as otherwise directed or authorized by
15 state law, and the rules will result in an expenditure increase
16 beyond the amount anticipated in the budget process or if the
17 expenditure was not addressed in the budget process for the
18 fiscal year, the department shall notify the persons designated
19 by this division of this Act for submission of reports,
20 the chairpersons and ranking members of the committees on
21 appropriations, and the department of management concerning the
22 rules and the expenditure increase. The notification shall be
23 provided at least 30 calendar days prior to the date notice of
24 the rules is submitted to the administrative rules coordinator
25 and the administrative code editor.

26 Sec. 30. REPORTS. Any reports or other information
27 required to be compiled and submitted under this Act during the
28 fiscal year beginning July 1, 2013, shall be submitted to the
29 chairpersons and ranking members of the joint appropriations
30 subcommittee on health and human services, the legislative
31 services agency, and the legislative caucus staffs on or
32 before the dates specified for submission of the reports or
33 information.

34 DIVISION VI

35 HEALTH CARE ACCOUNTS AND FUNDS — FY 2013-2014

1 Sec. 31. PHARMACEUTICAL SETTLEMENT ACCOUNT. There is
2 appropriated from the pharmaceutical settlement account created
3 in section 249A.33 to the department of human services for the
4 fiscal year beginning July 1, 2013, and ending June 30, 2014,
5 the following amount, or so much thereof as is necessary, to be
6 used for the purpose designated:

7 Notwithstanding any provision of law to the contrary, to
8 supplement the appropriations made in this Act for medical
9 contracts under the medical assistance program for the fiscal
10 year beginning July 1, 2013, and ending June 30, 2014:
11 \$ 6,650,000

12 Sec. 32. APPROPRIATIONS FROM IOWACARE ACCOUNT.

13 1. There is appropriated from the IowaCare account
14 created in section 249J.24 to the state board of regents for
15 distribution to the university of Iowa hospitals and clinics
16 for the fiscal year beginning July 1, 2013, and ending June 30,
17 2014, for the program period beginning July 1, 2013, and ending
18 December 31, 2013, the following amount, or so much thereof as
19 is necessary, to be used for the purposes designated:

20 For salaries, support, maintenance, equipment, and
21 miscellaneous purposes, for the provision of medical and
22 surgical treatment of indigent patients, for provision of
23 services to members of the expansion population pursuant to
24 chapter 249J, and for medical education:
25 \$ 13,642,292

26 a. Funds appropriated in this subsection shall be used
27 in accordance with 2011 Iowa Acts, chapter 129, section 35,
28 subsection 1, paragraph "a".

29 b. Notwithstanding any provision of law to the contrary,
30 the amount appropriated in this subsection shall be distributed
31 based on claims submitted, adjudicated, and paid by the Iowa
32 Medicaid enterprise.

33 c. The university of Iowa hospitals and clinics shall
34 certify public expenditures in an amount equal to provide
35 the nonfederal share on total expenditures not to exceed

1 \$10,000,000.

2 2. There is appropriated from the IowaCare account
3 created in section 249J.24 to the state board of regents for
4 distribution to the university of Iowa hospitals and clinics
5 for the fiscal year beginning July 1, 2013, and ending June 30,
6 2014, for the program period beginning July 1, 2013, and ending
7 December 31, 2013, the following amount, or so much thereof as
8 is necessary, to be used for the purposes designated:

9 For salaries, support, maintenance, equipment, and
10 miscellaneous purposes, for the provision of medical and
11 surgical treatment of indigent patients, for provision of
12 services to members of the expansion population pursuant to
13 chapter 249J, and for medical education:
14 \$ 26,284,600

15 Notwithstanding any provision of law to the contrary, the
16 amount appropriated in this subsection shall be distributed
17 based on claims submitted, adjudicated, and paid by the Iowa
18 Medicaid enterprise.

19 3. There is appropriated from the IowaCare account
20 created in section 249J.24 to the state board of regents for
21 distribution to university of Iowa physicians for the fiscal
22 year beginning July 1, 2013, and ending June 30, 2014, for the
23 program period beginning July 1, 2013, and ending December 31,
24 2013, the following amount, or so much thereof as is necessary
25 to be used for the purposes designated:

26 For salaries, support, maintenance, equipment, and
27 miscellaneous purposes for the provision of medical and
28 surgical treatment of indigent patients, for provision of
29 services to members of the expansion population pursuant to
30 chapter 249J, and for medical education:
31 \$ 9,903,183

32 Notwithstanding any provision of law to the contrary, the
33 amount appropriated in this subsection shall be distributed
34 based on claims submitted, adjudicated, and paid by the Iowa
35 Medicaid enterprise. Once the entire amount appropriated in

1 this subsection has been distributed, claims shall continue to
2 be submitted and adjudicated by the Iowa Medicaid enterprise;
3 however, no payment shall be made based upon such claims.

4 4. There is appropriated from the IowaCare account created
5 in section 249J.24 to the department of human services for
6 the fiscal year beginning July 1, 2013, and ending June 30,
7 2014, for the program period beginning July 1, 2013, and ending
8 December 31, 2013, the following amount, or so much thereof as
9 is necessary, to be used for the purposes designated:

10 For distribution to a publicly owned acute care teaching
11 hospital located in a county with a population over 350,000 for
12 the provision of medical and surgical treatment of indigent
13 patients, for provision of services to members of the expansion
14 population pursuant to chapter 249J, and for medical education:
15 \$ 35,500,000

16 a. Notwithstanding any provision of law to the contrary,
17 the amount appropriated in this subsection shall be distributed
18 based on claims submitted, adjudicated, and paid by the Iowa
19 Medicaid enterprise plus a monthly disproportionate share
20 hospital payment. Any amount appropriated in this subsection
21 in excess of \$32,500,000 shall be distributed only if the sum
22 of the expansion population claims adjudicated and paid by the
23 Iowa Medicaid enterprise plus the estimated disproportionate
24 share hospital payments exceeds \$32,500,000. The amount paid
25 in excess of \$32,500,000 shall not adjust the original monthly
26 payment amount but shall be distributed monthly based on actual
27 claims adjudicated and paid by the Iowa Medicaid enterprise
28 plus the estimated disproportionate share hospital amount. Any
29 amount appropriated in this subsection in excess of \$32,500,000
30 shall be allocated only if federal funds are available to match
31 the amount allocated. Pursuant to paragraph "b", of the amount
32 appropriated in this subsection, not more than \$2,000,000 shall
33 be distributed for prescription drugs, podiatry services,
34 optometric services, and durable medical equipment.

35 b. Notwithstanding any provision of law to the contrary, the

1 hospital identified in this subsection shall be reimbursed for
2 outpatient prescription drugs, podiatry services, optometric
3 services, and durable medical equipment provided to members
4 of the expansion population pursuant to all applicable
5 medical assistance program rules, in an amount not to exceed
6 \$2,000,000.

7 c. Notwithstanding the total amount of proceeds distributed
8 pursuant to section 249J.24, subsection 4, paragraph "a",
9 unnumbered paragraph 1, for the fiscal year beginning July
10 1, 2013, and ending June 30, 2014, the county treasurer of a
11 county with a population of over 350,000 in which a publicly
12 owned acute care teaching hospital is located shall distribute
13 the proceeds collected pursuant to section 347.7 between
14 July 1, 2013, and December 31, 2013, in a total amount of
15 \$19,000,000, which would otherwise be distributed to the county
16 hospital, to the treasurer of state for deposit in the IowaCare
17 account.

18 d. Notwithstanding the amount collected and distributed
19 for deposit in the IowaCare account pursuant to section
20 249J.24, subsection 4, paragraph "a", subparagraph (1), the
21 first \$19,000,000 in proceeds collected pursuant to section
22 347.7 between July 1, 2013, and December 31, 2013, shall be
23 distributed to the treasurer of state for deposit in the
24 IowaCare account and collections during this time period in
25 excess of \$19,000,000 shall be distributed to the acute care
26 teaching hospital identified in this subsection. Of the
27 collections in excess of the \$19,000,000 received by the acute
28 care teaching hospital under this paragraph "d", \$2,000,000
29 shall be distributed by the acute care teaching hospital to the
30 treasurer of state for deposit in the IowaCare account in the
31 month of January 2014, following the July 1 through December
32 31, 2013, period.

33 5. There is appropriated from the IowaCare account created
34 in section 249J.24 to the department of human services for
35 the fiscal year beginning July 1, 2013, and ending June 30,

1 2014, for the program period beginning July 1, 2013, and ending
2 December 31, 2013, the following amount, or so much thereof as
3 is necessary to be used for the purpose designated:

4 For payment to the regional provider network specified
5 by the department pursuant to section 249J.7 for provision
6 of covered services to members of the expansion population
7 pursuant to chapter 249J:

8 \$ 2,993,183

9 Notwithstanding any provision of law to the contrary, the
10 amount appropriated in this subsection shall be distributed
11 based on claims submitted, adjudicated, and paid by the Iowa
12 Medicaid enterprise. Once the entire amount appropriated in
13 this subsection has been distributed, claims shall continue to
14 be submitted and adjudicated by the Iowa Medicaid enterprise;
15 however, no payment shall be made based upon such claims.

16 6. There is appropriated from the IowaCare account created
17 in section 249J.24 to the department of human services for
18 the fiscal year beginning July 1, 2013, and ending June 30,
19 2014, for the program period beginning July 1, 2013, and ending
20 December 31, 2013, the following amount, or so much thereof as
21 is necessary, to be used for the purposes designated:

22 For a care coordination pool to pay the expansion population
23 providers consisting of the university of Iowa hospitals and
24 clinics, the publicly owned acute care teaching hospital as
25 specified in section 249J.7, and current medical assistance
26 program providers that are not expansion population network
27 providers pursuant to section 249J.7, for services covered by
28 the full benefit medical assistance program but not under the
29 IowaCare program pursuant to section 249J.6, that are provided
30 to expansion population members:

31 \$ 1,500,000

32 a. Notwithstanding sections 249J.6 and 249J.7, the amount
33 appropriated in this subsection is intended to provide
34 payment for medically necessary services provided to expansion
35 population members for continuation of care provided by the

1 university of Iowa hospitals and clinics or the publicly owned
2 acute care teaching hospital as specified in section 249J.7.
3 Payment may only be made for services that are not otherwise
4 covered under section 249J.6, and which are follow-up services
5 to covered services provided by the hospitals specified in this
6 paragraph "a".

