

Health and Human Services Appropriations Bill Senate File 561

Last Action:

Final Action

May 3, 2023

An Act relating to appropriations for veterans and health and human services and including other related provisions and appropriations including health policy oversight, public assistance program provisions and a Public Assistance Modernization Fund, sprinkler systems for home- and community-based services waiver recipient residences, a State-funded Family Medicine Obstetrics Fellowship Program and Fund, Adoption Subsidy Program nonrecurring adoption expenses, real estate transactions involving departmental institutions, providing penalties, and including effective date and other applicability date provisions.

**Fiscal Services Division
Legislative Services Agency**

NOTES ON BILLS AND AMENDMENTS (NOBA)

Available online at www.legis.iowa.gov/publications/information/appropriationBillAnalysis

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FUNDING SUMMARY

General Fund FY 2024: Appropriates a total of \$2,123.8 million from the General Fund and 4,523.0 full-time equivalent (FTE) positions to the Department of Health and Human Services (HHS), containing the Department of Veterans Affairs (IVA). This is an increase of \$55.3 million and an increase of 109.5 FTE positions compared to estimated FY 2023.

Other Funds FY 2024: Appropriates a total of \$476.1 million from other funds. This is an increase of \$52.1 million compared to estimated FY 2023.

Standing Appropriations FY 2024: In addition to the appropriations in this Bill, the attached tracking includes the following standing appropriations that are automatically appropriated in statute:

- \$224,000 to the HHS for the Center for Congenital and Inherited Disorders Central Registry.
- \$233,000 to the HHS for Child Abuse Prevention.
- \$1,400 to the HHS for the Commission of Inquiry.
- \$143,000 to the HHS for Nonresident Mental Illness Commitment.
- \$1 to the HHS for the Low-Income Home Energy Assistance Program (LIHEAP) Weatherization Assistance Program.

Sports Wagering Receipts Fund: Appropriates \$1.8 million for gambling treatment. This is no change compared to estimated FY 2023.

Page 18, Line 7

Temporary Assistance for Needy Families (TANF) Federal Block Grant: Appropriates \$131.0 million for various HHS programs. This is no change compared to estimated FY 2023.

Page 18, Line 22

Health Care Trust Fund: Appropriates \$189.9 million for the Medicaid Program. This is a decrease of \$10.8 million compared to estimated FY 2023.

Page 28, Line 3

Medicaid Fraud Fund: Appropriates \$150,000 for the Medicaid Program. This is no change compared to estimated FY 2023.

Page 28, Line 12

Pharmaceutical Settlement Account: Appropriates \$234,000 for Health Program Operations. This is no change compared to estimated FY 2023.

Page 66, Line 14

Quality Assurance Trust Fund: Appropriates \$111.2 million for the Medicaid Program. This is an increase of \$54.9 million compared to estimated FY 2023. The Quality Assurance Assessment Fee was increased

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from 3.0% to 6.0% effective April 1, 2023.

Hospital Health Care Access Trust Fund: Appropriates \$33.9 million for the Medicaid Program. This is no change compared to estimated FY 2023.

Page 67, Line 3

NEW PROGRAMS, SERVICES, OR ACTIVITIES

Department of Health and Human Services

Public Assistance Modernization Fund: Creates the Public Assistance Modernization Fund in the State Treasury under control of the HHS to use for the purposes of modernizing information technology systems and for other modernization initiatives related to delivery of public assistance programs, and appropriates up to \$8.0 million in one-time Medicaid program settlement funds to the Fund if 2023 Iowa Acts, [Senate File 494](#) (Public Assistance Program Oversight Act), is enacted.

Page 74, Line 2

State-Funded Family Medicine Obstetrics Fellowship Program: Requires the HHS to establish a State-funded Family Medicine Obstetrics Fellowship Program in rural and underserved areas of the State, and appropriates from the General Fund moneys sufficient to create four fellowship positions to the newly created Family Medicine Obstetrics Fellowship Program Fund.

Page 77, Line 13

MAJOR INCREASES/DECREASES/TRANSFERS OF EXISTING PROGRAMS

Department of Veterans Affairs and Iowa Veterans Home: Appropriates a total of \$11.3 million from the General Fund and 15.0 FTE positions. This is a net decrease of \$13,000 in funding and no change in FTE positions compared to estimated FY 2023 including the following:

Page 2, Line 3

- A decrease of \$193,000 as a result of government alignment savings.
- An increase of \$200,000 to the Home Ownership Assistance Program.
- A decrease of \$19,000 due to restructuring the Office of the Chief Information Officer's (OCIO's) Cybersecurity Office from fee-based funding to a General Fund appropriation.

Department of Health and Human Services — Aging: Appropriates a total of \$11.8 million from the General Fund and 31.0 FTE positions. This is an increase of \$495,000 and no change in FTE positions compared to estimated FY 2023.

Page 3, Line 16

Department of Health and Human Services — Public Health: Appropriates a total of \$56.0 million from the General Fund and 105.0 FTE positions. This is an increase of \$667,000 compared to estimated FY 2023 including the following:

Page 6, Line 7

- A decrease of \$132,000 as the administration of the certificate of need process moves to the

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Department of Inspections, Appeals, and Licensing (DIAL).

- An increase of \$560,000 for the Community Capacity appropriation for Family Medicine Obstetrics Fellowships.
- An increase of \$250,000 for the Public Protection appropriation for the Poison Control Center.
- A combined decrease of \$11,000 due to restructuring the OCIO's Cybersecurity Office from fee-based funding to a General Fund appropriation.

Department of Health and Human Services: Appropriates a total of \$2,112.4 million from the General Fund and 4,508.0 FTE positions. This is a net increase of \$123.1 million and 356.1 FTE positions compared to estimated FY 2023. Significant changes include:

Page 18, Line 19

- The transfer of appropriations from the former Department on Aging and the former Department of Public Health (DPH) into the HHS. This is an increase of \$68.9 million in total appropriations to the HHS.
- The transfer of Central Administration, Community Advocacy and Services, Criminal and Juvenile Justice Planning, and the Single Grant Program from the former Department of Human Rights to the HHS. This is an increase of \$2.6 million in total appropriations to the HHS.
- The transfer of the Child Advocacy Board to the HHS. This is an increase of \$2.6 million to the HHS.
- The transfer of Early Childhood Iowa (ECI) General Aid from the Department of Education (DE) to the HHS. This is an increase of \$23.4 million to the HHS.
- The transfer of Iowa Commission on Volunteer Service — Promise from the Iowa Economic Development Authority (IEDA) to the HHS. This is an increase of \$358,000 to the HHS.
- An increase of \$33.5 million for the Medicaid appropriation.
- A decrease of \$14.5 million for the Child and Family Services appropriation.
- An increase of \$288,000 for the Adoption Subsidy appropriation.
- An increase of \$310,000 for the Cherokee Mental Health Institute (MHI) appropriation.
- An increase of \$123,000 for the Independence MHI appropriation.
- An increase of \$974,000 for the Civil Commitment Unit for Sexual Offenders (CCUSO) appropriation.
- An increase of \$6.2 million for the Field Operations appropriation.
- An increase of \$3.1 million for the General Administration appropriation.
- A decrease of \$2.0 million for the HHS Facilities appropriation.

CHANGES TO PRIOR APPROPRIATIONS

Department of Health and Human Services

Quality Assurance Trust Fund: Creates a supplemental appropriation in FY 2023 for the Quality Assurance Trust Fund of \$66.3 million. This is an increase of \$10.0 million compared to estimated FY 2023.

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STUDIES AND INTENT

Department of Health and Human Services

Requires the HHS to submit a report to the General Assembly on a quarterly basis, beginning October 1, 2023, on the nonreversion of funds for which nonreversion authorization was provided for FY 2023.

Page 70, Line 6

SIGNIFICANT CODE CHANGES

Department of Health and Human Services

Prior Appropriations and Reversions: Allows any unexpended funds appropriated in 2022 Iowa Acts, [House File 2578](#) (FY 2023 Health and Human Services Appropriations Act), for FY 2023 from the General Fund for the Family Investment Program, Child Care Assistance, Child and Family Services, Field Operations, the More Options for Maternal Support (MOMS) Program, and General Administration to remain available for FY 2024.

Page 68, Line 9

Hospital Health Care Access Assessment Program: Eliminates the repeal of the Hospital Health Care Access Assessment Program.

Page 70, Line 15

Buying and Selling Real Estate: Requires proceeds of any real estate sold by the HHS Director to be deposited into a Capital Reinvestment Fund administered by the HHS, and allows the funding to be used for property improvement on property owned by the State and used by the HHS. Transfers any existing proceeds from the sale of real estate that were credited to the General Fund and that remain available on June 30, 2023, to the Fund.

Page 70, Line 22

School Ready Children Grants Account: Transfers authority of the School Ready Children Grants Account under the ECI Program from the Director of the DE to the Director of the HHS.

Page 71, Line 30

Amends [Senate File 514](#) (State Government Alignment Act) to include Iowa Code section [217.8](#) in the list of sections repealed by the Act.

Page 72, Line 6

Legislative Health Policy Oversight Committee: Amends the meeting frequency of the Legislative Health Policy Oversight Committee from twice annually to at most once annually.

Page 72, Line 14

Public Assistance Program Provisions: Amends 2023 Iowa Acts, [Senate File 494](#) (Public Assistance Program Oversight Act), if enacted, to specify that the definitions of “asset” and “asset test” are for the purposes of the Supplemental Nutrition Assistance Program (SNAP), to include financial resources

Page 72, Line 34

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allowable under federal code as part of an asset review for the SNAP, and to create the Public Assistance Modernization Fund in the State Treasury under control of the HHS.

Home- and Community-Based Services (HCBS) Waiver Recipient Residences: Prohibits a county, county board of supervisors, city, city council, or a county or city zoning commission from classifying an HCBS waiver recipient residence as a residential group R-3 occupancy or care facility within a dwelling for the purposes of enforcement of compliance with sprinkler system provisions specified in the International Building Code or the International Residence Code, if adopted, or if the residence is inspected by the county or city.

Page 74, Line 35

Newborn Safe Haven Act Harmonization: Clarifies the simultaneous codification of [House File 425](#) (Newborn Safe Haven Act, Releasing Custody Bill) and [House File 474](#) (Newborn Safe Haven Act, Placement of Children Act) by detailing the division of obligations between responsible entities in each relinquishment circumstance. House File 425 provides for the release of a newborn through the Newborn Safe Haven Act to emergency medical care providers, fire departments, fire stations, and newborn safety devices. House File 474 provides for the release of a newborn through the Newborn Safe Haven Act to adoption service providers.

Page 79, Line 11

Details and delineates the duties and obligations of a fire station, an adoption service provider, hospital staff, or an emergency medical provider in the event of a voluntary relinquishment of a newborn through the Newborn Safe Haven Act as determined by which entity is chosen by the relinquisher to receive physical custody of the newborn.

Page 79, Line 14

Requires the HHS to develop and distribute informational materials informing the public of a parent's rights and relinquishment procedures established under the Newborn Safe Haven Act as described in Iowa Code chapter [233](#).

Page 85, Line 1

Adoption Subsidy — Nonrecurring Adoption Expenses: Sets the maximum reimbursement provided to an adoptive parent under the Adoption Subsidy Program for nonrecurring adoption expenses at \$1,000.

Page 78, Line 33

EFFECTIVE DATE

Department of Health and Human Services

Specifies that the provision directing the Division Administrator of the Child and Family Services Division of the HHS to determine the distribution of funds allocated for the payment of State expenses of court-ordered services for juveniles by June 15, 2023, takes effect upon enactment.

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Specifies that the provisions in Division IX requiring any balance of the moneys appropriated in FY 2023 to the Family Investment Program, Child Care Assistance, Child and Family Services, Field Operations, the MOMS Program, and General Administration to remain available for FY 2024, and increasing the FY 2023 appropriation from the Quality Assurance Trust Fund, are effective upon enactment.

Page 70, Line 2

Specifies that Division XI eliminating the repeal of the Hospital Health Care Access Assessment Program is effective upon enactment.

Page 70, Line 16

Specifies that the changes to local regulation of HCBS sprinkler systems in Division XV of the Bill take effect upon enactment.

Page 77, Line 9

Senate File 561 provides for the following changes to the Code of Iowa.

Page #	Line #	Bill Section	Action	Code Section
70	15	50	Repeal	249M.5
70	22	52	Amend	218.94
71	30	53	Amend	256I.11.2
72	14	55	Amend	2.45.5
72	28	56	Amend New	234.1.6
72	34	57	Amend New	239.1.2,3
73	17	58	Amend New	239.4.1
73	26	59	Amend New	239.9.1
73	33	60	Amend New	239.10.1
74	35	64	Amend	335.34
76	5	65	Amend	414.32
77	13	67	New	135.182
78	33	68	New	234.48
79	11	70	Amend	233.2
85	1	71	Amend	233.6

2 1 DIVISION I
 2 2 DEPARTMENT OF VETERANS AFFAIRS — FY 2023-2024

2 3 Section 1. DEPARTMENT OF VETERANS AFFAIRS. There is
 2 4 appropriated from the general fund of the state to the
 2 5 department of veterans affairs for the fiscal year beginning
 2 6 July 1, 2023, and ending June 30, 2024, the following amounts,
 2 7 or so much thereof as is necessary, to be used for the purposes
 2 8 designated:

2 9 1. DEPARTMENT OF VETERANS AFFAIRS ADMINISTRATION
 2 10 For salaries, support, maintenance, and miscellaneous
 2 11 purposes, and for not more than the following full-time
 2 12 equivalent positions:
 2 13 \$ 1,033,289
 2 14 FTEs 15.00

General Fund appropriation to the Department of Veterans Affairs.

DETAIL: This is a decrease of \$196,474 and no change in full-time equivalent (FTE) positions compared to estimated FY 2023. The decrease in funding reflects \$193,316 in government realignment savings and a \$3,158 reduction in costs due to restructuring the Office of the Chief Information Officer's (OCIO's) Cybersecurity Office from fee-based funding to a General Fund appropriation.

2 15 2. IOWA VETERANS HOME
 2 16 For salaries, support, maintenance, and miscellaneous
 2 17 purposes:
 2 18 \$ 7,115,335

General Fund appropriation to the Iowa Veterans Home (IVH).

DETAIL: This is a decrease of \$16,217 compared to estimated FY 2023 due to restructuring the OCIO's Cybersecurity Office from fee-based funding to a General Fund appropriation.

2 19 a. The Iowa veterans home billings involving the department
 2 20 of health and human services shall be submitted to the
 2 21 department on at least a monthly basis.

Requires the IVH to submit monthly claims relating to Medicaid to the Department of Health and Human Services (HHS).

2 22 b. The Iowa veterans home expenditure report shall be
 2 23 submitted monthly to the general assembly.

Requires the IVH to submit a monthly expenditure report to the General Assembly.

2 24 c. The Iowa veterans home shall continue to include in the
 2 25 annual discharge report applicant information to provide for
 2 26 the collection of demographic information including but not
 2 27 limited to the number of individuals applying for admission and
 2 28 admitted or denied admittance and the basis for the admission
 2 29 or denial; the age, gender, and race of such individuals;
 2 30 and the level of care for which such individuals applied for

Requires the IVH to expand its annual discharge report to include applicant information, demographic information, and the level of care for which individuals applied for admission.

2 31 admission including residential or nursing level of care.

2 32 3. HOME OWNERSHIP ASSISTANCE PROGRAM
2 33 For transfer to the Iowa finance authority for the
2 34 continuation of the home ownership assistance program for
2 35 persons who are or were eligible members of the armed forces of
3 1 the United States, pursuant to section 16.54:
3 2 \$ 2,200,000

General Fund appropriation to the Home Ownership Assistance Program for military service members and veterans, to be transferred to the Iowa Finance Authority.

DETAIL: This is an increase of \$200,000 compared to estimated FY 2023. A \$5,000 grant is available to a service member for down payment and closing costs toward the purchase of a new home in the State of Iowa. The home must be a primary residence, and this is a once-in-a-lifetime grant.

3 3 Sec. 2. LIMITATION OF COUNTY COMMISSIONS OF VETERAN AFFAIRS
3 4 FUND STANDING APPROPRIATIONS. Notwithstanding the standing
3 5 appropriation in section 35A.16 for the fiscal year beginning
3 6 July 1, 2023, and ending June 30, 2024, the amount appropriated
3 7 from the general fund of the state pursuant to that section
3 8 for the following designated purposes shall not exceed the
3 9 following amount:
3 10 For the county commissions of veteran affairs fund under
3 11 section 35A.16:
3 12 \$ 990,000

CODE: Limits the FY 2024 General Fund standing appropriation to the County Commissions of Veteran Affairs Fund to \$990,000.

DETAIL: This is no change compared to estimated FY 2023 and a decrease of \$10,000 compared to the standing appropriation of \$1,000,000 in Iowa Code section [35A.16](#). Funding is used for the administration and maintenance of county commission of veteran affairs offices. Staff must agree to maintain the current spending levels compared to the previous fiscal year. The grant is \$10,000 per county.

3 13 DIVISION II
3 14 DEPARTMENT OF HEALTH AND HUMAN SERVICES — AGING — FY
3 15 2023-2024

3 16 Sec. 3. DEPARTMENT OF HEALTH AND HUMAN SERVICES —
3 17 AGING. There is appropriated from the general fund of the
3 18 state to the department of health and human services for the
3 19 fiscal year beginning July 1, 2023, and ending June 30, 2024,
3 20 the following amount, or so much thereof as is necessary, to be
3 21 used for the purposes designated:
3 22 For aging programs for the department of health and human
3 23 services and area agencies on aging to provide citizens of
3 24 Iowa who are 60 years of age and older with case management,
3 25 Iowa's aging and disabilities resource center, and other
3 26 services which may include but are not limited to adult
3 27 day, respite care, chore, information and assistance, and
3 28 material aid, for information and options counseling for
3 29 persons with disabilities who are 18 years of age or older,
3 30 and for salaries, support, administration, maintenance, and

General Fund appropriation to the HHS — Aging for FY 2024.

DETAIL: This is a net increase of \$495,279 and 1.00 FTE position compared to estimated FY 2023. This change includes:

- An increase of \$500,000 and 1.00 FTE position for the Office of the Public Guardian (OPG) to increase the capacity of OPG services for older adults with disabilities.
- A decrease of \$4,721 due to restructuring the OCIO's Cybersecurity Office from fee-based funding to a General Fund appropriation.

3 31 miscellaneous purposes, and for not more than the following
 3 32 full-time equivalent positions:
 3 33 \$ 11,799,361
 3 34 FTEs 31.00

3 35 1. Funds appropriated in this section may be used to
 4 1 supplement federal funds under federal regulations. To
 4 2 receive funds appropriated in this section, a local area
 4 3 agency on aging shall match the funds with moneys from other
 4 4 sources according to rules adopted by the department. Funds
 4 5 appropriated in this section may be used for elderly services
 4 6 not specifically enumerated in this section only if approved
 4 7 by an area agency on aging for provision of the service within
 4 8 the area.

Permits the use of funds appropriated in this Section to supplement federal funds for elderly services if those services are approved by an Area Agency on Aging (AAA). Requires local AAAs to match the funds for aging programs and services.

4 9 2. Of the funds appropriated in this section, \$418,700 is
 4 10 transferred to the Iowa commission on volunteer service to be
 4 11 used for the retired and senior volunteer program.

Requires a transfer of \$418,700 to the Iowa Commission on Volunteer Service (ICVS) in the HHS for the Retired and Senior Volunteer Program (RSVP).

DETAIL: This is no change compared to the estimated FY 2023 allocation. The RSVP matches volunteers over the age of 55 with volunteer opportunities in the community, providing approximately 350,000 hours of volunteer services annually.

4 12 3. a. The department of health and human services shall
 4 13 establish and enforce procedures relating to expenditure
 4 14 of state and federal funds by area agencies on aging that
 4 15 require compliance with both state and federal laws, rules, and
 4 16 regulations, including but not limited to all of the following:
 4 17 (1) Requiring that expenditures are incurred only for goods
 4 18 or services received or performed prior to the end of the
 4 19 fiscal period designated for use of the funds.
 4 20 (2) Prohibiting prepayment for goods or services not
 4 21 received or performed prior to the end of the fiscal period
 4 22 designated for use of the funds.
 4 23 (3) Prohibiting prepayment for goods or services not
 4 24 defined specifically by good or service, time period, or
 4 25 recipient.
 4 26 (4) Prohibiting the establishment of accounts from which
 4 27 future goods or services which are not defined specifically by
 4 28 good or service, time period, or recipient, may be purchased.
 4 29 b. The procedures shall provide that if any funds are

Requires the HHS to establish and enforce procedures related to expenditures of State and federal funds and to comply with both State and federal law. An AAA is liable for any expenditures that are not in compliance with the law.

4 30 expended in a manner that is not in compliance with the
4 31 procedures and applicable federal and state laws, rules, and
4 32 regulations, and are subsequently subject to repayment, the
4 33 area agency on aging expending such funds in contravention of
4 34 such procedures, laws, rules and regulations, not the state,
4 35 shall be liable for such repayment.

5 1 4. Of the funds appropriated in this section, \$1,312,000
5 2 shall be used for the purposes of chapter 231E and to
5 3 administer the prevention of elder abuse, neglect, and
5 4 exploitation program pursuant to section 231.56A, in accordance
5 5 with the requirements of the federal Older Americans Act of
5 6 1965, 42 U.S.C.§3001 et seq., as amended.

Allocates \$1,312,000 for the OPG and for the prevention of elder abuse, neglect, and exploitation.

DETAIL: This is an increase of \$500,000 compared to the estimated FY 2023 allocation. The OPG works with individuals who are not capable of making their own decisions about legal, financial, or health care matters. Depending on the situation, the OPG may act as an individual's guardian, conservator, attorney-in-fact under a health care power of attorney document, agent under a financial power of attorney document, personal representative, or representative payee.

5 7 5. Of the funds appropriated in this section, \$1,000,000
5 8 shall be used to fund continuation of the aging and disability
5 9 resource center lifelong links to provide individuals and
5 10 caregivers with information and services to plan for and
5 11 maintain independence.

Allocates \$1,000,000 to continue the LifeLong Links Resource Program.

DETAIL: This is no change compared to the estimated FY 2023 allocation. LifeLong Links helps to connect older adults, adults with disabilities, veterans, and their caregivers to local service providers who can help these individuals maintain their independence at home or in the community of their choice.

5 12 6. Of the funds appropriated in this section, \$850,000
5 13 shall be used by the department of health and human services,
5 14 in collaboration with affected stakeholders, to continue to
5 15 expand the pilot initiative to provide long-term care options
5 16 counseling utilizing support planning protocols, to assist
5 17 non-Medicaid eligible consumers who indicate a preference
5 18 to return to the community and are deemed appropriate for
5 19 discharge, to return to their community following a nursing
5 20 facility stay; and shall be used by the department to fund home
5 21 and community-based services to enable older individuals to
5 22 avoid more costly utilization of residential or institutional
5 23 services and remain in their homes. The department shall
5 24 submit a report regarding the outcomes of the pilot initiative

Allocates \$850,000 to continue and expand the Pre-Medicaid Pilot Project. Requires the HHS to submit a report regarding the outcomes of the pilot initiative to the Governor and the General Assembly by December 15, 2023.

DETAIL: This is no change compared to the estimated FY 2023 allocation. The Project works to keep individuals in the community and out of long-term care facilities following a nursing facility stay. The goal of the Project is to gather data on potential savings to Medicaid and apply for a [Section 1115](#) Medicaid waiver to draw down federal matching funds to expand the Project statewide.

5 25 to the governor and the general assembly by December 15, 2023.

5 26 DIVISION III
5 27 OFFICE OF LONG-TERM CARE OMBUDSMAN — FY 2023-2024

5 28 Sec. 4. OFFICE OF LONG-TERM CARE OMBUDSMAN. There is
5 29 appropriated from the general fund of the state to the office
5 30 of long-term care ombudsman for the fiscal year beginning July
5 31 1, 2023, and ending June 30, 2024, the following amount, or
5 32 so much thereof as is necessary, to be used for the purposes
5 33 designated:

5 34 For salaries, support, administration, maintenance, and
5 35 miscellaneous purposes, and for not more than the following
6 1 full-time equivalent positions:
6 2 \$ 1,148,959
6 3 FTEs 12.00

6 4 DIVISION IV
6 5 DEPARTMENT OF HEALTH AND HUMAN SERVICES — PUBLIC HEALTH — FY
6 6 2023-2024

6 7 Sec. 5. DEPARTMENT OF HEALTH AND HUMAN SERVICES — PUBLIC
6 8 HEALTH. There is appropriated from the general fund of the
6 9 state to the department of health and human services for the
6 10 fiscal year beginning July 1, 2023, and ending June 30, 2024,
6 11 the following amounts, or so much thereof as is necessary, to
6 12 be used for the purposes designated:

6 13 1. ADDICTIVE DISORDERS
6 14 For reducing the prevalence of the use of tobacco, alcohol,
6 15 and other drugs, and treating individuals affected by addictive
6 16 behaviors, including gambling, and for not more than the
6 17 following full-time equivalent positions:
6 18 \$ 23,656,992
6 19 FTEs 12.00

6 20 a. (1) Of the funds appropriated in this subsection,
6 21 \$4,020,894 shall be used for the tobacco use prevention and
6 22 control initiative, including efforts at the state and local
6 23 levels, as provided in chapter 142A. The commission on tobacco
6 24 use prevention and control established pursuant to section
6 25 142A.3 shall advise the director of health and human services

General Fund appropriation to the Office of Long-Term Care Ombudsman for FY 2024.

DETAIL: This is a decrease of \$862 and no change in FTE positions compared to estimated FY 2023 due to restructuring the OCIO's Cybersecurity Office from fee-based funding to a General Fund appropriation.

General Fund appropriation to Addictive Disorders programs.

DETAIL: This is a decrease of \$2,387 and no change in FTE positions compared to estimated FY 2023 due to restructuring the OCIO's Cybersecurity Office from fee-based funding to a General Fund appropriation.

Allocates \$4,020,894 for tobacco use prevention and control initiatives, including Community Partnerships. Requires activities of the Commission on Tobacco Use Prevention and Control to align with U.S. Centers for Disease Control and Prevention (CDC) best practices. Requires a report on any reduction in providing nicotine replacement products realized by screening for third-party sources of funding for the nicotine replacement products.

6 26 in prioritizing funding needs and the allocation of moneys
 6 27 appropriated for the programs and initiatives. Activities
 6 28 of the programs and initiatives shall be in alignment with
 6 29 the United States centers for disease control and prevention
 6 30 best practices for comprehensive tobacco control programs
 6 31 that include the goals of preventing youth initiation of
 6 32 tobacco usage, reducing exposure to secondhand smoke, and
 6 33 promotion of tobacco cessation. To maximize resources,
 6 34 the department shall determine if third-party sources are
 6 35 available to instead provide nicotine replacement products
 7 1 to an applicant prior to provision of such products to an
 7 2 applicant under the initiative. The department shall track and
 7 3 report to the governor and the general assembly any reduction
 7 4 in the provision of nicotine replacement products realized
 7 5 by the initiative through implementation of the prerequisite
 7 6 screening.

DETAIL: This is no change compared to the estimated FY 2023 allocation. The Commission on Tobacco Use Prevention and Control works to reduce tobacco use and the toll of tobacco-related diseases and death by preventing youth from starting tobacco use, helping adults and youths quit, and preventing exposure to secondhand tobacco smoke.

7 7 (2) (a) The department shall collaborate with the
 7 8 department of revenue for enforcement of tobacco laws,
 7 9 regulations, and ordinances and to engage in tobacco control
 7 10 activities approved by the departments as specified in
 7 11 the memorandum of understanding entered into between the
 7 12 departments.
 7 13 (b) For the fiscal year beginning July 1, 2023, and ending
 7 14 June 30, 2024, the terms of the memorandum of understanding,
 7 15 entered into between the department of revenue and the
 7 16 department, governing compliance checks conducted to ensure
 7 17 licensed retail tobacco outlet conformity with tobacco laws,
 7 18 regulations, and ordinances relating to persons under 21 years
 7 19 of age, shall continue to restrict the number of such checks to
 7 20 one check per retail outlet, and one additional check for any
 7 21 retail outlet found to be in violation during the first check.

Requires the HHS to collaborate with the Department of Revenue for enforcement of tobacco laws, regulations, and ordinances. Limits tobacco compliance checks by the Alcoholic Beverages Division (ABD) to one annually per retail outlet and one additional check for any retail outlet found to be in violation during the first check.

7 22 b. (1) Of the funds appropriated in this subsection,
 7 23 \$19,638,485 shall be used for problem gambling and substance
 7 24 use disorder prevention, treatment, and recovery services,
 7 25 including a 24-hour helpline, public information resources,
 7 26 professional training, youth prevention, and program
 7 27 evaluation.

Allocates \$19,638,485 for problem gambling and substance abuse treatment and prevention.

DETAIL: This is no change compared to the estimated FY 2023 allocation. The HHS Division of Behavioral Health's Bureau of Substance Abuse works to address prevention and treatment needs by providing focus for training efforts, identifying and securing available grant funding, monitoring grant compliance, and regulating licensure for treatment programs. The Office of Gambling Treatment

and Prevention works to reduce the harm caused by problem gambling by funding a range of services.

7 28 (2) Of the amount allocated under this paragraph,
7 29 \$306,000 shall be utilized by the department to maintain
7 30 a single statewide 24-hour crisis hotline for the Iowa
7 31 children's behavioral health system that incorporates warmline
7 32 services which may be provided through expansion of existing
7 33 capabilities as required pursuant to 2018 Iowa Acts, chapter
7 34 1056, section 16.

Requires the HHS to use \$306,000 to expand the Your Life Iowa information referral service to include information on the Iowa Children's Behavioral Health System.

DETAIL: This is no change compared to the estimated FY 2023 allocation.

NOTE: The Bill also transfers \$32,000 from the HHS General Administration appropriation to the HHS for the Your Life Iowa expansion. This brings the total funding for the expansion to \$338,000 for FY 2024.

7 35 c. The requirement of section 123.17, subsection 5, is met
8 1 by the appropriations and allocations made in this division of
8 2 this Act for purposes of substance use disorder treatment and
8 3 addictive disorders for the fiscal year beginning July 1, 2023.