7 b. The funds appropriated in this subsection are intended
8 to provide limited payment for continuity of care services for
9 an expansion population member, and are intended to cover the
10 costs of services to expansion population members, regardless
11 of the member's county of residence or medical home assignment,
12 if the care is related to specialty or hospital services
13 provided by the hospitals specified in paragraph "a".

14 c. The funds appropriated in this subsection are
15 not intended to provide for expanded coverage under the
16 IowaCare program, and shall not be used to cover emergency
17 transportation services.

18 d. The department shall adopt administrative rules pursuant
19 to chapter 17A to establish a prior authorization process and
20 to identify covered services for reimbursement under this
21 subsection.

22 7. There is appropriated from the IowaCare account created
23 in section 249J.24 to the department of human services for
24 the fiscal year beginning July 1, 2013, and ending June 30,
25 2014, for the program period beginning July 1, 2013, and ending
26 December 31, 2013, the following amount, or so much thereof as
27 is necessary, for the purposes designated:

28 For transfer to the medical contracts appropriation in
29 this division of this Act to be used for administrative
30 costs associated with chapter 249J including eligibility
31 determinations:

32 \$ 371,552

33 8. For the fiscal year beginning July 1, 2013, and ending
34 June 30, 2014, for the program period beginning July 1, 2013,
35 and ending December 31, 2013, the state board of regents shall

1 transfer \$637,789 to the IowaCare account created in section
2 249J.24, to provide the nonfederal share for distribution to
3 university of Iowa physicians under the IowaCare program. The
4 university of Iowa hospitals and clinics shall receive and
5 retain 100 percent of the total increase in IowaCare program
6 payments.

7 Sec. 33. APPROPRIATIONS FROM NONPARTICIPATING
8 PROVIDER REIMBURSEMENT FUND — DEPARTMENT OF HUMAN
9 SERVICES. Notwithstanding any provision to the contrary, and
10 subject to the availability of funds, there is appropriated
11 from the nonparticipating provider reimbursement fund created
12 in section 249J.24A to the department of human services for
13 the fiscal year beginning July 1, 2013, and ending June 30,
14 2014, for the program period beginning July 1, 2013, and ending
15 December 31, 2013, the following amount, or so much thereof as
16 is necessary, for the purposes designated:

17 To reimburse nonparticipating providers in accordance with
18 section 249J.24A:
19 \$ 1,000,000

20 Sec. 34. QUALITY ASSURANCE TRUST FUND — DEPARTMENT OF HUMAN
21 SERVICES. Notwithstanding any provision to the contrary and
22 subject to the availability of funds, there is appropriated
23 from the quality assurance trust fund created in section
24 249L.4 to the department of human services for the fiscal year
25 beginning July 1, 2013, and ending June 30, 2014, the following
26 amounts, or so much thereof as is necessary, for the purposes
27 designated:

28 To supplement the appropriation made in this Act from the
29 general fund of the state to the department of human services
30 for medical assistance for the same fiscal year:
31 \$ 28,788,917

32 Sec. 35. HOSPITAL HEALTH CARE ACCESS TRUST FUND —
33 DEPARTMENT OF HUMAN SERVICES. Notwithstanding any provision to
34 the contrary and subject to the availability of funds, there is
35 appropriated from the hospital health care access trust fund

1 created in section 249M.4 to the department of human services
2 for the fiscal year beginning July 1, 2013, and ending June
3 30, 2014, the following amounts, or so much thereof as is
4 necessary, for the purposes designated:

5 1. To supplement the appropriation made in this Act from the
6 general fund of the state to the department of human services
7 for medical assistance for the same fiscal year:

8 \$ 34,288,000

9 2. For deposit in the nonparticipating provider
10 reimbursement fund created in section 249J.24A to be used for
11 the purposes of the fund:

12 \$ 412,000

13 Sec. 36. MEDICAL ASSISTANCE PROGRAM — NONREVERSION
14 FOR FY 2013-2014. Notwithstanding section 8.33, if moneys
15 appropriated for purposes of the medical assistance program for
16 the fiscal year beginning July 1, 2013, and ending June 30,
17 2014, from the general fund of the state, the quality assurance
18 trust fund and the hospital health care access trust fund, are
19 in excess of actual expenditures for the medical assistance
20 program and remain unencumbered or unobligated at the close
21 of the fiscal year, the excess moneys shall not revert but
22 shall remain available for expenditure for the purposes of the
23 medical assistance program until the close of the succeeding
24 fiscal year.

25 DIVISION VII

26 PRIOR YEAR APPROPRIATIONS

27 RESPITE

28 Sec. 37. 2011 Iowa Acts, chapter 129, section 128, as
29 amended by 2012 Iowa Acts, chapter 1133, section 22, subsection
30 26, is amended to read as follows:

31 26. Of the funds appropriated in this section, at least
32 \$25,000 shall be used to continue and to expand the foster
33 care respite pilot program in which postsecondary students in
34 social work and other human services-related programs receive
35 experience by assisting family foster care providers with

1 respite and other support. Notwithstanding section 8.33,
2 moneys allocated in this subsection that remain unencumbered or
3 unobligated at the close of the fiscal year shall not revert
4 but shall remain available for expenditure for the purposes
5 designated until the close of the succeeding fiscal year.

6 MEDICAL ASSISTANCE — GENERAL FUND

7 Sec. 38. 2011 Iowa Acts, chapter 129, section 122,
8 unnumbered paragraph 2, is amended to read as follows:

9 For medical assistance program reimbursement and associated
10 costs as specifically provided in the reimbursement
11 methodologies in effect on June 30, 2012, except as otherwise
12 expressly authorized by law, and consistent with options under
13 federal law and regulations:

14 \$~~914,993,421~~
15 968,276,514

16 MEDICAL ASSISTANCE — IOWACARE TRANSFER ALLOCATION

17 Sec. 39. 2011 Iowa Acts, chapter 129, section 122,
18 subsection 13, as amended by 2012 Iowa Acts, chapter 1133,
19 section 10, is amended to read as follows:

20 13. Of the funds appropriated in this section, up to
21 ~~\$8,684,329~~ \$16,004,422 may be transferred to the IowaCare
22 account created in section 249J.24.

23 ADOPTION SUBSIDY — GENERAL FUND

24 Sec. 40. 2011 Iowa Acts, chapter 129, section 129, as
25 amended by 2012 Iowa Acts, chapter 1133, section 23, subsection
26 1, is amended to read as follows:

27 1. There is appropriated from the general fund of the
28 state to the department of human services for the fiscal year
29 beginning July 1, 2012, and ending June 30, 2013, the following
30 amount, or so much thereof as is necessary, to be used for the
31 purpose designated:

32 For adoption subsidy payments and services:
33 \$ ~~36,788,576~~
34 37,743,429

35 NURSING FACILITY REIMBURSEMENT

1 Sec. 41. 2011 Iowa Acts, chapter 129, section 141,
2 subsection 1, paragraph a, subparagraph (1), as amended by
3 2012 Iowa Acts, chapter 1133, section 32, is amended to read
4 as follows:

5 (1) For the fiscal year beginning July 1, 2012, the total
6 state funding amount for the nursing facility budget shall not
7 exceed ~~\$237,226,901~~ \$239,226,901.

8 Sec. 42. 2012 Iowa Acts, chapter 1133, section 55, is
9 amended to read as follows:

10 SEC. 55. REPLACEMENT GENERATION TAX REVENUES — LEVY RATES
11 FOR FY 2011-2012 AND FY 2012-2013.

12 1. a. For the fiscal year beginning July 1, 2011, and
13 ending June 30, 2012, and for the fiscal year beginning July 1,
14 2012, and ending June 30, 2013, the replacement generation tax
15 revenues required to be deposited in the property tax relief
16 fund pursuant to section 437A.8, subsection 4, paragraph "d",
17 and section 437A.15, subsection 3, paragraph "f", shall instead
18 be credited to the mental health and disability services
19 redesign fund created in this division of this Act.

20 b. If this section of this division of this Act is enacted
21 after the department of management has reduced county certified
22 budgets and revised rates of taxation pursuant to section
23 426B.2, subsection 3, paragraph "b", to reflect anticipated
24 replacement generation tax revenues, and the enactment date is
25 during the period beginning May 1, 2012, and ending June 30,
26 2012, the reductions and revisions shall be rescinded and the
27 department of management shall expeditiously report that fact
28 to the county auditors.

29 2. Except as otherwise provided in subsection 1 for
30 department of management reductions of certified budgets and
31 revisions of tax rates and rescinding of those reductions and
32 revisions, the budgets and tax rates certified for a county
33 services fund under section 331.424A, for the fiscal year
34 beginning July 1, 2012, shall remain in effect, notwithstanding
35 section 426B.3, subsection 1, the property tax relief fund

1 payment and other services fund financing changes made in this
2 division of this Act, or other statutory amendments affecting
3 county services funds for the fiscal year to the contrary.

4 Sec. 43. EFFECTIVE UPON ENACTMENT. This division of this
5 Act, being deemed of immediate importance, takes effect upon
6 enactment.

7 Sec. 44. RETROACTIVE APPLICABILITY. The following
8 provision of this Act applies retroactively to July 1, 2011:

9 1. The section amending 2012 Iowa Acts, chapter 1133,
10 section 55.