Specifies that the requirements of Iowa Code section [123.17](#) for substance-related disorder treatment and addictive disorders are met by the appropriations made in this Bill.

DETAIL: This Iowa Code section requires the Department of Revenue to transfer \$2,000,000, plus an amount determined by the General Assembly, from the Beer and Liquor Control Fund to the General Fund for the Comprehensive Substance Abuse Program.

8 4 2. HEALTHY CHILDREN AND FAMILIES
8 5 For promoting the optimum health status for children and
8 6 adolescents from birth through 21 years of age, and families,
8 7 and for not more than the following full-time equivalent
8 8 positions:
8 9 \$ 5,815,491
8 10 FTEs 14.00

General Fund appropriation to Healthy Children and Families programs.

DETAIL: This is a decrease of \$1,190 and no change in FTE positions compared to estimated FY 2023 due to restructuring the OCIO's Cybersecurity Office from fee-based funding to a General Fund appropriation.

8 11 a. Of the funds appropriated in this subsection, not more
8 12 than \$734,000 shall be used for the healthy opportunities for
8 13 parents to experience success (HOPES)-healthy families Iowa
8 14 (HFI) program established pursuant to section 135.106.

Limits the General Fund amount used to fund the Healthy Opportunities for Parents to Experience Success – Healthy Families Iowa (HOPES-HFI) Program to \$734,000.

DETAIL: This is no change compared to the estimated FY 2023 allocation. This Program provides support for families through home visits that begin during pregnancy or at the birth of a child and can continue through age four.

8 15 b. In order to implement the legislative intent stated
8 16 in sections 135.106 and 256I.9, priority for home visitation
8 17 program funding shall be given to programs using evidence-based
8 18 or promising models for home visitation.

Specifies legislative intent for Iowa Code sections [135.106](#) (HOPES-HFI) and [256I.9](#) (Early Childhood Iowa). Priority for home visitation program funding is to be given to programs using evidence-based or promising models for home visitation.

8 19 c. Of the funds appropriated in this subsection, \$3,075,000
8 20 shall be used for continuation of the department's initiative
8 21 to provide for adequate developmental surveillance and
8 22 screening during a child's first five years. The funds shall
8 23 be used first to fully fund the current sites to ensure that
8 24 the sites are fully operational, with the remaining funds
8 25 to be used for expansion to additional sites. The full
8 26 implementation and expansion shall include enhancing the scope
8 27 of the initiative through collaboration with the child health
8 28 specialty clinics to promote healthy child development through
8 29 early identification and response to both biomedical and social
8 30 determinants of healthy development; by monitoring child
8 31 health metrics to inform practice, document long-term health
8 32 impacts and savings, and provide for continuous improvement
8 33 through training, education, and evaluation; and by providing
8 34 for practitioner consultation particularly for children with
8 35 behavioral conditions and needs. The department shall also
9 1 collaborate with the Medicaid program and the child health
9 2 specialty clinics to integrate the activities of the first five
9 3 initiative into the establishment of patient-centered medical
9 4 homes, community utilities, accountable care organizations,
9 5 and other integrated care models developed to improve health
9 6 quality and population health while reducing health care costs.
9 7 To the maximum extent possible, funding allocated in this
9 8 paragraph shall be utilized as matching funds for Medicaid
9 9 program reimbursement.

Allocates \$3,075,000 for the Iowa 1st Five Healthy Mental Development Initiative programs.

DETAIL: This is no change compared to the estimated FY 2023 allocation. This is a public-private mental development initiative that partners primary care and public health services in Iowa to enhance high-quality well-child care. The 1st Five Model supports health providers in the earlier detection of socioemotional delays, developmental delays, and family risk-related factors in children from birth to age five. The Initiative then coordinates referrals, interventions, and follow-ups.

9 10 d. Of the funds appropriated in this subsection, \$64,000
9 11 shall be distributed to a statewide dental carrier to provide
9 12 funds to continue the donated dental services program patterned
9 13 after the projects developed by the dental lifeline network to
9 14 provide dental services to indigent individuals who are elderly
9 15 or with disabilities.

Allocates \$64,000 for a Donated Dental Services Program for indigent individuals who are elderly or with disabilities.

DETAIL: This is no change compared to the estimated FY 2023 allocation.

9 16 e. Of the funds appropriated in this subsection, \$156,000
9 17 shall be used to provide audiological services and hearing aids

Allocates \$156,000 for the Audiological Services for Kids Program to provide audiological services and hearing aids to children.

9 18 for children.

DETAIL: This is no change compared to the estimated FY 2023 allocation.

9 19 f. Of the funds appropriated in this subsection, \$23,000 is
 9 20 transferred to the university of Iowa college of dentistry for
 9 21 provision of primary dental services to children. State funds
 9 22 shall be matched on a dollar-for-dollar basis. The university
 9 23 of Iowa college of dentistry shall coordinate efforts with the
 9 24 department to provide dental care to underserved populations
 9 25 throughout the state.

Transfers \$23,000 to the University of Iowa (UI) College of Dentistry to provide primary dental services to children. Requires a one-to-one dollar match by the UI. The College is directed to coordinate efforts with the HHS Bureau of Oral and Health Delivery System to provide dental care to underserved populations throughout Iowa.

DETAIL: This is no change compared to the estimated FY 2023 allocation.

9 26 g. Of the funds appropriated in this subsection, \$50,000
 9 27 shall be used to address youth suicide prevention.

Allocates \$50,000 for a Youth Suicide Prevention Program.

DETAIL: This is no change compared to the estimated FY 2023 allocation. Funds are used to provide the Your Life Iowa resource, which offers support and services for suicide prevention and bullying prevention. These services include a website, online chat, and toll-free hotline, all available 24 hours per day every day, and texting services from 2:00 p.m. to 10:00 p.m. daily.

9 28 h. Of the funds appropriated in this subsection, \$40,000
 9 29 shall be used to support the Iowa effort to address the survey
 9 30 of children who experience adverse childhood experiences known
 9 31 as ACEs.

Allocates \$40,000 to support the Iowa effort to address the survey of children who experience adverse childhood experiences (ACEs).

DETAIL: This is no change compared to the estimated FY 2023 allocation. The funding supports the ACEs Study being conducted by the Central Iowa ACEs Steering Committee. The original ACEs Study revealed that childhood trauma is common and can have a large impact on future behaviors and health outcomes. Funding is used to include the ACEs-related surveillance questions in the Behavioral Risk Factor Surveillance System to further track and study this topic.

9 32 i. Of the funds appropriated in this subsection, up to
 9 33 \$494,000 shall be used for childhood obesity prevention.

Allocates no more than \$494,000 to be used on childhood obesity prevention.

DETAIL: This is no change compared to the estimated FY 2023 allocation.

9 34 3. CHRONIC CONDITIONS
 9 35 For serving individuals identified as having chronic
 10 1 conditions or special health care needs, and for not more than

General Fund appropriation to Chronic Conditions programs.

DETAIL: This is a decrease of \$1,778 and no change in FTE positions

10 2 the following full-time equivalent positions:
 10 3 \$ 4,256,595
 10 4 FTEs 10.00

compared to estimated FY 2023 due to restructuring the OCIO's Cybersecurity Office from fee-based funding to a General Fund appropriation.

10 5 a. Of the funds appropriated in this subsection, \$188,000
 10 6 shall be used for grants to individual patients who have an
 10 7 inherited metabolic disorder to assist with the costs of
 10 8 medically necessary foods and formula.

Allocates \$188,000 for grants to individual patients with inherited metabolic disorders to assist with necessary costs for special foods.

DETAIL: This is no change compared to the estimated FY 2023 allocation. The grants assist with the costs of necessary special foods and supplements for individual patients with phenylketonuria (PKU) or other inherited metabolic disorders. Funds are provided to individuals only after they have shown that all benefits from third-party payors and other government assistance programs have been exhausted.

10 9 b. Of the funds appropriated in this subsection, \$1,055,000
 10 10 shall be used for the brain injury services program pursuant
 10 11 to section 135.22B, including \$861,000 for contracting with an
 10 12 existing nationally affiliated and statewide organization whose
 10 13 purpose is to educate, serve, and support lowans with brain
 10 14 injury and their families, for resource facilitator services
 10 15 in accordance with section 135.22B, subsection 9, and for
 10 16 contracting to enhance brain injury training and recruitment
 10 17 of service providers on a statewide basis. Of the amount
 10 18 allocated in this paragraph, \$95,000 shall be used to fund
 10 19 1.00 full-time equivalent position to serve as the state brain
 10 20 injury services program manager.

Allocates \$1,055,000 to continue two contracts in the Brain Injury Services Program for facilitator services, training services, and provider recruitment. Of the funds allocated, \$861,000 is required to be used for contracting with a statewide organization for resource facilitator services. In addition, \$95,000 is to be used to fund 1.00 FTE position for the State Brain Injury Services Program Manager.

DETAIL: This is no change compared to the estimated FY 2023 allocation. The Brain Injury Services Program, established in Iowa Code section [135.22B](#), works to improve the lives of lowans living with brain injuries and the lives of their families by linking people with services, promoting safety to prevent brain injuries, and training providers to best work with individuals who have sustained a brain injury. Most of this work is achieved through a contract with the Brain Injury Alliance of Iowa.

10 21 c. Of the funds appropriated in this subsection, \$144,000
 10 22 shall be used for the public purpose of continuing to contract
 10 23 with an existing nationally affiliated organization to provide
 10 24 education, client-centered programs, and client and family
 10 25 support for people living with epilepsy and their families.
 10 26 The amount allocated in this paragraph in excess of \$50,000
 10 27 shall be matched dollar-for-dollar by the organization
 10 28 specified. Funds allocated under this paragraph shall be
 10 29 distributed in their entirety for the purpose specified on July
 10 30 1, 2023.

Allocates \$144,000 for epilepsy education and support. Funds allocated are required to be distributed on July 1, 2023. The allocation requires a dollar-for-dollar match of the funds above \$50,000.

DETAIL: This is no change compared to the estimated FY 2023 allocation. Funding provides for education, client-centered programs, and client and family support for people and families of people living with epilepsy.

10 31 d. Of the funds appropriated in this subsection, \$809,000

Allocates \$809,000 for the Child Health Specialty Clinics (CHSC).

10 32 shall be used for child health specialty clinics.

DETAIL: This is no change compared to the estimated FY 2023 allocation. The CHSC Program is operated by the UI Department of Pediatrics and facilitates the development of family-centered, community-based, coordinated systems of care for children and youth with special health care needs. The CHSC serves children and youth from birth through 21 years of age who live in Iowa and have a chronic condition (physical, developmental, behavioral, or emotional) or are at increased risk for a chronic condition and also have a need for special services.

10 33 e. Of the funds appropriated in this subsection, \$384,000
 10 34 shall be used by the regional autism assistance program
 10 35 established pursuant to section 256.35, and administered by
 11 1 the child health specialty clinic located at the university of
 11 2 Iowa hospitals and clinics. The funds shall be used to enhance
 11 3 interagency collaboration and coordination of educational,
 11 4 medical, and other health and human services for persons with
 11 5 autism, their families, and providers of services, including
 11 6 delivering regionalized services of care coordination,
 11 7 family navigation, and integration of services through the
 11 8 statewide system of regional child health specialty clinics and
 11 9 fulfilling other requirements as specified in chapter 225D.
 11 10 The university of Iowa shall not receive funds allocated under
 11 11 this paragraph for indirect costs associated with the regional
 11 12 autism assistance program.

Allocates \$384,000 to be used by the Regional Autism Assistance Program (RAP) to create autism support programs administered by the CHSC located at the University of Iowa Hospitals and Clinics (UIHC).

DETAIL: This is no change compared to the estimated FY 2023 allocation. The UI is prohibited from receiving any funds for indirect costs associated with the allocation. The RAP teams provide regional screenings for toddlers and youth and coordinate referrals for assessment and diagnostic services. In addition, the RAP coordinates in-service training and provides technical assistance, consultation, information, and referral.

11 13 f. Of the funds appropriated in this subsection, \$577,000
 11 14 shall be used for the comprehensive cancer control program to
 11 15 reduce the burden of cancer in Iowa through prevention, early
 11 16 detection, effective treatment, and ensuring quality of life.
 11 17 Of the funds allocated in this paragraph "f", \$150,000 shall
 11 18 be used to support a melanoma research symposium, a melanoma
 11 19 biorepository and registry, basic and translational melanoma
 11 20 research, and clinical trials.

Allocates \$577,000 for the Iowa Comprehensive Cancer Control (ICCC) Program. Of the total amount, \$150,000 is required to be used to support various efforts in studying, tracking, and researching melanoma.

DETAIL: This is no change compared to the estimated FY 2023 allocation.

11 21 g. Of the funds appropriated in this subsection, \$97,000
 11 22 shall be used for cervical and colon cancer screening, and
 11 23 \$177,000 shall be used to enhance the capacity of the cervical
 11 24 cancer screening program to include provision of recommended
 11 25 prevention and early detection measures to a broader range of
 11 26 low-income women.

Allocates \$97,000 for cervical and colon cancer screening and \$177,000 for enhanced capacity of the Cervical Cancer Screening Program for a total of \$274,000.

DETAIL: This is no change compared to the estimated FY 2023 allocation.

11 27 h. Of the funds appropriated in this subsection, \$506,000
 11 28 shall be used for the center for congenital and inherited
 11 29 disorders.

Allocates \$506,000 for the Center for Congenital and Inherited Disorders (CCID) Central Registry.

DETAIL: This is no change compared to the estimated FY 2023 allocation. The mission of the CCID is to initiate, conduct, and supervise genetic investigations and research to provide for the protection and promotion of the health of Iowans.

11 30 4. COMMUNITY CAPACITY

11 31 For strengthening the health care delivery system at the
 11 32 local level, and for not more than the following full-time
 11 33 equivalent positions:

11 34	.....	\$	7,435,682
11 35	.....	FTEs	14.00

General Fund appropriation to Community Capacity programs.

DETAIL: This is a net increase of \$916,376 and 1.00 FTE position compared to estimated FY 2023. The changes include:

- An increase of \$560,000 to establish a State Family Medicine Obstetrics Fellowship Program.
- A decrease of \$1,825 due to restructuring the OCIO's Cybersecurity Office from fee-based funding to a General Fund appropriation.
- An increase of \$358,201 and 1.00 FTE position for the ICVS — Promise program, which was transferred to the HHS from the Iowa Economic Development Authority (IEDA) due to government alignment.

12 1 a. Of the funds appropriated in this subsection, \$95,000
 12 2 is allocated for continuation of the child vision screening
 12 3 program implemented through the university of Iowa hospitals
 12 4 and clinics in collaboration with early childhood Iowa areas.
 12 5 The program shall submit a report to the department regarding
 12 6 the use of funds allocated under this paragraph "a". The
 12 7 report shall include the objectives and results for the
 12 8 program year including the target population and how the funds
 12 9 allocated assisted the program in meeting the objectives; the
 12 10 number, age, and location within the state of individuals
 12 11 served; the type of services provided to the individuals
 12 12 served; the distribution of funds based on the services
 12 13 provided; and the continuing needs of the program.

Allocates \$95,000 for the Iowa KidSight Child Vision Screening Program through the UIHC in collaboration with the Lions Club and Early Childhood Iowa (ECI) areas. Requires the Program to submit a report to the HHS regarding objectives, results, and the use of funds allocated to the Iowa KidSight Child Vision Screening Program.

DETAIL: This is no change compared to the estimated FY 2023 allocation.

12 14 b. Of the funds appropriated in this subsection,
 12 15 \$48,000 shall be used for a grant to a statewide association
 12 16 of psychologists, that is affiliated with the American
 12 17 psychological association, to be used for continuation of a

Allocates \$48,000 for the Psychology Postdoctoral Internship Rotation Program for intern psychologists in urban and rural mental health professional shortage areas.

12 18 program to rotate intern psychologists in placements that
 12 19 serve urban and rural mental health professional shortage
 12 20 areas. Once an intern psychologist begins service, the intern
 12 21 psychologist may continue serving in the location of the intern
 12 22 psychologist's placement, notwithstanding any change in the
 12 23 mental health professional shortage area designation of such
 12 24 location. The intern psychologist may also provide services
 12 25 via telehealth, to underserved populations, and to Medicaid
 12 26 members. For the purposes of this paragraph "b", "mental
 12 27 health professional shortage area" means a geographic area
 12 28 in this state that has been designated by the United States
 12 29 department of health and human services, health resources and
 12 30 services administration, bureau of health professionals, as
 12 31 having a shortage of mental health professionals.

DETAIL: This is no change compared to the estimated FY 2023 allocation. The Program is not a loan repayment program, but increases access through creating new opportunities for doctoral-level psychologists to complete a required rotation in Iowa as opposed to leaving the State. The Program targets health professional shortage areas and rural areas.

12 32 c. Of the funds appropriated in this subsection, the
 12 33 following amounts are allocated to be used as follows
 12 34 to support the goals of increased access, health system
 12 35 integration, and engagement:

Allocates a total of \$1,184,000 to support increased access, health system integration, and engagement. Of that amount, \$600,000 is allocated for the pharmaceutical infrastructure for the SafeNetRx prescription drug donation repository program, \$334,000 for free clinics, \$25,000 for rural health clinics, and \$225,000 for specialty health care clinics.

13 1 (1) Not less than \$600,000 is allocated to the Iowa
 13 2 prescription drug corporation for continuation of the
 13 3 pharmaceutical infrastructure originally established for safety
 13 4 net providers as described in 2007 Iowa Acts, chapter 218,
 13 5 section 108, and for the prescription drug donation repository
 13 6 program created in chapter 135M. Funds allocated under this
 13 7 subparagraph shall be distributed in their entirety for the
 13 8 purpose specified on July 1, 2023.

DETAIL: This is no change compared to the estimated FY 2023 allocation.

13 9 (2) Not less than \$334,000 is allocated to free clinics and
 13 10 free clinics of Iowa for necessary infrastructure, statewide
 13 11 coordination, provider recruitment, service delivery, and
 13 12 provision of assistance to patients in securing a medical home
 13 13 inclusive of oral health care. Funds allocated under this
 13 14 subparagraph shall be distributed in their entirety for the
 13 15 purpose specified on July 1, 2023.

13 16 (3) Not less than \$25,000 is allocated to the Iowa
 13 17 association of rural health clinics for necessary
 13 18 infrastructure and service delivery transformation. Funds
 13 19 allocated under this subparagraph shall be distributed in their
 13 20 entirety for the purpose specified on July 1, 2023.

13 21 (4) Not less than \$225,000 is allocated to the Polk
 13 22 county medical society for continuation of the safety net
 13 23 provider patients access to specialty health care initiative as

13 24 described in 2007 Iowa Acts, chapter 218, section 109. Funds
 13 25 allocated under this subparagraph shall be distributed in their
 13 26 entirety for the purpose specified on July 1, 2023.

13 27 d. Of the funds appropriated in this subsection, \$191,000
 13 28 is allocated for the purposes of health care and public health
 13 29 workforce initiatives.

Allocates \$191,000 for health care and public health workforce issues.

DETAIL: This is no change compared to the estimated FY 2023 allocation.

13 30 e. Of the funds appropriated in this subsection, \$96,000
 13 31 shall be used for a matching dental education loan repayment
 13 32 program to be allocated to a dental nonprofit health service
 13 33 corporation to continue to develop the criteria and implement
 13 34 the loan repayment program.

Allocates \$96,000 for the Fulfilling Iowa's Need for Dentists (FIND) Dental Education Loan Repayment Program.

DETAIL: This is no change compared to the estimated FY 2023 allocation. The FIND Program award recipients agree to practice in a designated dentist shortage area and devote at least 35.00% of their practice to Medicaid-eligible, elderly, disabled, and other underserved patients over a three-year period.

13 35 f. Of the funds appropriated in this subsection, \$100,000
 14 1 shall be used for the purposes of the Iowa donor registry as
 14 2 specified in section 142C.18.

Allocates \$100,000 to the Iowa Donor Registry.

DETAIL: This is no change compared to the estimated FY 2023 allocation.

14 3 g. Of the funds appropriated in this subsection, \$96,000
 14 4 shall be used for continuation of a grant to a nationally
 14 5 affiliated volunteer eye organization that has an established
 14 6 program for children and adults and that is solely dedicated to
 14 7 preserving sight and preventing blindness through education,
 14 8 nationally certified vision screening and training, and
 14 9 community and patient service programs. The contractor shall
 14 10 submit a report to the general assembly regarding the use
 14 11 of funds allocated under this paragraph "g". The report
 14 12 shall include the objectives and results for the program year
 14 13 including the target population and how the funds allocated
 14 14 assisted the program in meeting the objectives; the number,
 14 15 age, grade level if appropriate, and location within the state
 14 16 of individuals served; the type of services provided to the
 14 17 individuals served; the distribution of funds based on the
 14 18 services provided; and the continuing needs of the program.

Allocates \$96,000 to Prevent Blindness Iowa for a vision screening and training program. Requires Prevent Blindness Iowa to submit a report to the General Assembly regarding the objectives and results of the Program.

DETAIL: This is no change compared to the estimated FY 2023 allocation. The Program seeks to increase statewide vision screening programs provided to children by volunteers and nurses, and it must specifically target children in child care centers and schools.

14 19 h. Of the funds appropriated in this subsection, \$2,100,000

Allocates \$2,100,000 for the Medical Residency Training Program.

14 20 shall be deposited in the medical residency training account
 14 21 created in section 135.175, subsection 5, paragraph "a", and is
 14 22 appropriated from the account to the department to be used for
 14 23 the purposes of the medical residency training state matching
 14 24 grants program as specified in section 135.176.

DETAIL: This is no change compared to the estimated FY 2023 allocation. The Program is a matching grants program to provide State funding to sponsors of accredited graduate medical education residency programs in this State to establish, expand, or support medical residency training programs.

14 25 i. Of the funds appropriated in this subsection, \$250,000
 14 26 shall be used for the public purpose of providing funding to
 14 27 Des Moines university to continue a provider education project
 14 28 to provide primary care physicians with the training and skills
 14 29 necessary to recognize the signs of mental illness in patients.

Allocates \$250,000 to Des Moines University (DMU) to continue a program that trains doctors on identifying and treating patients with mental health needs.

DETAIL: This is no change compared to the estimated FY 2023 allocation.

14 30 j. Of the funds appropriated in this subsection, \$800,000
 14 31 shall be used for rural psychiatric residencies to annually
 14 32 fund six psychiatric residents who will provide mental health
 14 33 services in underserved areas of the state. Notwithstanding
 14 34 section 8.33, moneys that remain unencumbered or unobligated
 14 35 at the close of the fiscal year shall not revert but shall
 15 1 remain available for expenditure for the purposes designated
 15 2 for subsequent fiscal years.

CODE: Allocates \$800,000 for rural psychiatric residencies to support the annual creation and training of six psychiatric residents to provide mental health services in underserved areas of the State. Any funds that remain at the end of the fiscal year are permitted to carry forward into subsequent fiscal years.

DETAIL: This is no change compared to the estimated FY 2023 allocation.

15 3 k. Of the funds appropriated in this subsection, \$150,000
 15 4 shall be used for psychiatric training to increase access to
 15 5 mental health care services by expanding the mental health
 15 6 workforce via training of additional physician assistants and
 15 7 nurse practitioners.

Allocates \$150,000 for psychiatric training for physician assistants and nurse practitioners.

DETAIL: This is no change compared to the estimated FY 2023 allocation.

15 8 1. Of the funds appropriated in this subsection, \$425,000
 15 9 shall be used for the continuation of a center of excellence
 15 10 program to award two grants to encourage innovation and
 15 11 collaboration among regional health care providers in a rural
 15 12 area based upon the results of a regional community needs
 15 13 assessment to transform health care delivery in order to
 15 14 provide quality, sustainable care that meets the needs of the
 15 15 local communities. An applicant for the grant funds shall
 15 16 specify how the grant funds will be expended to accomplish the
 15 17 goals of the program and shall provide a detailed five-year
 15 18 sustainability plan prior to being awarded any grant funding.

Allocates \$425,000 for the creation of a Center of Excellence Program.

DETAIL: This is no change compared to the estimated FY 2023 allocation. The Program funds grant proposals to demonstrate regional collaboration in assessing targeted medical needs of local residents. The projects facilitate collaboration between rural hospitals and health systems to leverage resources and develop a business model for long-term sustainability. Applicants are required to complete a five-year sustainability plan prior to being awarded any funds and are required to provide periodic reports as specified by the HHS to the Governor and the General Assembly regarding expenditures and progress in accomplishing the Program goals.

15 19 Following the receipt of grant funding, a recipient shall
 15 20 submit periodic reports as specified by the department to the
 15 21 governor and the general assembly regarding the recipient's
 15 22 expenditure of the grant funds and progress in accomplishing
 15 23 the program's goals.

15 24 m. Of the funds appropriated in this subsection, \$560,000
 15 25 shall be deposited in the family medicine obstetrics fellowship
 15 26 program fund to be used for the state family medicine
 15 27 obstetrics fellowship program in accordance with section
 15 28 135.182, if enacted in this Act, to meet a critical demand for
 15 29 well-trained family medicine obstetrics practitioners in rural
 15 30 and underserved areas in the state.

15 31 n. Of the funds appropriated in this subsection, \$358,201
 15 32 is allocated for the Iowa commission on volunteer service for
 15 33 purposes of the Iowa state commission grant program and the
 15 34 Iowa's promise and Iowa mentoring partnership programs.

15 35 (1) Of the funds allocated in this paragraph, \$75,000 shall
 16 1 be used for the purposes of the Iowa state commission grant
 16 2 program and \$93,201 shall be used for the purposes of the
 16 3 Iowa's promise and Iowa mentoring partnership programs.
 16 4 (2) Notwithstanding section 8.33, funds allocated in this
 16 5 paragraph that remain unencumbered or unobligated at the close
 16 6 of the fiscal year shall not revert but shall remain available
 16 7 for expenditure for the purposes designated until the close of
 16 8 the succeeding fiscal year.

Allocates \$560,000 for the creation of the Family Medicine Obstetrics Fellowship Program Fund to establish obstetrics fellowships in rural and underserved areas in the State.

DETAIL: This is a new allocation for FY 2024.

Allocates \$358,201 to the HHS for the development and coordination of the ICVS.

DETAIL: This is a new allocation for the HHS. Funding was previously appropriated to the IEDA. This is an increase of \$358,201 compared to estimated FY 2023.

Allocates \$75,000 for the Iowa State Commission Grant Program and \$93,201 for the Iowa's Promise and Iowa Mentoring Partnership programs.

DETAIL: This is a new allocation for the HHS. Funding was previously appropriated from the IEDA. This maintains the current funding allocation for the Grant Program and the Iowa's Promise and Iowa Mentoring Partnership programs compared to estimated FY 2023. The funds are permitted to carry forward at the end of FY 2024 and remain available until the close of FY 2025

NOTE: The Iowa State Commission Grant Program allocation is used to help organizations prepare an application for a full AmeriCorps Program grant and plan for implementation of future AmeriCorps programming. The grants fund the development of new AmeriCorps Program models that seek to engage AmeriCorps members in evidence-based interventions to solve community problems. Grants can support staffing or consultant expenses, travel, materials, and other costs necessary to conduct a community needs assessment; bring together community partners to help design appropriate service activities to address community needs identified; develop financial plans to support cost share; and develop high-quality plans for

managing program implementation. Grants may not be used to support AmeriCorps members.

NOTE: The Iowa Mentoring Partnership certifies Iowa mentoring programs, promotes mentoring through events and education, provides e-mentoring web services to Iowa programs, facilitates collaboration through a provider board, and provides statewide training and technical assistance to Iowa programs.

16 9 5. ESSENTIAL PUBLIC HEALTH SERVICES
 16 10 To provide public health services that reduce risks and
 16 11 invest in promoting and protecting good health over the
 16 12 course of a lifetime with a priority given to older Iowans and
 16 13 vulnerable populations:
 16 14 \$ 7,662,464

General Fund appropriation to Essential Public Health Services.

DETAIL: This is no change compared to estimated FY 2023. This funding is part of the Local Public Health Services Program, with the purpose of implementing core public health functions, providing essential public health services that promote healthy aging throughout the lifespan of Iowans, and enhancing health-promoting and disease prevention services with a priority given to older Iowans and vulnerable populations. The grant is considered the funding provider of last resort and is utilized only when no other funding source exists. Funding is distributed to local boards of health through a [formula](#) in the Iowa Administrative Code.

16 15 6. INFECTIOUS DISEASES
 16 16 For reducing the incidence and prevalence of communicable
 16 17 diseases, and for not more than the following full-time
 16 18 equivalent positions:
 16 19 \$ 1,795,902
 16 20 FTEs 6.00

General Fund appropriation to Infectious Diseases programs for activities and programs to reduce the incidence and prevalence of communicable diseases.

DETAIL: This is a decrease of \$304 and no change in FTE positions compared to estimated FY 2023 due to restructuring the OCIO's Cybersecurity Office from fee-based funding to a General Fund appropriation.

16 21 7. PUBLIC PROTECTION
 16 22 For protecting the health and safety of the public through
 16 23 establishing standards and enforcing regulations, and for not
 16 24 more than the following full-time equivalent positions:
 16 25 \$ 4,581,792
 16 26 FTEs 57.00

General Fund appropriation to Public Protection programs.

DETAIL: This is a net increase of \$115,191 and a decrease of 1.00 FTE position compared to estimated FY 2023. The changes include:

- A decrease of \$131,757 and 1.00 FTE position as a result of the administration of the certificate of need process moving to the Department of Inspections, Appeals, and Licensing (DIAL).
- An increase of \$250,000 to the Poison Control Center.
- A decrease of \$3,052 due to restructuring the OCIO's Cybersecurity Office from fee-based funding to a General Fund

appropriation.

16 27 a. Of the funds appropriated in this subsection, not more
 16 28 than \$304,000 shall be credited to the emergency medical
 16 29 services fund created in section 135.25. Moneys in the
 16 30 emergency medical services fund are appropriated to the
 16 31 department to be used for the purposes of the fund.

Allocates up to \$304,000 for the Emergency Medical Services (EMS) Fund.

DETAIL: This is no change compared to the estimated FY 2023 allocation. The Fund provides a one-to-one match to counties for the acquisition of equipment and for education and training related to EMS.