11 DIVISION VIII

12 CHILD WELFARE AND CHILD CARE

13 Sec. 45. Section 232.142, subsection 5, Code 2013, is
14 amended to read as follows:

15 5. The director shall approve annually all such homes
16 established and maintained under the provisions of this
17 chapter. A home shall not be approved unless it complies with
18 minimal rules and standards adopted by the director and has
19 been inspected by the department of inspections and appeals.
20 The statewide number of beds in the homes approved by the
21 director shall not exceed the number of beds in approved homes
22 as of July 1, 2013.

23 Sec. 46. Section 237A.13, subsection 7, paragraph c, Code
24 2013, is amended to read as follows:

25 c. Families with an income of more than one hundred percent
26 but not more than one hundred ~~forty-five~~ forty-eight percent of
27 the federal poverty level whose members are employed at least
28 twenty-eight hours per week.

29 Sec. 47. Section 237A.13, subsection 8, Code 2013, is
30 amended to read as follows:

31 8. Nothing in this section shall be construed as or is
32 intended as, or shall imply, a grant of entitlement for
33 services to persons who are eligible for assistance due to
34 an income level or other eligibility circumstance addressed
35 in this section. Any state obligation to provide services

1 pursuant to this section is limited to the extent of the funds
2 appropriated for the purposes of state child care assistance.
3 The standard period for redetermining the eligibility of a
4 program participant is twelve months after the date of the
5 initial determination of eligibility and every twelve months
6 thereafter.

7 DIVISION IX

8 AGING

9 Sec. 48. Section 231.33, subsection 21, Code 2013, if
10 enacted by 2013 Iowa Acts, Senate File 184, section 22, is
11 amended to read as follows:

12 21. Comply with all applicable requirements of the Iowa
13 public employees' retirement system established pursuant to
14 chapter 97B. Notwithstanding any provision to the contrary,
15 an employee of an area agency on aging that was enrolled in
16 an alternative qualified plan prior to July 1, 2012, may
17 continue participation in that alternative qualified plan in
18 lieu of mandatory participation in the Iowa public employees'
19 retirement system.

20 Sec. 49. Section 231.42, subsection 7, paragraph a, Code
21 2013, is amended to read as follows:

22 a. An officer, owner, director, or employee of a long-term
23 care facility, assisted living program, or elder group home who
24 intentionally prevents, interferes with, or attempts to impede
25 the work of the state or a local long-term care resident's
26 advocate is subject to a penalty imposed by the director of not
27 more than one thousand five hundred dollars for each violation.
28 If the director imposes a penalty for a violation under this
29 paragraph, no other state agency shall impose a penalty for the
30 same interference violation. Any moneys collected pursuant
31 to this subsection shall be deposited in the general fund of
32 the state and are appropriated to the office of long-term care
33 resident's advocate to be used for administration and the
34 duties of the office.

35 Sec. 50. REPEAL. Section 231E.13, Code 2013, is repealed.

1 Sec. 51. TASK FORCE ON ELDER ABUSE PREVENTION AND
2 INTERVENTION.

3 1. The department on aging shall continue a task force
4 on elder abuse prevention and intervention to continue the
5 work of the elder abuse task force established pursuant to
6 2012 Iowa Acts, chapter 1056. The task force shall include
7 representatives of the department on aging, the office of
8 long-term care resident's advocate, the department of human
9 services, the department of inspections and appeals, the
10 department of public health, the office of the attorney
11 general, the department of veterans affairs, the department
12 of public safety, the insurance division of the department
13 of commerce, a county attorney's office with experience
14 in prosecuting elder abuse, the superintendent of banking,
15 the courts, the elder law section of the Iowa state bar
16 association, and other affected stakeholders. The task force
17 shall form workgroups as necessary to address the specific
18 recommendations.

19 2. The task force shall review the report of the elder
20 abuse task force submitted in December 2012, develop an
21 implementation plan for the recommendations, and make any
22 additional recommendations as necessary. The implementation
23 plan and additional recommendations shall address all of the
24 following:

25 a. The design of the comprehensive approach to elder
26 abuse prevention and intervention in the state utilizing the
27 prevention of elder abuse program pursuant to section 231.56A
28 and the office of substitute decision maker created pursuant
29 to chapter 231E. The design shall also address all of the
30 following:

31 (1) Harmonization of the approach design with the
32 existing dependent adult abuse system pursuant to chapter
33 235B, including but not limited to standardized training,
34 collaboration between the elder abuse approach and the
35 department of human services when a report of dependent adult

1 abuse involves an older individual, and the membership of
2 multidisciplinary teams.

3 (2) Incorporation of the approach design into other
4 existing and developing components of the system including
5 the area agencies on aging, the mental health and disability
6 services regions, local public health departments, the local
7 offices of the department on human services, the courts, and
8 other appropriate entities, to most effectively and efficiently
9 address the needs of older individuals.

10 b. The definition of elder abuse to be used in the approach
11 to elder abuse. The task force shall address continued use
12 of the definition of "elder abuse" as specified under the
13 federal Older Americans Act and utilized by the prevention of
14 elder abuse program under section 231.56A, or shall provide a
15 specific alternative definition.

16 c. The designation of a single point of contact to report
17 elder abuse. The task force shall specifically address
18 utilizing the aging and disability resource center network as
19 the single point of contact.

20 d. The means of addressing financial exploitation of older
21 individuals, including those relating to powers of attorney and
22 conservatorships as described in the 2012 task force report.

23 e. Promotion of public awareness of elder abuse and the
24 services and support available to older individuals at risk of
25 or experiencing elder abuse.

26 f. Any specific changes in statute and rules necessary to
27 achieve the recommendations of the task force.

28 3. The task force shall submit a progress report to the
29 elder abuse prevention and intervention legislative interim
30 committee established pursuant to this Act for review, by
31 October 31, 2013, and shall submit a final report of its
32 recommendations and proposed legislation following approval
33 by the legislative interim committee to the governor and the
34 general assembly no later than December 31, 2013.

35 Sec. 52. LEGISLATIVE INTERIM COMMITTEE. The legislative

1 council is requested to establish a legislative interim
 2 committee on elder abuse prevention and intervention for the
 3 2013 legislative interim to monitor the progress of, and
 4 provide direction to, the task force on elder abuse prevention
 5 and intervention created in this Act. The legislative
 6 committee shall review the progress report and approve the
 7 final report of the task force and shall submit the committee's
 8 recommendations and a final report to the general assembly
 9 following completion of the committee's work.

10 Sec. 53. PILOT PROJECT — GUARDIANSHIP AND CONSERVATORSHIP
 11 MONITORING. The department on aging shall collaborate
 12 with the national health law and policy resource center
 13 at the university of Iowa college of law to establish a
 14 three-year pilot project to train, recruit, and oversee
 15 volunteers to assist the courts in monitoring guardianships and
 16 conservatorships and to provide assistance to guardians and
 17 conservators. The pilot project shall be implemented initially
 18 in the sixth judicial district. The pilot project shall be
 19 utilized to establish a basis for an ongoing guardianship and
 20 conservatorship monitoring and assistance program administered
 21 through the department on aging. The department on aging
 22 shall submit an annual report to the individuals identified
 23 in this Act for submission of reports. The annual report
 24 shall include the objectives and results for the pilot project
 25 year, how the funds allocated were utilized in meeting the
 26 pilot project's objectives, the number of individuals served,
 27 the types of services provided, any other sources of funding
 28 utilized or identified as available for the pilot project, and
 29 the continuing needs of the pilot project.

30 Sec. 54. EFFECTIVE UPON ENACTMENT. The section of this
 31 division of this Act establishing a task force on elder abuse
 32 prevention, being deemed of immediate importance, takes effect
 33 upon enactment.

34 Sec. 55. EFFECTIVE UPON ENACTMENT. The section of this
 35 division of this Act amending section 231.33, subsection 21,

1 if enacted by 2013 Iowa Acts, Senate File 184, being deemed of
2 immediate importance, takes effect upon enactment.

3 Sec. 56. RETROACTIVE APPLICABILITY. The section of this
4 division of this Act amending section 231.33, subsection 21,
5 if enacted by 2013 Iowa Acts, applies retroactively to July 1,
6 2012.

7 DIVISION X

8 EMS TASK FORCE

9 Sec. 57. EMERGENCY MEDICAL SERVICES TASK FORCE AND REPORT.

10 1. The department of public health shall establish a task
11 force to ensure the future availability of quality emergency
12 medical services for the state.

13 2. The members of the task force shall be appointed by the
14 director of the department of public health, or the director's
15 designee, as follows:

16 a. A manager of a rural volunteer emergency medical
17 transport service.

18 b. A manager of a rural paid emergency medical transport
19 service.

20 c. A manager of an urban emergency medical transport
21 service.

22 d. A manager of a nontransport emergency medical service.

23 e. A representative of a fire department-based emergency
24 medical service.

25 f. A representative of a hospital-based emergency medical
26 service.

27 g. A representative of a private, for-profit emergency
28 medical transport service.

29 h. A representative of a not-for-profit emergency medical
30 transport service.

31 i. A representative of the Iowa emergency medical services
32 association board of directors.

33 j. A representative of an emergency medical services
34 training agency.

35 k. An urban emergency department physician.

- 1 l. A rural emergency department physician.
2 m. A representative of the Iowa emergency nurses
3 association.
4 n. A representative of the Iowa alliance in home care.
5 o. A representative of an emergency medical service air
6 ambulance.
7 p. A representative of the Iowa hospital association.
8 q. A representative of the private insurance industry.
9 r. A representative of the Iowa Medicaid enterprise
10 division of the department of human services.
11 s. A representative of city government.
12 t. A representative of county government.
13 u. A representative of the nursing facility industry.
14 v. A representative of the Iowa behavioral health
15 association.
16 w. A consumer of emergency medical services.
17 x. An advanced registered nurse practitioner.
18 3. The task force shall discuss the current state of
19 emergency medical services in Iowa and make recommendations for
20 enhancement of Iowa's emergency medical services system. The
21 recommendations shall address issues facing volunteer and paid
22 rural emergency medical services, cost projections including
23 administration costs for all recommendations, the Medicaid
24 reimbursement fee schedule for ambulance services, and the
25 nature and scope of any recommended changes in regulations
26 governing emergency medical services.
27 4. The task force shall, by April 30, 2014, submit a final
28 report of its findings and recommendations to the governor,
29 the general assembly, the department of public health, and the
30 emergency medical services advisory council. The emergency
31 medical services advisory council shall review the report and
32 make recommendations related to implementation of the report's
33 recommendations to the director of the department of public
34 health.