16 32 b. Of the funds appropriated in this subsection, up
 16 33 to \$243,000 shall be used for sexual violence prevention
 16 34 programming through a statewide organization representing
 16 35 programs serving victims of sexual violence through the
 17 1 department's sexual violence prevention program, and for
 17 2 continuation of a training program for sexual assault
 17 3 response team (SART) members, including representatives of
 17 4 law enforcement, victim advocates, prosecutors, and certified
 17 5 medical personnel. The amount allocated in this paragraph "b"
 17 6 shall not be used to supplant funding administered for other
 17 7 sexual violence prevention or victims assistance programs.

Allocates up to \$243,000 to provide program funding for sexual violence prevention programs.

DETAIL: This is no change compared to the estimated FY 2023 allocation.

17 8 c. Of the funds appropriated in this subsection, up to
 17 9 \$750,000 shall be used for the state poison control center.
 17 10 Pursuant to the directive under 2014 Iowa Acts, chapter 1140,
 17 11 section 102, the federal matching funds available to the
 17 12 state poison control center from the department under the
 17 13 federal Children's Health Insurance Program Reauthorization Act
 17 14 allotment shall be subject to the federal administrative cap
 17 15 rule of 10 percent applicable to funding provided under Tit.
 17 16 XXI of the federal Social Security Act and included within the
 17 17 department's calculations of the cap.

Allocates up to \$750,000 for the State Poison Control Center.

DETAIL: This is an increase of \$250,000 compared to the estimated FY 2023 allocation. The Center is allowed to transfer as much funding as needed for the purpose of receiving matching federal funds.

17 18 d. Of the funds appropriated in this subsection, up to
 17 19 \$504,000 shall be used for childhood lead poisoning provisions.

Allocates up to \$504,000 for childhood lead poisoning testing.

DETAIL: This is no change compared to the estimated FY 2023 allocation.

17 20 8. RESOURCE MANAGEMENT
 17 21 For establishing and sustaining the overall ability of the

General Fund appropriation for Resource Management activities.

17 22 department to deliver services to the public, and for not more
 17 23 than the following full-time equivalent positions:
 17 24 \$ 933,543
 17 25 FTEs 4.00

DETAIL: This is a decrease of \$328 and no change in FTE positions compared to estimated FY 2023 due to restructuring the OCIO's Cybersecurity Office from fee-based funding to a General Fund appropriation.

17 26 9. MISCELLANEOUS PROVISIONS
 17 27 The university of Iowa hospitals and clinics under the
 17 28 control of the state board of regents shall not receive
 17 29 indirect costs from the funds appropriated in this section.
 17 30 The university of Iowa hospitals and clinics billings to the
 17 31 department shall be on at least a quarterly basis.

Prohibits the UIHC from receiving indirect cost reimbursement from General Fund appropriations to the HHS. Requires the UIHC to submit billings to the HHS on a quarterly basis each year.

17 32 10. IOWA HEALTH INFORMATION NETWORK ENHANCEMENTS
 17 33 The department shall work with the board established
 17 34 in chapter 135D to develop plans for program enhancements
 17 35 in the Iowa health information network, for the purpose of
 18 1 empowering Iowa patients to access and direct their health
 18 2 information utilizing the Iowa health information network.
 18 3 Program enhancements shall protect data privacy, facilitate the
 18 4 interchange of health data for the purpose of improving public
 18 5 health outcomes, and increase participation by health care
 18 6 providers.

Requires the HHS to work with the Iowa Health Information Network Board established in Iowa Code chapter [135D](#) to develop plans for program enhancements to empower Iowa patients to access and direct their health information using the Iowa health information network.

18 7 Sec. 6. DEPARTMENT OF HEALTH AND HUMAN SERVICES — SPORTS
 18 8 WAGERING RECEIPTS FUND. There is appropriated from the sports
 18 9 wagering receipts fund created in section 8.57, subsection 6,
 18 10 to the department of health and human services for the fiscal
 18 11 year beginning July 1, 2023, and ending June 30, 2024, the
 18 12 following amount, or so much thereof as is necessary, to be
 18 13 used for the purposes designated:

Sports Wagering Receipts Fund appropriation for problem gambling and substance-related disorder prevention, treatment, and recovery services, including Your Life Iowa, professional training, youth prevention, and program evaluation.

18 14 For problem gambling and substance use disorder prevention,
 18 15 treatment, and recovery services, including a 24-hour helpline,
 18 16 public information resources, professional training, youth
 18 17 prevention, and program evaluation:
 18 18 \$ 1,750,000

DETAIL: This is no change compared to estimated FY 2023.

18 19 DIVISION V
 18 20 DEPARTMENT OF HEALTH AND HUMAN SERVICES — HUMAN SERVICES —
 18 21 FY 2023-2024

18 22 Sec. 7. TEMPORARY ASSISTANCE FOR NEEDY FAMILIES BLOCK
 18 23 GRANT. There is appropriated from the fund created in section

Appropriates a total of \$130,980,383 from the Temporary Assistance for Needy Families (TANF) Federal Block Grant Fund appropriation for

18 24 8.41 to the department of health and human services for the
 18 25 fiscal year beginning July 1, 2023, and ending June 30, 2024,
 18 26 from moneys received under the federal temporary assistance
 18 27 for needy families (TANF) block grant pursuant to the federal
 18 28 Personal Responsibility and Work Opportunity Reconciliation Act
 18 29 of 1996, Pub.L.No.104-193, and successor legislation, the
 18 30 following amounts, or so much thereof as is necessary, to be
 18 31 used for the purposes designated:

FY 2024.

DETAIL: The federal government implemented Federal Welfare Reform on August 22, 1996. Reform eliminated Aid to Families with Dependent Children (AFDC), ending federal entitlement and creating a flexible funding source for states to use in helping needy families achieve self-sufficiency. Iowa's annual TANF award is \$131,524,959; however, federal law reduces the annual award by \$434,032 and reserves those funds for research and evaluation projects. In addition, \$582,859 is allocated to Native American tribes.

18 32 1. To be credited to the family investment program (FIP)
 18 33 account and used for assistance under FIP in accordance with
 18 34 chapter 239B:
 18 35 \$ 5,002,006

Appropriates funds from the TANF Block Grant to the Family Investment Program (FIP) Account.

DETAIL: This is no change compared to estimated FY 2023. Iowa's FIP is a cash assistance program to support low-income families with children and to provide services to help them to become self-sufficient.

19 1 2. To be credited to the FIP account and used for the job
 19 2 opportunities and basic skills (JOBS) program and implementing
 19 3 family investment agreements in accordance with chapter 239B:
 19 4 \$ 5,412,060

Appropriates funds from the TANF Block Grant to the PROMISE JOBS Program.

DETAIL: This is no change compared to estimated FY 2023. The PROMISE JOBS Program provides training, education, and employment services to FIP recipients. In addition, the Program pays allowances for specified costs, such as transportation, related to participating in Program activities.

19 5 3. To be used for the family development and
 19 6 self-sufficiency grant program in accordance with section
 19 7 216A.107:
 19 8 \$ 2,888,980

Appropriates funds from the TANF Block Grant to the Family Development and Self-Sufficiency (FaDSS) Grant Program.

DETAIL: This is no change compared to estimated FY 2023. FaDSS is a home-based supportive service to assist families with significant or multiple barriers to reach self-sufficiency. The Program was created during the 1988 General Assembly to assist families participating in the FIP.

19 9 Notwithstanding section 8.33, moneys appropriated in this
 19 10 subsection that remain unencumbered or unobligated at the close
 19 11 of the fiscal year shall not revert but shall remain available
 19 12 for expenditure for the purposes designated until the close of
 19 13 the succeeding fiscal year. However, unless such moneys are

CODE: Allows any unexpended funds allocated for the FaDSS Grant Program for FY 2024 to remain available for expenditure in FY 2025. Specifies that moneys not encumbered or obligated on or before September 30, 2024, will revert back to the federal government.

19 14 encumbered or obligated on or before September 30, 2024, the
 19 15 moneys shall revert.

19 16 4. For field operations:
 19 17 \$ 31,296,232

Appropriates funds from the TANF Block Grant to Field Operations.
 DETAIL: This is no change compared to estimated FY 2023.

19 18 5. For general administration:
 19 19 \$ 3,744,000

Appropriates funds from the TANF Block Grant to General
 Administration.
 DETAIL: This is no change compared to estimated FY 2023.

19 20 6. For state child care assistance:
 19 21 \$ 47,166,826

Appropriates funds from the TANF Block Grant to Child Care
 Assistance (CCA).
 DETAIL: This is no change compared to estimated FY 2023.

19 22 a. Of the funds appropriated in this subsection,
 19 23 \$26,205,412 is transferred to the child care and development
 19 24 block grant appropriation made by the Ninetieth General
 19 25 Assembly, 2023 session, for the federal fiscal year beginning
 19 26 October 1, 2023, and ending September 30, 2024. Of this
 19 27 amount, \$200,000 shall be used for provision of educational
 19 28 opportunities to registered child care home providers in order
 19 29 to improve services and programs offered by this category
 19 30 of providers and to increase the number of providers. The
 19 31 department may contract with institutions of higher education
 19 32 or child care resource and referral centers to provide
 19 33 the educational opportunities. Allowable administrative
 19 34 costs under the contracts shall not exceed 5 percent. The
 19 35 application for a grant shall not exceed two pages in length.

Requires the HHS to transfer \$26,205,412 to the Child Care and
 Development Block Grant appropriation and to use \$200,000 for
 training of registered child care home providers. Permits the HHS to
 contract with colleges and universities or child care resource and
 referral centers to provide training, and specifies requirements for
 grant funding and applications. Requires that contractor administrative
 costs do not exceed 5.00%.

20 1 b. Any funds appropriated in this subsection remaining
 20 2 unallocated shall be used for state child care assistance
 20 3 payments for families who are employed including but not
 20 4 limited to individuals enrolled in FIP.

Specifies that the unallocated funds, which currently total \$20,961,414,
 are to be used for CCA for employed individuals enrolled in the FIP.

20 5 7. For child and family services:
 20 6 \$ 32,380,654

Appropriates funds from the TANF Block Grant to Child and Family
 Services.
 DETAIL: This is no change compared to estimated FY 2023.

20 7 8. For child abuse prevention grants:
 20 8 \$ 125,000

Appropriates funds from the TANF Block Grant for child abuse prevention grants.

DETAIL: This is no change compared to estimated FY 2023.

20 9 9. For pregnancy prevention grants on the condition that
 20 10 family planning services are funded:
 20 11 \$ 1,913,203

Appropriates funds from the TANF Block Grant for pregnancy prevention grants on the condition that family planning services are funded.

DETAIL: This is no change compared to estimated FY 2023.

20 12 Pregnancy prevention grants shall be awarded to programs
 20 13 in existence on or before July 1, 2023, if the programs have
 20 14 demonstrated positive outcomes. Grants shall be awarded to
 20 15 pregnancy prevention programs which are developed after July
 20 16 1, 2023, if the programs are based on existing models that
 20 17 have demonstrated positive outcomes. Grants shall comply with
 20 18 the requirements provided in 1997 Iowa Acts, chapter 208,
 20 19 section 14, subsections 1 and 2, including the requirement that
 20 20 grant programs must emphasize sexual abstinence. Priority in
 20 21 the awarding of grants shall be given to programs that serve
 20 22 areas of the state which demonstrate the highest percentage of
 20 23 unplanned pregnancies of females of childbearing age within the
 20 24 geographic area to be served by the grant.

Requires the HHS to award pregnancy prevention grants only to programs that are based on existing models and have demonstrated positive outcomes. Requires pregnancy prevention grants from the TANF to include the requirement that sexual abstinence be emphasized. Specifies that priority in awarding the grants is to be given to programs in areas of Iowa that have the highest percentage of unplanned adolescent pregnancies within the geographic area served by the grant.

20 25 10. For technology needs and other resources necessary to
 20 26 meet federal and state reporting, tracking, and case management
 20 27 requirements and other departmental needs:
 20 28 \$ 1,037,186

Appropriates funds from the TANF Block Grant for federal welfare reform reporting, tracking, and case management technology and resource needs.

DETAIL: This is no change compared to estimated FY 2023.

20 29 11. a. Notwithstanding any provision to the contrary,
 20 30 including but not limited to requirements in section 8.41 or
 20 31 provisions in 2022 Iowa Acts or 2023 Iowa Acts regarding the
 20 32 receipt and appropriation of federal block grants, federal
 20 33 funds from the temporary assistance for needy families block
 20 34 grant received by the state and not otherwise appropriated
 20 35 in this section and remaining available for the fiscal year
 21 1 beginning July 1, 2023, are appropriated to the department of
 21 2 health and human services to the extent as may be necessary

CODE: Permits the HHS to carry forward unused TANF funds for expenditure in FY 2024.

DETAIL: Funds carried forward may be used for the FIP, technology costs related to the FIP, and the CCA Program.

21 3 to be used in the following priority order:for FIP, for
 21 4 state child care assistance program payments for families
 21 5 who are employed, and for the FIP share of system costs for
 21 6 eligibility determination and related functions. The federal
 21 7 funds appropriated in this paragraph "a" shall be expended
 21 8 only after all other funds appropriated in subsection I for
 21 9 assistance under FIP, in subsection 6 for state child care
 21 10 assistance, or in subsection 10 for technology needs and other
 21 11 resources necessary to meet departmental needs, as applicable,
 21 12 have been expended. For the purposes of this subsection, the
 21 13 funds appropriated in subsection 6, paragraph "a", for transfer
 21 14 to the child care and development block grant appropriation
 21 15 are considered fully expended when the full amount has been
 21 16 transferred.

21 17 b. The department shall, on a quarterly basis, advise the
 21 18 general assembly and department of management of the amount of
 21 19 funds appropriated in this subsection that was expended in the
 21 20 prior quarter.

Requires the HHS to submit quarterly reports to the General Assembly and the Department of Management (DOM) regarding expenditures in this Section.

21 21 12. Of the amounts appropriated in this section,
 21 22 \$12,962,008 for the fiscal year beginning July 1, 2023, is
 21 23 transferred to the appropriation of the federal social services
 21 24 block grant made to the department of health and human services
 21 25 for that fiscal year.

Requires \$12,962,008 of the federal TANF funds appropriated in this Section to be transferred to the federal Social Services Block Grant.

DETAIL: This is no change compared to estimated FY 2023.

21 26 13. For continuation of the program providing categorical
 21 27 eligibility for the supplemental nutrition assistance program
 21 28 (SNAP) as specified in section 239.2, if enacted by 2023 Iowa
 21 29 Acts, Senate File 494:
 21 30 \$ 14,236

Appropriates funds from the TANF Block Grant to the Promoting Awareness of the Benefits of a Healthy Marriage Program.

DETAIL: This is no change compared to estimated FY 2023. This language provides for consistent eligibility determination both for households that are categorically eligible for the Supplemental Nutrition Assistance Program (SNAP) due to eligibility for the Promoting Awareness of the Benefits of a Healthy Marriage Program and for the few households that cannot meet categorical eligibility criteria.

21 31 14. The department may transfer funds allocated in this
 21 32 section to the appropriations made in this division of this Act
 21 33 for the same fiscal year for general administration and field
 21 34 operations for resources necessary to implement and operate the
 21 35 services referred to in this section and those funded in the

Permits the HHS to transfer funds allocated in this Section to General Administration and Field Operations for costs associated with TANF-funded programs and the FIP from the State General Fund.