35

DIVISION XI

1 MEDICATION THERAPY MANAGEMENT

2 Sec. 58. MEDICATION THERAPY MANAGEMENT — MEDICAID.

3 1. As used in this section, "medication therapy management"
4 means a systematic process performed by a licensed pharmacist,
5 designed to improve quality outcomes for patients and lower
6 health care costs, including emergency room, hospital,
7 provider, and other costs, by optimizing appropriate medication
8 use linked directly to achievement of the clinical goals of
9 therapy. Medication therapy management shall include all of
10 the following services:

11 a. A medication therapy review and in-person consultation
12 relating to all medications, vitamins, and herbal supplements
13 currently being taken by an eligible individual.

14 b. A medication action plan, subject to the limitations
15 specified in this section, communicated to the individual and
16 the individual's primary care physician or other appropriate
17 prescriber to address issues including appropriateness,
18 effectiveness, safety, drug interactions, and adherence. The
19 medication action plan may include drug therapy recommendations
20 to prescribers that are needed to meet clinical goals and
21 achieve optimal patient outcomes.

22 c. Documentation and follow-up to ensure consistent levels
23 of pharmacy services and positive outcomes.

24 2. a. The department of human services shall utilize a
25 request for proposals process and shall enter into a contract
26 for the provision of medication therapy management services for
27 eligible medical assistance program recipients who meet any of
28 the following criteria:

29 (1) An individual who takes four or more prescription drugs
30 to treat or prevent two or more chronic medical conditions.

31 (2) An individual with a prescription drug therapy problem
32 who is identified by the prescribing physician or other
33 appropriate prescriber, and referred to a pharmacist for
34 medication therapy management services.

35 (3) An individual who meets other criteria established by

1 the Iowa Medicaid enterprise.

2 b. The fees for pharmacist-delivered medication therapy
3 management services shall be separate from the reimbursement
4 for prescription drug product or dispensing services, and
5 shall be reasonable based on the resources and time required
6 to provide the service.

7 c. A fee shall be established for physician reimbursement
8 for services delivered for medication therapy management and
9 shall be reasonable based on the resources and time required
10 to provide the service.

11 d. If any part of the medication therapy management
12 plan developed by a pharmacist incorporates services which
13 are outside the pharmacist's independent scope of practice
14 including the initiation of therapy, modification of dosages,
15 therapeutic interchange, or changes in drug therapy, the
16 express authorization of the individual's physician or other
17 appropriate prescriber shall be required.

18 Sec. 59. EFFECTIVE UPON ENACTMENT. This division of this
19 Act, being deemed of immediate importance, takes effect upon
20 enactment.

21 DIVISION XII

22 HOSPITAL PROVIDER TAX

23 Sec. 60. Section 249M.5, Code 2013, is amended to read as
24 follows:

25 **249M.5 Future repeal.**

26 This chapter is repealed June 30, ~~2013~~ 2016.

27 Sec. 61. EFFECTIVE UPON ENACTMENT. The section of this
28 division of this Act relating to the future repeal of the
29 hospital health care access assessment program chapter, being
30 deemed of immediate importance, takes effect upon enactment.

31 DIVISION XIII

32 ILL AND HANDICAPPED WAIVER NAME CHANGE

33 Sec. 62. Section 423.3, subsection 18, paragraph f,
34 subparagraph (1), Code 2013, is amended to read as follows:

35 (1) ~~Ill and handicapped~~ Health and disability waiver

1 service providers, described in 441 IAC 77.30.

2 DIVISION XIV

3 MILLER TRUST

4 Sec. 63. Section 633C.2, Code 2013, is amended to read as
5 follows:

6 **633C.2 Disposition of medical assistance special needs**
7 **trusts.**

8 Regardless of the terms of a medical assistance special
9 needs trust, any income received or asset added to the trust
10 during a one-month period shall be expended as provided for
11 medical assistance income trusts under section 633C.3, on
12 a monthly basis, during the life of the beneficiary. Any
13 increase in income or principal retained in the trust from
14 a previous month may be expended, during the life of the
15 beneficiary, only for reasonable and necessary expenses of
16 the trust, not to exceed ~~ten~~ twenty-five dollars per month
17 without court approval, for special needs of the beneficiary
18 attributable to the beneficiary's disability and approved by
19 the district court, for medical care or services that would
20 otherwise be covered by medical assistance under chapter 249A,
21 or to reimburse the state for medical assistance paid on behalf
22 of the beneficiary.

23 Sec. 64. Section 633C.3, subsection 1, unnumbered paragraph
24 1, Code 2013, is amended to read as follows:

25 Regardless of the terms of a medical assistance income
26 trust, if the beneficiary's total monthly income is less
27 than one hundred and twenty-five percent of the average
28 statewide charge for nursing facility services to a private
29 pay resident of a nursing facility, then, during the life of
30 the beneficiary, any property received or held by the trust
31 shall be expended only as follows, as applicable, and in the
32 following order of priority:

33 Sec. 65. Section 633C.3, subsection 1, paragraph a, Code
34 2013, is amended to read as follows:

35 a. A reasonable amount may be paid or set aside each

1 month for necessary expenses of the trust, not to exceed ~~ten~~
2 twenty-five dollars per month without court approval.

3 Sec. 66. Section 633C.3, subsection 2, unnumbered paragraph
4 1, Code 2013, is amended to read as follows:

5 Regardless of the terms of a medical assistance income
6 trust, if the beneficiary's total monthly income is at or above
7 one hundred and twenty-five percent of the average statewide
8 charge for nursing facility services to a private-pay resident,
9 then, during the life of the beneficiary, any property received
10 or held by the trust shall be expended only as follows, as
11 applicable, in the following order of priority:

12 Sec. 67. Section 633C.3, subsection 2, paragraph a, Code
13 2013, is amended to read as follows:

14 a. A reasonable amount may be paid or set aside each
15 month for necessary expenses of the trust, not to exceed ~~ten~~
16 twenty-five dollars per month without court approval.

17 Sec. 68. APPLICABILITY. The sections of this division of
18 this Act amending sections 633C.2 and 633C.3 apply to trusts in
19 existence on or after July 1, 2013.

20 DIVISION XV

21 FAMILY PLANNING WAIVER — STATE PLAN

22 Sec. 69. Section 249A.3, subsection 2, paragraph a,
23 subparagraph (10), Code 2013, is amended to read as follows:

24 (10) Individuals eligible for family planning services
25 under a federally approved demonstration waiver or state plan.

26 Sec. 70. MEDICAID STATE PLAN AMENDMENT — FAMILY
27 PLANNING. The department of human services shall amend the
28 medical assistance state plan to include the family planning
29 eligibility group, in accordance with the requirements of
30 section 2303 of the federal Affordable Care Act, Pub. L. No.
31 111-148, at the income eligibility level specified in the
32 family planning section 1115 demonstration waiver in effect on
33 January 1, 2013, to be effective no later than January 1, 2014.

34 Sec. 71. 2010 Iowa Acts, chapter 1192, section 11,
35 subsection 24, paragraph a, subparagraph (1), subparagraph

1 division (a), is amended to read as follows:

2 (a) Are uninsured or have health insurance coverage ~~that~~
3 ~~does not include coverage for benefits provided under the Iowa~~
4 ~~family planning network~~ subject to the medical assistance
5 program being the payer of last resort.

6 Sec. 72. EFFECTIVE UPON ENACTMENT AND CONTINGENT
7 IMPLEMENTATION. The sections of this division of this
8 Act relating to the family planning waiver and state plan
9 amendment, being deemed of immediate importance, take effect
10 upon enactment. However, the department of human services
11 shall only implement those sections to the extent the
12 department receives federal approval of the requests relating
13 to the waiver and the medical assistance state plan amendment
14 necessary to implement those sections.

15 DIVISION XVI

16 MISCELLANEOUS HEALTH CARE AMENDMENTS

17 Sec. 73. Section 249A.2, subsection 1, Code 2013, is amended
18 by striking the subsection.

19 Sec. 74. Section 249A.2, subsections 4 and 7, Code 2013, are
20 amended to read as follows:

21 4. "*Discretionary medical assistance*" means mandatory
22 medical assistance or ~~additional~~ optional medical assistance
23 provided to medically needy individuals whose income and
24 resources are in excess of eligibility limitations but are
25 insufficient to meet all of the costs of necessary medical
26 care and services, provided that if the assistance includes
27 services in institutions for mental diseases or intermediate
28 care facilities for persons with an intellectual disability,
29 or both, for any group of such individuals, the assistance
30 also includes for all covered groups of such individuals at
31 least the care and services enumerated in Tit. XIX of the
32 federal Social Security Act, section 1905(a), paragraphs (1)
33 through (5), and (17), as codified in 42 U.S.C. § 1396d(a),
34 pars. (1) through (5), and (17), or any seven of the care and
35 services enumerated in Tit. XIX of the federal Social Security

1 Act, section 1905(a), paragraphs (1) through ~~(7) and (9)~~
2 ~~through (18)~~ (24), as codified in 42 U.S.C. § 1396d(a), ~~pars.~~
3 paragraphs (1) through (7), and (9) through (18) (24).

4 7. "Medical assistance" or "Medicaid" means payment of all
5 or part of the costs of the care and services ~~required to be~~
6 ~~provided by~~ made in accordance with Tit. XIX of the federal
7 Social Security Act, ~~section 1905(a), paragraphs (1) through~~
8 ~~(5), and (17), as codified in 42 U.S.C. § 1396d(a), pars. (1)~~
9 ~~through (5), and (17) and authorized pursuant to this chapter.~~

10 Sec. 75. Section 249A.2, Code 2013, is amended by adding the
11 following new subsections:

12 NEW SUBSECTION. 6A. "Mandatory medical assistance" means
13 payment of all or part of the costs of the care and services
14 required to be provided by Tit. XIX of the federal Social
15 Security Act, section 1905(a), paragraphs (1) through (5),
16 (17), (21), and (28), as codified in 42 U.S.C. § 1396d(a),
17 paragraphs (1) through (5), (17), (21), and (28).

18 NEW SUBSECTION. 7A. "Medical assistance program" or
19 "Medicaid program" means the program established under this
20 chapter to provide medical assistance.

21 NEW SUBSECTION. 8A. "Optional medical assistance" means
22 payment of all or part of the costs of any or all of the care
23 and services authorized to be provided by Tit. XIX of the
24 federal Social Security Act, section 1905(a), paragraphs (6)
25 through (16), (18) through (20), (22) through (27), and (29),
26 as codified in 42 U.S.C. § 1396d(a), paragraphs (6) through
27 (16), and (18) through (20), (22) through (27), and (29).

28 Sec. 76. Section 249A.3, subsection 1, unnumbered paragraph
29 1, Code 2013, is amended to read as follows:

30 ~~Medical~~ Mandatory medical assistance shall be provided to,
31 or on behalf of, any individual or family residing in the state
32 of Iowa, including those residents who are temporarily absent
33 from the state, who:

34 Sec. 77. Section 249A.3, subsection 1, paragraph 1,
35 subparagraph (2), Code 2013, is amended to read as follows:

1 (2) ~~Additionally, effective July 1, 2009, medical~~
2 ~~assistance shall be provided to~~ Is a pregnant woman or infant
3 whose family income is at or below three hundred percent of the
4 federal poverty level, as defined by the most recently revised
5 poverty income guidelines published by the United States
6 department of health and human services, if otherwise eligible.

7 Sec. 78. Section 249A.3, subsection 2, paragraph a,
8 unnumbered paragraph 1, Code 2013, is amended to read as
9 follows:

10 ~~Medical~~ Mandatory medical assistance may also, within the
11 limits of available funds and in accordance with section
12 249A.4, subsection 1, be provided to, or on behalf of,
13 other individuals and families who are not excluded under
14 subsection 5 of this section and whose incomes and resources
15 are insufficient to meet the cost of necessary medical care and
16 services in accordance with the following order of priorities:

17 Sec. 79. Section 249A.3, subsection 2, paragraph a,
18 subparagraph (1), subparagraph division (a), Code 2013, is
19 amended to read as follows:

20 (a) As allowed under 42 U.S.C. § 1396a(a)(10)(A)(ii)(XIII),
21 individuals with disabilities, who are less than sixty-five
22 years of age, who are members of families whose income is less
23 than two hundred fifty percent of the most recently revised
24 official poverty guidelines published by the United States
25 department of health and human services for the family, who
26 have earned income and who are eligible for mandatory medical
27 assistance or ~~additional~~ optional medical assistance under this
28 section if earnings are disregarded. As allowed by 42 U.S.C.
29 § 1396a(r)(2), unearned income shall also be disregarded in
30 determining whether an individual is eligible for assistance
31 under this subparagraph. For the purposes of determining the
32 amount of an individual's resources under this subparagraph
33 and as allowed by 42 U.S.C. § 1396a(r)(2), a maximum of ten
34 thousand dollars of available resources shall be disregarded,
35 and any additional resources held in a retirement account, in a

1 medical savings account, or in any other account approved under
2 rules adopted by the department shall also be disregarded.

3 Sec. 80. Section 249A.3, subsection 2, paragraph a,
4 subparagraph (3), Code 2013, is amended to read as follows:

5 (3) Individuals who are receiving care in a hospital or
6 in a basic nursing home, intermediate nursing home, skilled
7 nursing home or extended care facility, as defined by section
8 135C.1, and who meet all eligibility requirements for federal
9 supplemental security income except that their income exceeds
10 the allowable maximum ~~therefor~~ for such eligibility, but
11 whose income is not in excess of the maximum established
12 ~~by subsection 4~~ for eligibility for discretionary medical
13 assistance and is insufficient to meet the full cost of their
14 care in the hospital or health care facility on the basis of
15 standards established by the department.

16 Sec. 81. Section 249A.3, subsection 2, paragraph b, Code
17 2013, is amended to read as follows:

18 b. Notwithstanding the provisions of this subsection
19 establishing priorities for individuals and families to
20 receive mandatory medical assistance, the department may
21 determine within the priorities listed in this subsection which
22 persons shall receive mandatory medical assistance based on
23 income levels established by the department, subject to the
24 limitations provided in subsection 4.

25 Sec. 82. Section 249A.3, subsection 3, Code 2013, is amended
26 to read as follows:

27 3. ~~Additional~~ Optional medical assistance may, within
28 the limits of available funds and in accordance with section
29 249A.4, subsection 1, be provided to, or on behalf of, either
30 of the following groups of individuals and families:

31 a. Only those individuals and families described in
32 subsection 1 ~~of this section; or.~~

33 b. Those individuals and families described in both
34 subsections 1 and 2.

35 Sec. 83. Section 249A.4, subsection 9, unnumbered paragraph

1 1, Code 2013, is amended to read as follows:

2 Adopt rules pursuant to chapter 17A in determining the
3 method and level of reimbursement for all medical and health
4 services referred to in section 249A.2, subsection 1 or 7
5 to be provided under the medical assistance program, after
6 considering all of the following:

7 Sec. 84. Section 249B.1, subsection 6, Code 2013, is amended
8 to read as follows:

9 6. "Medical assistance" means "mandatory medical assistance",
10 ~~"additional"~~ "optional medical assistance", "discretionary medical
11 assistance" or "medicare cost sharing" as defined in section
12 249A.2 which is provided to an individual pursuant to chapter
13 249A and Tit. XIX of the federal Social Security Act.

14 Sec. 85. Section 249F.1, subsection 1, Code 2013, is amended
15 to read as follows:

16 1. "Medical assistance" means "mandatory medical
17 assistance", ~~"additional"~~ "optional medical assistance",
18 "discretionary medical assistance", or "Medicare cost sharing"
19 as each is defined in section 249A.2 which is provided to an
20 individual pursuant to chapter 249A and Tit. XIX of the federal
21 Social Security Act.

22 Sec. 86. Section 509.1, subsection 7, Code 2013, is amended
23 to read as follows:

24 7. A policy issued to the department of human services,
25 which shall be deemed the policyholder, to insure eligible
26 persons for medical assistance, or for both mandatory medical
27 assistance and ~~additional~~ optional medical assistance, as
28 defined by chapter 249A as hereafter amended.

29 Sec. 87. Section 514.1, subsection 2, Code 2013, is amended
30 to read as follows:

31 2. For the purposes of this chapter, "subscriber" means an
32 individual who enters into a contract for health care services
33 with a corporation subject to this chapter and includes a
34 person eligible for mandatory medical assistance or ~~additional~~
35 optional medical assistance as defined under chapter 249A, with

1 respect to whom the department of human services has entered
2 into a contract with a firm operating under this chapter. For
3 purposes of this chapter, "provider" means a person as defined
4 in section 4.1, subsection 20, which is licensed or authorized
5 in this state to furnish health care services. "Health care"
6 means that care necessary for the purpose of preventing,
7 alleviating, curing, or healing human physical or mental
8 illness, injury, or disability.

9

DIVISION XVII

10

ALZHEIMER'S COORDINATION AND STRATEGY

11

Sec. 88. NEW SECTION. 135P.1 Definitions.

12

As used in this chapter, unless the context otherwise

13

requires:

14

1. "Alzheimer's disease" or "Alzheimer's" means a

15

progressive, degenerative, fatal disorder that results in loss

16

of memory, loss of thinking and language skills, and behavioral

17

changes. "Alzheimer's disease" includes related dementias

18

including vascular dementia, Parkinson's disease, dementia

19

with Lewy bodies, frontotemporal dementia, Creutzfeldt-Jacob

20

disease, normal pressure hydrocephalus, and mixed dementia.

21

2. "Department" means the department of public health.

22

Sec. 89. NEW SECTION. 135P.2 Alzheimer's disease —

23

state-level coordination and comprehensive response strategy.

24

1. The department shall develop and administer, and

25

provide for state-level coordination of, a comprehensive

26

Alzheimer's disease response strategy in accordance with the

27

recommendations of the stakeholder workgroup convened pursuant

28

to 2011 Iowa Acts, chapter 61. The response strategy shall

29

include development and monitoring of short-term and long-term

30

objectives and action steps to ensure that individuals with

31

Alzheimer's disease have access to the highest quality and

32

most appropriate care at all stages of the disease and in

33

all settings across the service and supports continuum. The

34

response strategy may include prioritization of objectives

35

and action steps to most efficiently utilize resources and

1 funding. The department shall update the initial response
2 strategy biennially and shall submit a progress report annually
3 in January to the governor and the general assembly.

4 2. In providing state-level coordination, the department
5 shall integrate public and private resources and programs,
6 reduce duplication, evaluate programs and services to ensure
7 that evidence-based, high-quality programs and services are
8 available to maximize the positive impact for individuals with
9 Alzheimer's and their families and caregivers, and promote
10 public awareness.

11 3. In developing the comprehensive Alzheimer's disease
12 response strategy, the department shall do all of the
13 following:

14 a. Establish an Alzheimer's disease coordinator position
15 in the department in a manner similar to those positions
16 that address other chronic conditions in the state. The
17 coordinator, in partnership with public and private entities
18 and the multidisciplinary advisory council convened pursuant to
19 paragraph "b", shall do all of the following:

20 (1) Implement the recommendations of the Alzheimer's
21 disease stakeholder workgroup convened pursuant to 2011 Iowa
22 Acts, chapter 61, and establish standards for the comprehensive
23 Alzheimer's disease response strategy.