22 1 appropriation made in this division of this Act for the same
22 2 fiscal year for FIP from the general fund of the state.

22 3 15. With the exception of moneys allocated under this
22 4 section for the family development and self-sufficiency grant
22 5 program, to the extent moneys allocated in this section are
22 6 deemed by the department not to be necessary to support the
22 7 purposes for which they are allocated, such moneys may be used
22 8 in the same fiscal year for any other purpose for which funds
22 9 are allocated in this section or in section 8 of this division
22 10 of this Act for the FIP account. If there are conflicting
22 11 needs, priority shall first be given to the FIP account as
22 12 specified under subsection 1 of this section and used for the
22 13 purposes of assistance under FIP in accordance with chapter
22 14 239B, followed by state child care assistance program payments
22 15 for families who are employed, followed by other priorities as
22 16 specified by the department.

Permits the HHS to transfer excess funds from the TANF Block Grant appropriation to the FIP Account to be used for assistance through the FIP within the same fiscal year and adds the State CCA Program to the list of programs to which the HHS may transfer available TANF funds.

22 17 Sec. 8. FAMILY INVESTMENT PROGRAM ACCOUNT.
22 18 1. Moneys credited to the FIP account for the fiscal year
22 19 beginning July 1, 2023, and ending June 30, 2024, shall be used
22 20 to provide assistance in accordance with chapter 239B.

Requires funds credited to the FIP Account for FY 2024 to be used as specified in Iowa Code chapter [239B](#).

22 21 2. The department may use a portion of the moneys credited
22 22 to the FIP account under this section as necessary for
22 23 salaries, support, maintenance, and miscellaneous purposes,
22 24 including administrative and information technology costs
22 25 associated with rent reimbursement and other income assistance
22 26 programs administered by the department.

Permits the HHS to use FIP funds for various administrative purposes.

22 27 3. The department may transfer funds allocated in
22 28 subsection 4, excluding the allocation under subsection 4,
22 29 paragraph "b", to the appropriations made in this division of
22 30 this Act for the same fiscal year for general administration
22 31 and field operations for resources necessary to implement
22 32 and operate the services referred to in this section and
22 33 those funded in the appropriations made in section 7 for the
22 34 temporary assistance for needy families block grant and in
22 35 section 9 for FIP from the general fund of the state in this
23 1 division of this Act for the same fiscal year.

Allows the HHS to transfer funds allocated in this Section to General Administration and Field Operations to administer the TANF Block Grant, the FIP Account, and the FIP General Fund requirements. The transfer authority excludes the FaDSS subsection.

23 2 4. Moneys appropriated in this division of this Act and

Requires the TANF Block Grant funds appropriated to the FIP Account

<p>23 3 credited to the FIP account for the fiscal year beginning July 23 4 1, 2023, and ending June 30, 2024, are allocated as follows:</p> <p>23 5 a. To be used by the department of health and human services 23 6 to more effectively serve participants in FIP and other clients 23 7 and to meet federal reporting requirements under the federal 23 8 temporary assistance for needy families block grant: 23 9</p> <p>23 10 b. To the department of health and human services for 23 11 staffing, administration, and implementation of the family 23 12 development and self-sufficiency grant program in accordance 23 13 with section 216A.107: 23 14</p> <p>23 15 (1) Of the funds allocated for the family development 23 16 and self-sufficiency grant program in this paragraph "b", 23 17 not more than 5 percent of the funds shall be used for the 23 18 administration of the grant program.</p> <p>23 19 (2) The department of health and human services may continue 23 20 to implement the family development and self-sufficiency grant 23 21 program statewide during fiscal year 2023-2024.</p> <p>23 22 (3) The department of health and human services may engage 23 23 in activities to strengthen and improve family outcomes 23 24 measures and data collection systems under the family 23 25 development and self-sufficiency grant program.</p> <p>23 26 c. For the diversion subaccount of the FIP account: 23 27</p> <p>23 28 A portion of the moneys allocated for the diversion 23 29 subaccount may be used for field operations, salaries, data 23 30 management system development, and implementation costs and 23 31 support deemed necessary by the director of health and human 23 32 services in order to administer the FIP diversion program. To 23 33 the extent moneys allocated in this paragraph "c" are deemed 23 34 by the department not to be necessary to support diversion 23 35 activities, such moneys may be used for other efforts intended 24 1 to increase engagement by FIP participants in work, education, 24 2 or training activities, or for the purposes of assistance under</p>	<p style="text-align: right;">\$ 10,000</p> <p style="text-align: right;">\$ 7,192,834</p> <p style="text-align: right;">\$ 1,293,000</p>	<p>be allocated as specified.</p> <p>Allocates \$10,000 in General Funds and TANF funds to the HHS to be used for administrative services.</p> <p>DETAIL: This is no change compared to the estimated FY 2023 allocation.</p> <p>Allocates \$7,192,834 in General Funds and TANF funds to the HHS for the FaDSS Grant Program.</p> <p>DETAIL: This is no change compared to the estimated FY 2023 allocation. FaDSS is a supportive service to assist FIP families with significant or multiple barriers reach self-sufficiency.</p> <p>Requires that a maximum of 5.00% of the allocation be spent on administration of the FaDSS Grant Program.</p> <p>Permits the HHS to continue to implement the FaDSS Grant Program in FY 2024.</p> <p>Permits the HHS to collect data and measure outcomes of the FaDSS Grant Program.</p> <p>Allocates \$1,293,000 in General Funds and TANF funds for the FIP Diversion Subaccount. Permits a portion of the allocation to be used for field operations, salaries, data management system development, and implementation costs and support needed to administer the FIP Diversion Program.</p> <p>DETAIL: This is no change compared to the estimated FY 2023 allocation.</p>
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24 3 FIP in accordance with chapter 239B.

24 4 d. For the SNAP employment and training program:
24 5 \$ 66,588

Allocates \$66,588 in General Funds and TANF funds to the SNAP Employment and Training Program.

DETAIL: This is no change compared to the estimated FY 2023 allocation.

24 6 (1) The department shall apply the federal SNAP employment
24 7 and training state plan in order to maximize to the fullest
24 8 extent permitted by federal law the use of the 50 percent
24 9 federal reimbursement provisions for the claiming of allowable
24 10 federal reimbursement funds from the United States department
24 11 of agriculture pursuant to the federal SNAP employment and
24 12 training program for providing education, employment, and
24 13 training services for eligible SNAP participants, including
24 14 but not limited to related dependent care and transportation
24 15 expenses.

Requires the HHS to amend the federal SNAP Employment and Training State Plan to maximize federal matching funds received.

24 16 (2) The department shall continue categorical federal
24 17 SNAP eligibility as specified in section 239.2, if enacted
24 18 by 2023 Iowa Acts, Senate File 494, consistent with federal
24 19 SNAP requirements. The eligibility provisions shall conform
24 20 to all federal requirements including requirements addressing
24 21 individuals who are disqualified for committing an intentional
24 22 program violation or are otherwise ineligible.

Requires the HHS to continue categorical federal SNAP eligibility to persons with income up to 160.00% of the Federal Poverty Level (FPL) as required in [Senate File 494](#) (Medicaid, Supplemental Nutrition Assistance Program Eligibility Verification Bill). The HHS is required to conform to all federal requirements, including requirements addressing individuals who are disqualified for committing an intentional program violation or are otherwise ineligible.

24 23 e. For the JOBS program, not more than:
24 24 \$ 12,018,258

Permits the HHS to allocate up to \$12,018,258 of the FY 2024 General Fund and TANF appropriations for the FIP and the PROMISE JOBS Program.

DETAIL: This is no change compared to the estimated FY 2023 allocation.

24 25 5. Of the child support collections assigned under FIP, an
24 26 amount equal to the federal share of support collections shall
24 27 be credited to the child support services appropriation made
24 28 in this division of this Act. Of the remainder of the assigned
24 29 child support collections received by child support services,
24 30 a portion shall be credited to the FIP account, a portion may
24 31 be used to increase recoveries, and a portion may be used to

Requires the federal share of child support collections recovered by the State be credited to Child Support Services. The remainder of support collected is credited to the FIP Account, and the HHS is permitted to use a portion to increase recoveries and to sustain cash flow in the Child Support Payments Account.

24 32 sustain cash flow in the child support payments account. If
 24 33 as a consequence of the appropriations and allocations made in
 24 34 this section the resulting amounts are insufficient to sustain
 24 35 cash assistance payments and meet federal maintenance of effort
 25 1 requirements, the department shall seek supplemental funding.
 25 2 If child support collections assigned under FIP are greater
 25 3 than estimated or are otherwise determined not to be required
 25 4 for maintenance of effort, the state share of either amount may
 25 5 be transferred to or retained in the child support payments
 25 6 account.

25 7 Sec. 9. FAMILY INVESTMENT PROGRAM GENERAL FUND. There
 25 8 is appropriated from the general fund of the state to the
 25 9 department of health and human services for the fiscal year
 25 10 beginning July 1, 2023, and ending June 30, 2024, the following
 25 11 amount, or so much thereof as is necessary, to be used for the
 25 12 purpose designated:
 25 13 To be credited to the FIP account and used for FIP assistance
 25 14 in accordance with chapter 239B and for other costs associated
 25 15 with providing needs-based benefits or assistance:
 25 16 \$ 41,003,575

25 17 1. Of the funds appropriated in this section, \$6,606,198 is
 25 18 allocated for the JOBS program.

25 19 2. Of the funds appropriated in this section, \$4,313,854 is
 25 20 allocated for the family development and self-sufficiency grant
 25 21 program.

25 22 3. a. Notwithstanding section 8.39, for the fiscal
 25 23 year beginning July 1, 2023, if necessary to meet federal
 25 24 maintenance of effort requirements or to transfer federal
 25 25 temporary assistance for needy families block grant funding
 25 26 to be used for purposes of the federal social services block
 25 27 grant or to meet cash flow needs resulting from delays in
 25 28 receiving federal funding or to implement, in accordance with
 25 29 this division of this Act, activities currently funded with

General Fund appropriation to the HHS for the FIP to be credited to the FIP Account. The appropriation for the FIP Account also contains funding for the PROMISE JOBS Program and FaDSS Grant Program.

DETAIL: This is a decrease of \$403 compared to estimated FY 2023 for the FaDSS Grant Program due to restructuring the OCIO's Cybersecurity Office from fee-based funding to a General Fund appropriation. The appropriation maintains the current FIP payment levels (maximum grants of \$361 per month for a family with two persons and \$426 for a family with three persons).

General Fund allocation of \$6,606,198 for the PROMISE JOBS Program.

DETAIL: This is no change compared to the estimated FY 2023 allocation.

General Fund allocation of \$4,313,854 for the FaDSS Grant Program.

DETAIL: This is an no change compared to the estimated FY 2023 allocation.

CODE: Specifies that the HHS has the authority to transfer TANF funds to the Social Services Block Grant as necessary to meet federal maintenance-of-effort requirements.

25 30 juvenile court services, county, or community moneys and
 25 31 state moneys used in combination with such moneys; to comply
 25 32 with federal requirements; or to maximize the use of federal
 25 33 funds; the department of health and human services may transfer
 25 34 funds within or between any of the appropriations made in
 25 35 this division of this Act and appropriations in law for the

26 1 federal social services block grant to the department for the
 26 2 following purposes, provided that the combined amount of state
 26 3 and federal temporary assistance for needy families block grant
 26 4 funding for each appropriation remains the same before and
 26 5 after the transfer:

26 6 (1) For FIP.
 26 7 (2) For state child care assistance.
 26 8 (3) For child and family services.
 26 9 (4) For field operations.
 26 10 (5) For general administration.

26 11 b. This subsection shall not be construed to prohibit the
 26 12 use of existing state transfer authority for other purposes.
 26 13 The department shall report any transfers made pursuant to this
 26 14 subsection to the general assembly.

26 15 4. Of the funds appropriated in this section, \$195,000
 26 16 shall be used for a contract for tax preparation assistance
 26 17 to low-income lowans to expand the usage of the earned income
 26 18 tax credit. The purpose of the contract is to supply this
 26 19 assistance to underserved areas of the state. The department
 26 20 shall not retain any portion of the allocation under this
 26 21 subsection for administrative costs.

General Fund allocation of \$195,000 to provide tax preparation assistance to low-income lowans.

DETAIL: This is no change compared to the estimated FY 2023 allocation.

26 22 5. Of the funds appropriated in this section, \$70,000 shall
 26 23 be used for the continuation of the parenting program, as
 26 24 specified in 441 IAC ch.100, relating to parental obligations,
 26 25 in which child support services participates, to support the
 26 26 efforts of a nonprofit organization committed to strengthening
 26 27 the community through youth development, healthy living,
 26 28 and social responsibility headquartered in a county with
 26 29 a population over 450,000 according to the 2020 certified
 26 30 federal census. The funds allocated in this subsection shall
 26 31 be used by the recipient organization to develop a larger
 26 32 community effort, through public and private partnerships, to
 26 33 support a broad-based multi-county parenthood initiative that
 26 34 promotes payment of child support obligations, improved family

General Fund allocation of \$70,000 for the Parenting Program (formerly the Fatherhood Initiative Pilot Project).

DETAIL: This is no change compared to the estimated FY 2023 allocation. The entity receiving funding for the Parenting Program in FY 2023 was the John R. Grubb YMCA in Des Moines. The Program is designed to strengthen parental skills and involvement of men who are living apart from their children. The Program offers classes in health and nutrition, effective communication, co-parenting, financial education, and community resources.

26 35 relationships, and full-time employment.

27 1 6. The department may transfer funds appropriated in this
27 2 section, excluding the allocation in subsection 2 for the
27 3 family development and self-sufficiency grant program, to the
27 4 appropriations made in this division of this Act for general
27 5 administration and field operations as necessary to administer
27 6 this section, section 7 for the temporary assistance for needy
27 7 families block grant, and section 8 for the FIP account.

Allows the HHS to transfer funds appropriated in this Section to General Administration and Field Operations to administer the TANF Block Grant, the FIP Account, and the FIP General Fund provisions. The transfer authority excludes the FaDSS subsection.

27 8 Sec. 10. CHILD SUPPORT SERVICES. There is appropriated from
27 9 the general fund of the state to the department of health and
27 10 human services for the fiscal year beginning July 1, 2023, and
27 11 ending June 30, 2024, the following amount, or so much thereof
27 12 as is necessary, to be used for the purposes designated:

General Fund appropriation to the HHS for Child Support Services.

27 13 For child support services, including salaries, support,
27 14 maintenance, and miscellaneous purposes, and for not more than
27 15 the following full-time equivalent positions:

DETAIL: This is a decrease of \$28,556 and an increase of 36.00 FTE positions compared to estimated FY 2023. The reduction in costs is due to restructuring the OCIO's Cybersecurity Office from fee-based funding to a General Fund appropriation. The increase in FTE positions matches the FY 2023 authorized amount.

27 16 \$ 15,914,329
27 17 FTEs 459.00

27 18 1. The department shall expend up to \$24,000, including
27 19 federal financial participation, for the fiscal year beginning
27 20 July 1, 2023, for a child support public awareness campaign.
27 21 The department and the office of the attorney general shall
27 22 cooperate in continuation of the campaign. The public
27 23 awareness campaign shall emphasize, through a variety of
27 24 media activities, the importance of maximum involvement of
27 25 both parents in the lives of their children as well as the
27 26 importance of payment of child support obligations.