24 (2) Inform, educate, and empower the public regarding the
25 impact of Alzheimer's disease, in order to increase awareness
26 of the disease and in particular the benefits of early
27 detection, while working to decrease the stigma associated with
28 Alzheimer's disease.

29 (3) Monitor the prevalence of Alzheimer's disease and
30 cognitive impairment in the state through data collection and
31 coordination efforts. Such data shall be made available to
32 and used to assist public and private efforts in developing
33 evidence-based programs and policies that address Alzheimer's
34 disease.

35 (4) Evaluate, and promote the improved effectiveness,

1 accessibility, and quality of, clinical and population-based
2 Alzheimer's services. The evaluation and promotion efforts
3 shall include coordination of services to reach rural and
4 underserved areas of the state.

5 (5) Ensure a competent public and private sector workforce
6 specific to the challenges of Alzheimer's disease. The effort
7 shall include coordinating existing state efforts to develop,
8 implement, and evaluate curricula and training requirements
9 for providers of services who interact with individuals with
10 Alzheimer's disease.

11 (6) Act as a liaison to the aging and disabilities resource
12 centers, area agencies on aging, Alzheimer's association
13 chapters, the health and long-term care access advisory council
14 created by the department to implement the directives of
15 sections 135.163 and 135.164, and other entities to ensure
16 Alzheimer's disease is appropriately addressed in the state.

17 (7) Secure public and private funding relating to dementia
18 to fulfill the duties specified under this chapter.

19 *b.* Convene a multidisciplinary advisory council. The
20 council shall assist and advise the department and the
21 coordinator; develop partnerships to provide coordination,
22 collaboration, and support for Alzheimer's-related services
23 and programs throughout the state; and advocate on behalf of
24 persons with Alzheimer's disease and their families. The
25 advisory council shall, at a minimum, include representation
26 from individuals with Alzheimer's disease and their families;
27 caregivers and other providers of services and supports;
28 medical providers including primary and specialty care
29 providers, which shall include geriatricians, neurologists,
30 and others with expertise in Alzheimer's disease; the
31 Alzheimer's association; community-based organizations and
32 other organizations with interest or expertise in Alzheimer's
33 disease; academic institutions and programs with a focus
34 on Alzheimer's disease and dementia; and appropriate state
35 agencies including but not limited to the department on

1 aging, the department of human services, the department of
2 inspections and appeals, the department of public safety, and
3 the department of workforce development. The department shall
4 enlist private entities in providing staff support for the
5 council.

6 Sec. 90. REPEAL. Section 135.171, Code 2013, is repealed.

7 Sec. 91. INCORPORATION OF EXISTING STATE DUTIES. The
8 department of public health shall incorporate the requirements
9 specified in section 135.171, Code 2013, into the comprehensive
10 Alzheimer's disease strategy developed and administered
11 pursuant to this division of this Act.

12 DIVISION XVIII

13 AREA HEALTH EDUCATION CENTERS

14 Sec. 92. NEW SECTION. 135.179 Area health education centers
15 fund.

16 An area health education centers fund is created in the
17 state treasury as a separate fund under the control of the
18 department. The department may receive appropriations,
19 contributions, grants, and in-kind contributions to support
20 the purposes of the fund. The fund shall be separate from the
21 general fund of the state and shall not be considered part of
22 the general fund of the state. The moneys in the fund shall
23 not be considered revenue of the state, but rather shall be
24 moneys of the fund. The moneys in the fund are appropriated
25 to the department to be distributed to a publicly owned acute
26 care teaching hospital located in a county with a population
27 over three hundred fifty thousand that shall subcontract
28 with health care entities that host regional area health
29 education centers to recruit and retain a skilled health care
30 workforce in rural and underserved areas of the state. The
31 funds distributed shall be used to provide the nonfederal
32 funding match requirement for receipt of federal grants for
33 area health education centers from the federal health resources
34 and services administration of the United States department of
35 health and human services and to assist with continuation of

1 existing educational health care programs and activities. The
2 moneys in the fund are not subject to section 8.33 and shall
3 not be transferred, used, obligated, appropriated, or otherwise
4 encumbered, except to provide for the purposes of this section.
5 Notwithstanding section 12C.7, subsection 2, interest or
6 earnings on moneys deposited in the fund shall be credited to
7 the fund.

8 Sec. 93. CODE EDITOR DIRECTIVE. The Code editor shall
9 create a new division in chapter 135 codifying section 135.179,
10 as enacted in this division of this Act, as the area health
11 education centers fund.

12 DIVISION XIX

13 MEDICAID BREAST AND CERVICAL CANCER

14 Sec. 94. Section 249A.3, subsection 2, paragraph a,
15 subparagraph (2), Code 2013, is amended to read as follows:

16 (2) (a) As provided under the federal Breast and Cervical
17 Cancer Prevention and Treatment Act of 2000, Pub. L. No.
18 106-354, ~~women~~ individuals who meet all of the following
19 criteria:

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

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

22 (iii) Have been screened for breast and cervical cancer
23 under the United States centers for disease control and
24 prevention breast and cervical cancer early detection program
25 established under 42 U.S.C. § 300k et seq., in accordance
26 with the requirements of 42 U.S.C. § 300n, and need treatment
27 for breast or cervical cancer. ~~A woman~~ An individual is
28 considered screened for breast and cervical cancer under this
29 subparagraph subdivision if the ~~woman~~ individual is screened
30 by any provider or entity, and the state grantee of the United
31 States centers for disease control and prevention funds under
32 Tit. XV of the federal Public Health Services Act has elected
33 to include screening activities by that provider or entity
34 as screening activities pursuant to Tit. XV of the federal
35 Public Health Services Act. This screening includes ~~but is~~

1 ~~not limited to~~ breast or cervical cancer screenings or related
2 diagnostic services provided or funded by family planning ~~or~~
3 centers, community health centers ~~and breast cancer screenings~~
4 ~~funded by the Susan G. Komen foundation which~~, or nonprofit
5 organizations, and the screenings or services are provided
6 to ~~women~~ individuals who meet the eligibility requirements
7 established by the state grantee of the United States centers
8 for disease control and prevention funds under Tit. XV of the
9 federal Public Health Services Act.

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

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

15 Sec. 95. MEDICAID STATE PLAN AMENDMENT. The department of
16 human services shall submit a medical assistance state plan
17 amendment to the centers for Medicare and Medicaid services of
18 the United States department of health and human services to
19 provide for applicability of the federal Breast and Cervical
20 Cancer Prevention and Treatment Act of 2000, Pub. L. No.
21 106-354, to both men and women. The department shall implement
22 applicability of the program to both men and women upon receipt
23 of federal approval.

24 DIVISION XX

25 HEALTH AND LONG-TERM CARE

26 Sec. 96. Section 135.164, subsection 1, paragraph d, Code
27 2013, is amended by striking the paragraph.

28 Sec. 97. Section 135.164, subsection 4, Code 2013, is
29 amended by striking the subsection.

30 Sec. 98. COST PROJECTION REPORT — STRATEGIC PLAN. The
31 department of public health shall develop cost projections
32 for implementing the strategic plan for health care delivery
33 infrastructure and health care workforce resources as specified
34 in section 135.164, and shall submit a report of such cost
35 projections and any recommendations to the individuals

1 identified in this Act for submission of reports by December
2 15, 2013.

3 DIVISION XXI

4 AUTISM SUPPORT PROGRAM

5 Sec. 99. NEW SECTION. 225D.1 Definitions.

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

8 1. *"Applied behavioral analysis"*, *"autism service provider"*,
9 *"pharmacy care"*, *"psychiatric care"*, *"psychological care"*,
10 *"rehabilitative care"*, *"therapeutic care"*, and *"treatment plan"*
11 mean the same as defined in section 514C.28.

12 2. *"Autism"* means autism spectrum disorders as defined in
13 section 514C.28.

14 3. *"Autism support fund"* or *"fund"* means the autism support
15 fund created in section 225D.2.

16 4. *"Behavioral health treatment"* means clinically relevant
17 counseling and treatment programs, including applied behavioral
18 analysis, that meet both of the following requirements:

19 a. Are necessary to develop, maintain, or restore, to the
20 maximum extent practicable, the functioning of an individual.

21 b. Are provided or supervised by a board-certified behavior
22 analyst or a licensed psychologist, as long as the psychologist
23 has commensurate education or training.

24 5. *"Clinically relevant"* means medically necessary and
25 resulting in the development, maintenance, or restoration,
26 to the maximum extent practicable, of the functioning of an
27 individual.

28 6. *"Department"* means the department of human services.

29 7. *"Diagnostic assessment of autism spectrum disorders"* means
30 medically necessary assessment, evaluations, or tests performed
31 by a licensed physician, licensed physician assistant, licensed
32 psychologist, or licensed registered nurse practitioner, with
33 expertise and special training in developmental disabilities or
34 autism, to diagnose whether an individual has autism.

35 8. *"Eligible individual"* means a child less than nine years

1 of age who has been diagnosed with autism based on a diagnostic
2 assessment of autism spectrum disorders, is not otherwise
3 eligible for coverage under the medical assistance program, is
4 not eligible for coverage under section 514C.28 or for private
5 insurance coverage, and whose household income does not exceed
6 four hundred percent of the federal poverty level.

7 9. "*Federal poverty level*" means the most recently revised
8 poverty income guidelines published by the United States
9 department of health and human services.

10 10. "*Household income*" means household income as determined
11 using the modified adjusted gross income methodology pursuant
12 to section 2002 of the federal Patient Protection and
13 Affordable Care Act, Pub. L. No. 111-148.

14 11. "*Medical assistance*" or "*Medicaid*" means assistance
15 provided under the medical assistance program pursuant to
16 chapter 249A.

17 12. "*Regional autism assistance program*" means the regional
18 autism assistance program created in section 256.35.

19 13. "*Treatment of autism*" means treatment that is
20 identified in a treatment plan and includes medically necessary
21 behavioral health treatment, pharmacy care, psychiatric care,
22 psychological care, rehabilitative care, and therapeutic care
23 that is one of the following:

24 a. Prescribed, ordered, or provided by a licensed
25 physician, licensed physician assistant, licensed psychologist,
26 licensed social worker, or licensed advanced registered nurse
27 practitioner.

28 b. Provided by an autism service provider.

29 c. Provided by a person, entity, or group that works under
30 the direction of an autism service provider.

31 Sec. 100. NEW SECTION. 225D.2 Autism support program —
32 fund.

33 1. The department shall implement an autism support
34 program to provide payment for the treatment of autism for
35 eligible individuals. The department shall adopt rules,

1 including standards and guidelines pursuant to chapter 17A to
2 implement and administer the program. In adopting the rules,
3 standards, and guidelines for the program, the department shall
4 consult with and incorporate the recommendations of an expert
5 panel convened by the regional autism assistance program to
6 provide expert opinion on clinically relevant practices and
7 guidance on program implementation and administration. The
8 expert panel shall consist of families of individuals with
9 autism; educational, medical, and human services specialists,
10 professionals, and providers; and others with interest in or
11 expertise related to autism. The program shall be implemented
12 and administered in a manner so that payment for services
13 is available throughout the state, including in rural and
14 under-resourced areas.

15 2. At a minimum, the rules, standards, and guidelines for
16 the program shall address all of the following:

17 a. A maximum annual benefit amount for an eligible
18 individual of thirty-six thousand dollars.

19 b. A maximum of twenty-four months of applied behavioral
20 analysis treatment.

21 c. Notwithstanding the age limitation for an eligible
22 individual, a provision that if an eligible individual reaches
23 nine years of age prior to completion of the maximum applied
24 behavioral analysis treatment period specified in paragraph
25 "b", the individual may complete such treatment in accordance
26 with the individual's treatment plan, not to exceed the maximum
27 treatment period.

28 d. A graduated schedule for cost-sharing by an eligible
29 individual based on a percentage of the total benefit amount
30 expended for the eligible individual, annually. Cost-sharing
31 shall be applicable to eligible individuals with household
32 incomes at or above two hundred percent of the federal poverty
33 level in incrementally increased amounts up to a maximum of
34 ten percent. The rules shall provide a financial hardship
35 exemption from payment of the cost-sharing based on criteria

1 established by rule of the department.

2 *e.* Application, approval, compliance, and appeal processes
3 for eligible individuals as necessary to operate and manage the
4 program.

5 *f.* Enrollment, renewal, and reimbursement of claims
6 provisions for autism service providers participating in the
7 program.

8 *g.* A requirement of family engagement and participation as
9 part of the eligible individual's treatment plan.

10 *h.* A requirement that the administrator of the program
11 utilize the regional autism assistance program to coordinate
12 interventions between eligible individuals and their families
13 receiving support through the autism support program with
14 appropriate medical, educational, and treatment providers,
15 including integrated health homes. The regional autism
16 assistance program shall provide for family navigation and
17 coordination and integration of services through the statewide
18 system of regional child health specialty clinics, utilizing
19 the community child health team model. As necessitated by
20 the availability of resources in the community where services
21 are delivered, telehealth may be used in delivering and
22 coordinating interventions with appropriate providers. To the
23 extent available and accessible to an eligible individual,
24 the eligible individual shall be enrolled in an integrated
25 health home that is an approved provider enrolled in the
26 medical assistance program. Health home services that are
27 covered services under the medical assistance program shall be
28 reimbursed under the autism support program at rates consistent
29 with those established under the medical assistance program.

30 *i.* Requirements related to review of treatment plans,
31 which may require review once every six months, subject to
32 utilization review requirements established by rule. A more
33 or less frequent review may be agreed upon by the eligible
34 individual and the licensed physician or licensed psychologist
35 developing the treatment plan.

1 *j.* Recognition of the results of a diagnostic assessment of
2 autism as valid for a period of not less than twelve months,
3 unless a licensed physician or licensed psychologist determines
4 that a more frequent assessment is necessary.

5 3. Moneys in the autism support fund created under
6 subsection 5 shall be expended only for eligible individuals
7 who are not eligible for coverage for the same treatment
8 services under the medical assistance program, section 514C.28,
9 or private insurance. Payment for treatment services through
10 the fund shall be limited to only those services that are
11 clinically relevant and only to the extent approved under the
12 guidelines established by rule of the department.

13 4. This section shall not be construed as granting an
14 entitlement for any program, service, or other support for
15 eligible individuals. Any state obligation to provide a
16 program, service, or other support pursuant to this section
17 is limited to the extent of the funds appropriated for the
18 purposes of the program. The department may establish a
19 waiting list or terminate participation of eligible individuals
20 if the department determines that moneys in the autism support
21 fund are insufficient to cover future claims for reimbursement
22 beyond ninety days.

23 5. *a.* An autism support fund is created in the state
24 treasury under the authority of the department. Moneys
25 appropriated to and all other moneys specified for deposit
26 in the fund shall be deposited in the fund and used for the
27 purposes of the program.

28 *b.* The fund shall be separate from the general fund of the
29 state and shall not be considered part of the general fund of
30 the state. The moneys in the fund shall not be considered
31 revenue of the state, but rather shall be funds of the autism
32 support program. The moneys deposited in the fund are not
33 subject to section 8.33 and shall not be transferred, used,
34 obligated, appropriated, or otherwise encumbered, except to
35 provide for the purposes of this section. Notwithstanding

1 section 12C.7, subsection 2, interest or earnings on moneys
2 deposited in the fund shall be credited to the fund.

3 c. The department shall adopt rules pursuant to chapter 17A
4 to administer the fund and reimbursements made from the fund.

5 d. Moneys in the fund are appropriated to the department and
6 shall be used by the department for the purposes of the autism
7 support program. The department shall be the administrator of
8 the fund for auditing purposes.

9 e. The department shall submit an annual report to the
10 governor and the general assembly no later than January 1
11 of each year that includes but is not limited to all of the
12 following:

13 (1) The total number of applications received under the
14 program for the immediately preceding fiscal year.

15 (2) The number of applications approved and the total amount
16 of funding expended for reimbursements under the program in the
17 immediately preceding fiscal year.

18 (3) The cost of administering the program in the immediately
19 preceding fiscal year.

20 (4) The number of eligible individuals on a waiting list, if
21 any, and the amount of funding necessary to reduce the existing
22 waiting list.

23 (5) Recommendations for any changes to the program.

24 Sec. 101. IMPLEMENTATION.

25 1. The department of human services shall implement the
26 autism support program within one hundred twenty days of
27 the effective date of this division of this Act, subject to
28 available funding.

29 2. Notwithstanding section 8.47 or any other provision of
30 law to the contrary, the department may utilize a sole-source
31 contract and utilize the managed care entity under contract
32 with the department to manage behavioral health services under
33 the medical assistance program to administer the program.
34 Total administrative costs of the program shall not exceed ten
35 percent of the funds expended through the program, annually.

1 ~~comprehensive family support council~~ to oversee development and
2 implementation of the programs.

3 Sec. 107. Section 239B.5, Code 2013, is amended by adding
4 the following new subsection:

5 NEW SUBSECTION. 4. *a.* The department shall implement
6 policies and procedures as necessary to comply with provisions
7 of the federal Middle Class Tax Relief and Job Creation Act
8 of 2012, Pub. L. No. 112-96, to prevent assistance provided
9 under this chapter from being used in any electronic benefit
10 transfer transaction in any liquor store; any casino, gambling
11 casino, or gaming establishment; or any retail establishment
12 which provides adult-oriented entertainment in which performers
13 disrobe or perform in an unclothed state for entertainment.
14 For purposes of this paragraph, the definitions found in the
15 federal Middle Class Tax Relief and Job Creation Act and
16 related rules and statutes apply.

17 *b.* Unless otherwise precluded by federal law or regulation,
18 policies and procedures implemented under this subsection shall
19 at a minimum impose the prohibition described in paragraph "a"
20 as a condition for continued eligibility for assistance under
21 this chapter.

22 *c.* The department may implement additional measures as may
23 be necessary to comply with federal regulations in implementing
24 paragraph "a".

25 *d.* The department shall adopt rules as necessary to
26 implement this subsection.

27 Sec. 108. Section 239B.14, subsection 1, Code 2013, is
28 amended to read as follows:

29 1. a. An individual who obtains, or attempts to obtain,
30 or aids or abets an individual to obtain, by means of a
31 willfully false statement or representation, by knowingly
32 failing to disclose a material fact, or by impersonation, or
33 any fraudulent device, any assistance or other benefits under
34 this chapter to which the individual is not entitled, commits
35 a fraudulent practice.

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

5 Sec. 109. Section 249A.3, subsection 1, Code 2013, is
6 amended by adding the following new paragraph:

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

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

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

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

15 Sec. 110. Section 249A.3, subsection 2, paragraph a,
16 subparagraph (9), Code 2013, is amended by striking the
17 subparagraph.

18 Sec. 111. Section 249J.26, subsection 2, Code 2013, is
19 amended to read as follows:

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

21 Sec. 112. Section 514I.4, subsection 5, paragraph a, Code
22 2013, is amended by striking the paragraph.

23 Sec. 113. Section 514I.5, subsection 7, paragraph f, Code
24 2013, is amended to read as follows:

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

1 Sec. 114. Section 514I.5, subsection 8, paragraphs b and f,
2 Code 2013, are amended by striking the paragraphs.

3 Sec. 115. Section 514I.7, subsection 2, paragraphs a and g,
4 Code 2013, are amended to read as follows:

5 a. Determine individual eligibility for program enrollment
6 based upon review of completed applications and supporting
7 documentation as prescribed by federal law and regulation,
8 using policies and procedures adopted by rule of the department
9 pursuant to chapter 17A. The administrative contractor shall
10 not enroll a child who has group health coverage, unless
11 expressly authorized by such rules.