Requires the HHS to expend up to \$24,000 during FY 2024 for a child support public awareness campaign. The funding limitation includes federal funds. The campaign is to be operated in cooperation with the Office of the Attorney General and is to emphasize parental involvement and financial support.

DETAIL: This is no change compared to the estimated FY 2023 allocation.

27 27 2. Federal access and visitation grant moneys shall be
27 28 issued directly to private not-for-profit agencies that provide
27 29 services designed to increase compliance with the child access
27 30 provisions of court orders, including but not limited to
27 31 neutral visitation sites and mediation services.

Specifies the process for utilization of receipts from federal Access and Visitation Grants.

27 32 3. The appropriation made to the department for child
27 33 support services may be used throughout the fiscal year in the
27 34 manner necessary for purposes of cash flow management, and for
27 35 cash flow management purposes the department may temporarily
28 1 draw more than the amount appropriated, provided the amount

Permits the HHS to use the appropriation for child support recovery as necessary and draw more than appropriated if needed to solve any cash flow problems, provided the amount appropriated is not exceeded at the end of the fiscal year.

28 2 appropriated is not exceeded at the close of the fiscal year.

28 3 Sec. 11. HEALTH CARE TRUST FUND — MEDICAL ASSISTANCE —
 28 4 FY 2023-2024. Any funds remaining in the health care trust
 28 5 fund created in section 453A.35A for the fiscal year beginning
 28 6 July 1, 2023, and ending June 30, 2024, are appropriated to
 28 7 the department of health and human services to supplement
 28 8 the medical assistance program appropriations made in this
 28 9 division of this Act, for medical assistance reimbursement and
 28 10 associated costs, including program administration and costs
 28 11 associated with program implementation.

Appropriates the balance of the Health Care Trust Fund (HCTF) to the Medicaid Program for FY 2024.

DETAIL: It is estimated that there will be \$189,860,000 available for Medicaid in FY 2024. This is a decrease of \$10,800,000 compared to the FY 2023 estimate. The Fund consists of the revenues generated from the tax on cigarettes and tobacco products. The FY 2024 estimate was revised based on an estimate from the Department of Revenue prior to the December 14, 2022, Revenue Estimating Conference meeting.

28 12 Sec. 12. MEDICAID FRAUD FUND — MEDICAL ASSISTANCE — FY
 28 13 2023-2024. Any funds remaining in the Medicaid fraud fund
 28 14 created in section 249A.50 for the fiscal year beginning July
 28 15 1, 2023, and ending June 30, 2024, are appropriated to the
 28 16 department of health and human services to supplement the
 28 17 medical assistance appropriations made in this division of this
 28 18 Act, for medical assistance reimbursement and associated costs,
 28 19 including program administration and costs associated with
 28 20 program implementation.

Appropriates the balance of the Medicaid Fraud Fund (MFF) to the Medical Assistance (Medicaid) Program for FY 2024.

DETAIL: It is estimated that there will be \$150,000 available in FY 2024. This is no change compared to the FY 2023 estimate. The Fund consists of the revenues generated from penalties received as a result of prosecutions involving the DIAL and audits to ensure compliance with the Medicaid Program.

28 21 Sec. 13. MEDICAL ASSISTANCE. There is appropriated from the
 28 22 general fund of the state to the department of health and human
 28 23 services for the fiscal year beginning July 1, 2023, and ending
 28 24 June 30, 2024, the following amount, or so much thereof as is
 28 25 necessary, to be used for the purpose designated:
 28 26 For medical assistance program reimbursement and associated
 28 27 costs as specifically provided in the reimbursement
 28 28 methodologies in effect on June 30, 2023, except as otherwise
 28 29 expressly authorized by law, consistent with options under
 28 30 federal law and regulations, and contingent upon receipt of
 28 31 approval from the office of the governor of reimbursement for
 28 32 each abortion performed under the program:
 28 33 \$1,543,626,779

General Fund appropriation to the HHS for the Medicaid Program.

DETAIL: This is a net increase of \$33,499,391 compared to estimated FY 2023. The changes include:

- An increase of \$15,000,000 for Nursing Facility Rebasing to update Medicaid provider rates for the approximately 430 nursing facilities in Iowa.
- A decrease of \$609 due to restructuring the OCIO's Cybersecurity Office from fee-based funding to a General Fund appropriation.
- An increase of \$3,000,000 for a mental health service rate increase to reach an 85.00% benchmark.
- An increase of \$7,000,000 for mental health therapy provider rates.
- An increase of \$3,000,000 for substance abuse provider rates.
- An increase of \$5,500,000 for Home- and Community-Based Services (HCBS) waiver programs.

<p>28 34 1. Iowans support reducing the number of abortions 28 35 performed in our state. Funds appropriated under this section 29 1 shall not be used for abortions, unless otherwise authorized 29 2 under this section.</p>	<p>Specifies conditions that permit the Medicaid Program to reimburse providers for abortion services.</p>
<p>29 3 2. The provisions of this section relating to abortions 29 4 shall also apply to the Iowa health and wellness plan created 29 5 pursuant to chapter 249N.</p>	<p>Specifies that the policy on abortion also applies to the Iowa Health and Wellness Plan.</p>
<p>29 6 3. The department shall utilize not more than \$60,000 of 29 7 the funds appropriated in this section to continue the AIDS/HIV 29 8 health insurance premium payment program as established in 1992 29 9 Iowa Acts, Second Extraordinary Session, chapter 1001, section 29 10 409, subsection 6. Of the funds allocated in this subsection, 29 11 not more than \$5,000 may be expended for administrative 29 12 purposes.</p>	<p>Requires the HHS to use a maximum of \$60,000 of the funds appropriated for Medicaid to continue the AIDS/HIV Health Insurance Premium Payment Program as established during the 1992 General Assembly, Second Extraordinary Session. Requires that administrative costs be limited to \$5,000.</p> <p>DETAIL: This is no change compared to the estimated FY 2023 allocation.</p>
<p>29 13 4. Of the funds appropriated in this Act to the department 29 14 of health and human services for addictive disorders, \$950,000 29 15 shall be used for an integrated substance use disorder managed 29 16 care system. The department shall maintain the level of mental 29 17 health and substance use disorder treatment services provided 29 18 by the managed care contractors. The department shall take the 29 19 steps necessary to continue the federal waivers as necessary to 29 20 maintain the level of services.</p>	<p>Requires that \$950,000 of the Addictive Disorders appropriation to the HHS for Substance Abuse Grants be transferred to the Medicaid Program in the HHS for continuation of the Managed Substance Abuse Treatment Program.</p> <p>DETAIL: This is no change compared to the estimated FY 2023 allocation. The Managed Substance Abuse Treatment Program was funded for the first time in FY 1996.</p>
<p>29 21 5. The department shall aggressively pursue options for 29 22 providing medical assistance or other assistance to individuals 29 23 with special needs who become ineligible to continue receiving 29 24 services under the early and periodic screening, diagnostic, 29 25 and treatment program under the medical assistance program 29 26 due to becoming 21 years of age who have been approved for 29 27 additional assistance through the department's exception to 29 28 policy provisions, but who have health care needs in excess 29 29 of the funding available through the exception to policy 29 30 provisions.</p>	<p>Requires the HHS to aggressively pursue options for assisting special needs individuals who become ineligible for continued services under the Early and Periodic Screening, Diagnosis, and Treatment (EPSDT) Program as a result of turning 21 years of age. The individuals are to have been approved for additional assistance through the HHS exception to policy process but have health care needs exceeding available funding.</p>
<p>29 31 6. Of the funds appropriated in this section, up to 29 32 \$3,050,082 may be transferred to the field operations or 29 33 general administration appropriations in this division of this 29 34 Act for operational costs associated with Part D of the federal</p>	<p>Permits the HHS to transfer up to \$3,050,082 to Field Operations or General Administration for implementation costs of the new Medicare Part D prescription drug benefit and low-income subsidy application processes.</p>

29 35 Medicare Prescription Drug Improvement and Modernization Act
30 1 of 2003, Pub.L.No.108-173.

DETAIL: This is no change compared to the estimated FY 2023 allocation.

30 2 7. Of the funds appropriated in this section, up to \$442,100
30 3 may be transferred to the appropriation in this division of
30 4 this Act for health program operations to be used for clinical
30 5 assessment services and prior authorization of services.

Permits a maximum of \$442,100 of Medicaid funds to be transferred to clinical assessment services under Health Program Operations.

DETAIL: This is no change compared to the estimated FY 2023 allocation.

30 6 8. A portion of the funds appropriated in this section may
30 7 be transferred to the appropriations in this division of this
30 8 Act for general administration, health program operations, the
30 9 children's health insurance program, or field operations to be
30 10 used for the state match cost to comply with the payment error
30 11 rate measurement (PERM) program for both the medical assistance
30 12 and children's health insurance programs as developed by the
30 13 centers for Medicare and Medicaid services of the United States
30 14 department of health and human services to comply with the
30 15 federal Improper Payments Information Act of 2002, Pub.L.
30 16 No.107-300, and to support other reviews and quality control
30 17 activities to improve the integrity of these programs.

Permits the HHS to use a portion of the funds appropriated to carry out the Payment Error Rate Measurement (PERM) Program and other reviews and quality control activities. This continues the HHS's compliance with the federal [Improper Payments Information Act of 2002](#).

DETAIL: The PERM Program measures improper payments in Medicaid and the Children's Health Insurance Program (CHIP) and produces error rates for each program. Error rates are based on reviews of the fee-for-service (FFS), managed care, and eligibility components of Medicaid and CHIP in the fiscal year under review. It is important to note the error rate is not a "fraud rate" but simply a measurement of payments made that did not meet statutory, regulatory, or administrative requirements.

30 18 9. Of the funds appropriated in this section, a sufficient
30 19 amount is allocated to supplement the incomes of residents of
30 20 nursing facilities, intermediate care facilities for persons
30 21 with mental illness, and intermediate care facilities for
30 22 persons with an intellectual disability, with incomes of less
30 23 than \$50 in the amount necessary for the residents to receive a
30 24 personal needs allowance of \$50 per month pursuant to section
30 25 249A.30A.

Requires the HHS to provide residents of nursing facilities, intermediate care facilities for persons with mental illness, and intermediate care facilities for persons with an intellectual disability with a personal needs allowance of \$50 per month.

DETAIL: This is no change compared to the FY 2023 allowance.

30 26 10. One hundred percent of the nonfederal share of payments
30 27 to area education agencies that are medical assistance
30 28 providers for medical assistance-covered services provided to
30 29 medical assistance-covered children, shall be made from the
30 30 appropriation made in this section.

Allocates 100.00% of the nonfederal share of Medicaid funds to Area Education Agencies for services provided to Medicaid-covered children.

30 31 11. A portion of the funds appropriated in this section may

Specifies that a portion of the Medicaid funding may be transferred to Medical Contracts for administrative activities related to the Money

<p>30 32 be transferred to the appropriation in this division of this 30 33 Act for health program operations to be used for administrative 30 34 activities associated with the money follows the person 30 35 demonstration project.</p>	Follows the Person demonstration project.
<p>31 1 12. Of the funds appropriated in this section, \$349,011 31 2 shall be used for the administration of the health insurance 31 3 premium payment program, including salaries, support, 31 4 maintenance, and miscellaneous purposes.</p>	<p>Allocates \$349,011 to the Health Insurance Premium Payment Program.</p> <p>DETAIL: This is no change compared to the estimated FY 2023 allocation.</p>
<p>31 5 13. a. The department may increase the amounts allocated 31 6 for salaries, support, maintenance, and miscellaneous purposes 31 7 associated with the medical assistance program, as necessary, 31 8 to sustain cost management efforts. The department shall 31 9 report any such increase to the general assembly and the 31 10 department of management.</p>	Specifies that the HHS may increase the amounts allocated for salaries, support, maintenance, and miscellaneous purposes associated with the Medicaid Program. The HHS is required to report any increase to the General Assembly and the DOM.
<p>31 11 b. If the savings to the medical assistance program from 31 12 ongoing cost management efforts exceed the associated cost 31 13 for the fiscal year beginning July 1, 2023, the department 31 14 may transfer any savings generated for the fiscal year due 31 15 to medical assistance program cost management efforts to the 31 16 appropriation made in this division of this Act for health 31 17 program operations or general administration to defray the 31 18 costs associated with implementing the efforts.</p>	Specifies that if savings to the Medicaid Program for cost management efforts during FY 2024 exceed costs, the HHS may transfer any savings to the Medical Contracts or General Administration appropriations to defray the costs associated with implementation of cost management efforts.
<p>31 19 14. For the fiscal year beginning July 1, 2023, and ending 31 20 June 30, 2024, the replacement generation tax revenues required 31 21 to be deposited in the property tax relief fund pursuant to 31 22 section 437A.8, subsection 4, paragraph "d", and section 31 23 437A.15, subsection 3, paragraph "f", shall instead be credited 31 24 to and supplement the appropriation made in this section and 31 25 used for the allocations made in this section.</p>	<p>Requires the replacement generation tax revenues to be allocated to the Medicaid appropriation instead of being deposited into the Property Tax Relief Fund.</p> <p>DETAIL: There is no revenue anticipated from this tax. Under current law, a company that acquires a new electric power generating plant and has no operating property in Iowa is required to pay the replacement generation tax, which is credited to the Property Tax Relief Fund. The Duane Arnold Energy Center (near Cedar Rapids) was purchased by a Florida company with no other facilities in Iowa in 2006. The plant is in the process of shutting down, and FY 2022 will likely be the final year of revenue from this source.</p>
<p>31 26 15. a. Of the funds appropriated in this section, up 31 27 to \$50,000 may be transferred by the department to the</p>	Allows the HHS to transfer up to \$50,000 for administrative expenses and 1.00 FTE position related to the implementation of children's

<p>31 28 appropriation made in this division of this Act to the 31 29 department for the same fiscal year for general administration 31 30 to be used for associated administrative expenses and for not 31 31 more than 1.00 full-time equivalent position, in addition to 31 32 those authorized for the same fiscal year, to be assigned to 31 33 implementing the children's mental health home project.</p>	<p>mental health homes. DETAIL: This is no change compared to the estimated FY 2023 allocation.</p>
<p>31 34 b. Of the funds appropriated in this section, up to \$400,000 31 35 may be transferred by the department to the appropriation made 32 1 to the department in this division of this Act for the same 32 2 fiscal year for Medicaid program-related general administration 32 3 planning and implementation activities. The funds may be used 32 4 for contracts or for personnel in addition to the amounts 32 5 appropriated for and the positions authorized for general 32 6 administration for the fiscal year.</p>	<p>Permits the HHS to transfer up to \$400,000 for Medicaid program-related general administration planning and implementation activities, including but not limited to contracts or personnel. DETAIL: This is no change compared to the estimated FY 2023 allocation.</p>
<p>32 7 c. Of the funds appropriated in this section, up to 32 8 \$3,000,000 may be transferred by the department to the 32 9 appropriations made in this division of this Act for the 32 10 same fiscal year for general administration or health 32 11 program operations to be used to support the development 32 12 and implementation of standardized assessment tools for 32 13 persons with mental illness, an intellectual disability, a 32 14 developmental disability, or a brain injury.</p>	<p>Permits the HHS to transfer up to \$3,000,000 for the implementation of standardized assessment tools for persons with mental illness, intellectual disabilities, developmental disabilities, or brain injuries. DETAIL: This is no change compared to the estimated FY 2023 allocation.</p>
<p>32 15 16. Of the funds appropriated in this section, \$150,000 32 16 shall be used for lodging expenses associated with care 32 17 provided at the university of Iowa hospitals and clinics for 32 18 patients with cancer whose travel distance is 30 miles or more 32 19 and whose income is at or below 200 percent of the federal 32 20 poverty level as defined by the most recently revised poverty 32 21 income guidelines published by the United States department of 32 22 health and human services. The department of health and human 32 23 services shall establish the maximum number of overnight stays 32 24 and the maximum rate reimbursed for overnight lodging, which 32 25 may be based on the state employee rate established by the 32 26 department of administrative services. The funds allocated in 32 27 this subsection shall not be used as nonfederal share matching 32 28 funds.</p>	<p>Allocates \$150,000 to the UIHC to be used for lodging expenses for cancer patients with income below 200.00% of the FPL who travel 30 miles or more to receive treatment. DETAIL: This is no change compared to the estimated FY 2023 allocation.</p>
<p>32 29 17. Of the funds appropriated in this section, up to 32 30 \$3,383,880 shall be used for administration of the state family</p>	<p>Allocates \$3,383,880 to administer the State Family Planning Services Program. Permits up to \$200,000 to be used for administrative</p>

32 31 planning services program pursuant to section 217.41B, and
 32 32 of this amount, the department may use up to \$200,000 for
 32 33 administrative expenses.

expenses.