12 g. Create and Utilize the department's eligibility system
13 to maintain eligibility files that are compatible with the
14 data system of the department with pertinent eligibility
15 determination and ongoing enrollment information including, but
16 not limited to, data regarding beneficiaries, enrollment dates,
17 disenrollments, and annual financial redeterminations.

18 Sec. 116. Section 514I.7, subsection 2, paragraphs c, d, e,
19 f, and k, Code 2013, are amended by striking the paragraphs.

20 Sec. 117. Section 514I.8, subsection 1, Code 2013, is
21 amended to read as follows:

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

30 b. ~~Additionally, effective~~ Effective July 1, 2000, and
31 notwithstanding any medical assistance program eligibility
32 criteria to the contrary, medical assistance shall be provided
33 to, or on behalf of, an eligible infant whose family income
34 does not exceed two hundred percent of the federal poverty
35 level, as defined by the most recently revised poverty income

1 guidelines published by the United States department of health
2 and human services.

3 c. Effective July 1, 2009, and notwithstanding any medical
4 assistance program eligibility criteria to the contrary,
5 medical assistance shall be provided to, or on behalf of, a
6 pregnant woman or an eligible child who is an infant and whose
7 family income is at or below three hundred percent of the
8 federal poverty level, as defined by the most recently revised
9 poverty income guidelines published by the United States
10 department of health and human services.

11 Sec. 118. Section 514I.8, subsection 2, paragraph c, Code
12 2013, is amended to read as follows:

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

22 Sec. 119. Section 514I.8, subsections 3 and 4, Code 2013,
23 are amended to read as follows:

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

34 4. Once an eligible child is enrolled in a plan, the
35 ~~eligible child shall remain enrolled in the plan unless a~~

1 ~~determination is made, according to criteria established by the~~
2 ~~board, that the eligible child should be allowed to enroll in~~
3 ~~another qualified child health plan or should be disenrolled.~~
4 An enrollee may request to change plans within ninety days of
5 initial enrollment for any reason and at any time for cause, as
6 defined in 42 C.F.R. § 438.56(d)(2). Otherwise, an enrollee
7 may change plan enrollment once a year on the enrollee's
8 anniversary date.

9 Sec. 120. Section 514I.8, subsections 5 and 6, Code 2013,
10 are amended by striking the subsections.

11 Sec. 121. Section 514I.9, Code 2013, is amended to read as
12 follows:

13 **514I.9 Program benefits.**

14 1. ~~Until June 30, 1999, the benefits provided under the~~
15 ~~program shall be those benefits established by rule of the~~
16 ~~board and in compliance with Tit. XXI of the federal Social~~
17 ~~Security Act.~~

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

21 3. ~~Subsequent to June 30, 1999, the The hawk-i board shall~~
22 review the benefits package annually and shall determine
23 additions to or deletions from the benefits package offered.
24 The hawk-i board shall submit the recommendations to the
25 general assembly for any amendment to the benefits package.

26 4. 2. Benefits, in addition to those required by rule, may
27 be provided to eligible children by a participating insurer if
28 the benefits are provided at no additional cost to the state.

29 Sec. 122. REPEAL. Section 225C.48, Code 2013, is repealed.

30 Sec. 123. EFFECTIVE DATE. The following provision or
31 provisions of this Act take effect December 31, 2013:

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

34

DIVISION XXIII

35 OPTIONS — PERSONS WITH AGGRESSIVE OR PSYCHIATRIC BEHAVIORS

1 Sec. 124. FACILITY FOR PERSONS WITH AGGRESSIVE OR
2 PSYCHIATRIC BEHAVIORS — COMMITTEE — REPORT.

3 1. The department of inspections and appeals, in
4 conjunction with the department of human services, shall
5 establish and facilitate a committee of stakeholders to examine
6 options for designating a facility to provide care for persons
7 in this state who are sexually aggressive, combative, or have
8 unmet psychiatric needs.

9 2. The membership of the committee shall include but is not
10 limited to the following:

11 a. Representatives of the departments of inspections and
12 appeals, human services, corrections, and public health, the
13 department on aging, the state public defender, the office of
14 the citizens' aide, the office of the state long-term care
15 resident's advocate, and the judicial branch.

16 b. Consumers of services provided by long-term care
17 facilities and family members of consumers.

18 c. Representatives from leadingage Iowa, the Iowa health
19 care association, and the Iowa association of community
20 providers.

21 d. Direct care workers employed by long-term care
22 facilities.

23 e. Representatives from Iowa legal aid.

24 f. Representatives from AARP Iowa.

25 g. Representatives from the Iowa civil liberties union.

26 h. Other stakeholders as the department of inspections and
27 appeals and the department of human services deem appropriate.

28 3. The committee shall discuss whether a long-term care
29 facility, as defined in section 142D.2, should have the
30 ability to refuse admission to, or discharge, residents who
31 are sexually aggressive, combative, or have unmet psychiatric
32 needs. The committee shall consider options for establishment
33 of a facility to provide care for persons who are sexually
34 aggressive, combative, or have unmet psychiatric needs. The
35 committee shall identify the characteristics of residents

1 for such a facility, options for creating a new facility
2 to house such residents, options for the expansion of an
3 existing facility to house such residents, options for using
4 any alternative facilities for such residents, the workforce
5 and training necessary for the workforce in such facility,
6 options to qualify a facility for Medicaid reimbursement, cost
7 projections for any recommendations, and other information
8 deemed relevant by the department of inspections and appeals.

9 4. The committee shall provide a report detailing its
10 findings and recommendations to the governor and the general
11 assembly by December 15, 2013.

12 DIVISION XXIV

13 SPORTS INJURY PREVENTION

14 Sec. 125. MUNICIPAL YOUTH SPORTS INJURY PREVENTION STUDY
15 AND REPORT.

16 1. A municipal youth sports injury prevention study is
17 established to make recommendations regarding how cities can
18 most effectively prevent concussions and other sports-related
19 injuries in children participating in municipal youth
20 sports programs. The national center for sports safety is
21 requested to administer the study in coordination with the
22 department of public health and interested parties representing
23 cities, municipal youth sports programs, parents, coaches,
24 trainers, and other stakeholders. The study shall include
25 recommendations for safety equipment for participants and
26 training for employees and volunteers to be required by cities
27 as part of municipal youth sports programs.

28 2. The national center for sports safety is requested to
29 submit a report on its findings and recommendations to the
30 general assembly by January 10, 2014.

31 DIVISION XXV

32 SUICIDE PREVENTION

33 Sec. 126. Section 272.2, Code 2013, is amended by adding the
34 following new subsection:

35 NEW SUBSECTION. 19. Adopt rules requiring individuals

1 applying for renewal of a license, certificate, authorization,
2 or statement of recognition issued by the board who provide
3 a service to students to undergo training on suicide
4 prevention and trauma-informed care prior to each renewal. In
5 coordination with the department of education, the department
6 of public health, and stakeholders, including but not limited
7 to mental health professionals, school administrators, school
8 nurses, and guidance counselors, the board shall select
9 qualified programs for such training. For purposes of this
10 subsection, "*trauma-informed care*" means services that are based
11 on an understanding of the vulnerabilities and triggers of
12 individuals who have experienced trauma, recognize the role
13 trauma has played in the lives of those individuals, recognize
14 the presence of trauma symptoms and their onset, are supportive
15 of trauma recovery, and avoid further traumatization.

16 DIVISION XXVI

17 IOWACARE — ACCOUNT FOR HEALTH CARE TRANSFORMATION

18 Sec. 127. Section 249J.8, subsection 1, paragraph k, Code
19 2013, is amended to read as follows:

20 *k.* Premiums collected under this subsection shall be
21 deposited in the ~~premiums subaccount of the IowaCare~~ account
22 ~~for health care transformation~~ created pursuant to section
23 ~~249J.23~~ 249J.24.

24 Sec. 128. Section 249J.23, subsection 1, Code 2013, is
25 amended to read as follows:

26 1. An account for health care transformation is created
27 in the state treasury under the authority of the department.
28 Moneys received from sources including but not limited to
29 appropriations from the general fund of the state, grants,
30 and contributions shall be deposited in the account. ~~The~~
31 ~~account shall include a separate premiums subaccount. Revenue~~
32 ~~generated through payment of premiums by expansion population~~
33 ~~members as required pursuant to section 249J.8 shall be~~
34 ~~deposited in the separate premiums subaccount within the~~
35 ~~account.~~

1 Sec. 129. Section 249J.24, subsection 1, Code 2013, is
2 amended to read as follows:

3 1. An IowaCare account is created in the state treasury
4 under the authority of the department of human services.
5 Moneys appropriated from the general fund of the state to the
6 account, moneys received as federal financial participation
7 funds under the expansion population provisions of this
8 chapter and credited to the account, moneys received for
9 disproportionate share hospitals and credited to the account,
10 moneys received for graduate medical education and credited to
11 the account, proceeds distributed from the county treasurer as
12 specified in subsection 4, revenue generated through payment
13 of premiums pursuant to section 249J.8, and moneys from
14 any other source credited to the account shall be deposited
15 in the account. Moneys deposited in or credited to the
16 account shall be used only as provided in appropriations or
17 distributions from the account for the purposes specified in
18 the appropriation or distribution. Moneys in the account shall
19 be appropriated to the university of Iowa hospitals and clinics
20 and to a publicly owned acute care teaching hospital located in
21 a county with a population over three hundred fifty thousand
22 for the purposes provided in the federal law making the funds
23 available or as specified in the state appropriation and shall
24 be distributed as determined by the department.