DETAIL: This is no change compared to the estimated FY 2023 allocation.

32 34 18. Of the funds appropriated in this section, \$1,545,530
 32 35 shall be used and may be transferred to other appropriations
 33 1 in this division of this Act as necessary to administer the
 33 2 provisions in the division of this Act relating to Medicaid
 33 3 program administration.

Allocates \$1,545,530 for activities related to Medicaid Program administration.

DETAIL: This is no change compared to the estimated FY 2023 allocation.

33 4 19. The department shall comply with the centers for
 33 5 Medicare and Medicaid services' guidance related to Medicaid
 33 6 program and children's health insurance program maintenance
 33 7 of effort provisions, including eligibility standards,
 33 8 methodologies, procedures, and continuous enrollment, to
 33 9 receive the enhanced federal medical assistance percentage
 33 10 under section 6008(b) of the federal Families First Coronavirus
 33 11 Response Act, Pub.L. No.116-127 and section 5131 of the
 33 12 federal Consolidated Appropriations Act, 2023, Pub.L. No.
 33 13 117-328. The department shall utilize and implement all tools,
 33 14 processes, and resources available to expediently return to
 33 15 normal eligibility and enrollment operations in compliance with
 33 16 federal guidance and expectations.

Requires the HHS to comply with the Centers for Medicare and Medicaid Services (CMS) guidance related to receiving the 6.20% enhanced Federal Medical Assistance Percentage (FMAP) under the [Families First Coronavirus Response Act](#) and return to normal eligibility and enrollment operations as soon as possible.

DETAIL: As a condition of receiving the enhanced FMAP, the State was not allowed to disenroll anyone from Medicaid during the national emergency caused by COVID-19, with few exceptions.

33 17 20. A portion of the funds appropriated in this section
 33 18 may be transferred to the appropriation made in this division
 33 19 of this Act for the children's health insurance program,
 33 20 if the children's health insurance program appropriation
 33 21 is insufficient to cover the designated purposes of that
 33 22 appropriation.

Allows the HHS to transfer funds from the Medicaid appropriation to the CHIP appropriation if the CHIP appropriation has insufficient funds.

33 23 21. Notwithstanding any provision to the contrary, of the
 33 24 funds appropriated in this section, \$13,000,000 shall be used
 33 25 to increase reimbursement rates for mental health and substance
 33 26 use disorder providers in accordance with a methodology
 33 27 determined by the department. Of the amount allocated
 33 28 under this subsection, \$7,000,000 shall be used to increase
 33 29 reimbursement rates for individual mental health therapy
 33 30 providers, \$3,000,000 shall be used to increase reimbursement
 33 31 rates for mental health providers, and \$3,000,000 shall be used

Allocates \$13,000,000 to increase reimbursement rates for mental health and substance use disorder providers. These funds are to be used for the following purposes:

- \$7,000,000 to increase reimbursement rates for individual mental health therapy providers.
- \$3,000,000 to increase reimbursement rates for all mental health providers.
- \$3,000,000 to increase reimbursement rates for substance use disorder providers.

33 32 to increase reimbursement rates for substance use disorder
33 33 providers.

DETAIL: This is a new allocation for FY 2024.

33 34 22. Of the funds appropriated in this section, \$5,500,000
33 35 shall be used to maintain the reimbursement rates of eligible
34 1 home and community-based services providers at the rates
34 2 in effect on June 30, 2023, and to reduce the home and
34 3 community-based services intellectual disabilities waiver
34 4 waiting list to the extent possible.

Allocates \$5,500,000 to maintain reimbursement rates for HCBS providers at the rate in effect on June 30, 2023, and reduce the HCBS intellectual disabilities waiver waiting list.

DETAIL: This is a new allocation for FY 2024

34 5 Sec. 14. HEALTH PROGRAM OPERATIONS. There is appropriated
34 6 from the general fund of the state to the department of health
34 7 and human services for the fiscal year beginning July 1, 2023,
34 8 and ending June 30, 2024, the following amount, or so much
34 9 thereof as is necessary, to be used for the purpose designated:
34 10 For health program operations:
34 11 \$ 17,446,067

General Fund appropriation to Health Program Operations.

DETAIL: This is a decrease of \$276 compared to estimated FY 2023 due to restructuring the OCIO's Cybersecurity Office from fee-based funding to a General Fund appropriation.

34 12 1. The department of inspections, appeals, and licensing
34 13 shall provide all state matching funds for survey and
34 14 certification activities performed by the department of
34 15 inspections, appeals, and licensing. The department of health
34 16 and human services is solely responsible for distributing the
34 17 federal matching funds for such activities.

Requires the DIAL to provide the State matching funds for survey and certification activities, and requires the HHS to distribute the federal matching funds.

34 18 2. Of the funds appropriated in this section, \$50,000 shall
34 19 be used for continuation of home and community-based services
34 20 waiver quality assurance programs, including the review and
34 21 streamlining of processes and policies related to oversight and
34 22 quality management to meet state and federal requirements.

Allocates \$50,000 for the HCBS Waiver Quality Assurance Program to review and streamline processes and policies related to oversight.

DETAIL: This is no change compared to the estimated FY 2023 allocation. The Program reviews policies related to oversight and quality management to meet State and federal requirements.

34 23 3. Of the amount appropriated in this section, up to
34 24 \$200,000 may be transferred to the appropriation for general
34 25 administration in this division of this Act to be used for
34 26 additional full-time equivalent positions in the development
34 27 of key health initiatives such as development and oversight
34 28 of managed care programs and development of health strategies
34 29 targeted toward improved quality and reduced costs in the
34 30 Medicaid program.

Permits up to \$200,000 to be transferred to the HHS General Administration appropriation to hire additional FTE positions to implement cost containment and managed care oversight initiatives.

DETAIL: This is no change compared to the estimated FY 2023 allocation.

34 31 4. Of the funds appropriated in this section, \$1,000,000
 34 32 shall be used for planning and development of a phased-in
 34 33 program to provide a dental home for children.

Allocates \$1,000,000 to the I-Smile Program.

DETAIL: This is no change compared to the estimated FY 2023 allocation. The I-Smile Dental Home Initiative helps Iowa's children connect with dental services.

34 34 5. a. Of the funds appropriated in this section, \$188,000
 34 35 shall be credited to the autism support program fund created
 35 1 in section 225D.2 to be used for the autism support program
 35 2 created in chapter 225D, with the exception of the following
 35 3 amount of this allocation which shall be used as follows:

Allocates \$188,000 to the Autism Support Program.

DETAIL: This is no change compared to the estimated FY 2023 allocation. This Program was created in FY 2014, and the funds are to be used to provide applied behavioral analysis and other treatment for children who do not qualify for Medicaid or autism spectrum disorder coverage under private insurance.

35 4 b. Of the funds allocated in this subsection, \$25,000 shall
 35 5 be used for the public purpose of continuation of a grant to
 35 6 a nonprofit provider of child welfare services that has been
 35 7 in existence for more than 115 years, is located in a county
 35 8 with a population between 220,000 and 250,000 according to the
 35 9 2020 federal decennial census, is licensed as a psychiatric
 35 10 medical institution for children, and provides school-based
 35 11 programming, to be used for support services for children with
 35 12 autism spectrum disorder and their families.

Allocates \$25,000 to Four Oaks for autism spectrum disorder services.

DETAIL: This is no change compared to the estimated FY 2023 allocation.

35 13 Sec. 15. STATE SUPPLEMENTARY ASSISTANCE.
 35 14 1. There is appropriated from the general fund of the state
 35 15 to the department of health and human services for the fiscal
 35 16 year beginning July 1, 2023, and ending June 30, 2024, the
 35 17 following amount, or so much thereof as is necessary, to be
 35 18 used for the purpose designated:
 35 19 For the state supplementary assistance program:
 35 20 \$ 7,349,002

General Fund appropriation to the HHS for State Supplementary Assistance.

DETAIL: This is no change compared to estimated FY 2023.

35 21 2. The department shall increase the personal needs
 35 22 allowance for residents of residential care facilities by the
 35 23 same percentage and at the same time as federal supplemental
 35 24 security income and federal social security benefits are
 35 25 increased due to a recognized increase in the cost of living.
 35 26 The department may adopt emergency rules to implement this
 35 27 subsection.

Requires the HHS to increase the personal needs allowance of residential care facility residents at the same rate and time as federal Supplemental Security Income (SSI) and Social Security benefits are increased. Permits the HHS to adopt emergency rules for implementation.

35 28 3. If during the fiscal year beginning July 1, 2023,
 35 29 the department projects that state supplementary assistance
 35 30 expenditures for a calendar year will not meet the federal
 35 31 pass-through requirement specified in Tit.XVI of the federal
 35 32 Social Security Act, section 1618, as codified in 42 U.S.C.
 35 33 §1382g, the department may take actions including but not
 35 34 limited to increasing the personal needs allowance for
 35 35 residential care facility residents and making programmatic
 36 1 adjustments or upward adjustments of the residential care
 36 2 facility or in-home health-related care reimbursement rates
 36 3 prescribed in this division of this Act to ensure that federal
 36 4 requirements are met. In addition, the department may make
 36 5 other programmatic and rate adjustments necessary to remain
 36 6 within the amount appropriated in this section while ensuring
 36 7 compliance with federal requirements. The department may adopt
 36 8 emergency rules to implement the provisions of this subsection.

Permits the HHS to adjust rates for State Supplementary Assistance to meet federal maintenance-of-effort requirements. Permits the HHS to adopt emergency rules for implementation.

36 9 4. Notwithstanding section 8.33, moneys appropriated in
 36 10 this section that remain unencumbered or unobligated at the
 36 11 close of the fiscal year shall not revert but shall remain
 36 12 available for expenditure for the purposes designated,
 36 13 including for liability amounts associated with the SNAP
 36 14 payment error rate, until the close of the succeeding fiscal
 36 15 year.

CODE: Allows any unexpended funds appropriated for the State Supplementary Assistance Program for FY 2024 to remain available for FY 2025.

36 16 Sec. 16. CHILDREN'S HEALTH INSURANCE PROGRAM.

36 17 1. There is appropriated from the general fund of the state
 36 18 to the department of health and human services for the fiscal
 36 19 year beginning July 1, 2023, and ending June 30, 2024, the
 36 20 following amount, or so much thereof as is necessary, to be
 36 21 used for the purpose designated:
 36 22 For maintenance of the healthy and well kids in Iowa (Hawki)
 36 23 program pursuant to chapter 514I, including supplemental dental
 36 24 services, for receipt of federal financial participation under
 36 25 Tit.XXI of the federal Social Security Act, which creates the
 36 26 children's health insurance program:
 36 27 \$ 38,661,688

General Fund appropriation to the HHS for the Children's Health Insurance Program, also known as the Healthy and Well Kids in Iowa (Hawki) Program.

DETAIL: This is no change compared to estimated FY 2023.

36 28 2. Of the funds appropriated in this section, a sufficient
 36 29 amount is allocated for continuation of the contract for
 36 30 outreach.

Requires the HHS to allocate a sufficient amount of funding for the continuation of an outreach contract.

DETAIL: This removes the specific FY 2023 allocation of \$158,850.

<p>36 31 3. A portion of the funds appropriated in this section may 36 32 be transferred to the appropriations made in this division of 36 33 this Act for field operations or health program operations 36 34 to be used for the integration of Hawki program eligibility, 36 35 payment, and administrative functions under the purview of the 37 1 department of health and human services, including for the 37 2 Medicaid management information system upgrade.</p>	<p>Allows a portion of the funds in this Section to be transferred to the Field Operations or Medical Contracts appropriations to be used for administrative purposes.</p>
<p>37 3 Sec. 17. CHILD CARE ASSISTANCE. There is appropriated from 37 4 the general fund of the state to the department of health and 37 5 human services for the fiscal year beginning July 1, 2023, and 37 6 ending June 30, 2024, the following amount, or so much thereof 37 7 as is necessary, to be used for the purpose designated: 37 8 For child care programs: 37 9 \$ 64,223,730</p>	<p>General Fund appropriation to the HHS for CCA.</p> <p>DETAIL: This is an increase of \$23,406,799 as a result of the ECI Program merging into the CCA appropriation. Funding for the ECI Program was previously appropriated from the Education Appropriations Act.</p>
<p>37 10 1. Of the funds appropriated in this section, \$34,966,931 37 11 shall be used for state child care assistance in accordance 37 12 with section 237A.13.</p>	<p>Allocates \$34,966,931 to the State CCA Program.</p> <p>DETAIL: This is no change compared to the estimated FY 2023 allocation.</p>
<p>37 13 2. Nothing in this section shall be construed or is 37 14 intended as or shall imply a grant of entitlement for services 37 15 to persons who are eligible for assistance due to an income 37 16 level consistent with the waiting list requirements of section 37 17 237A.13. Any state obligation to provide services pursuant to 37 18 this section is limited to the extent of the funds appropriated 37 19 in this section.</p>	<p>Specifies that assistance from the CCA Program is not an entitlement and the State's obligation to provide services is limited to the funds available.</p>
<p>37 20 3. A list of the registered and licensed child care 37 21 facilities operating in the area served by a child care 37 22 resource and referral service shall be made available to the 37 23 families receiving state child care assistance in that area.</p>	<p>Requires a list of the registered and licensed child care facilities to be made available by the Child Care Resource and Referral Service for families receiving assistance under the CCA Program.</p>
<p>37 24 4. Of the funds appropriated in this section, \$29,256,799 37 25 shall be deposited in the school ready children grants account 37 26 of the early childhood Iowa fund created in section 256I.11, 37 27 and shall be allocated as follows for the fiscal year beginning 37 28 July 1, 2023:</p>	<p>Allocates \$29,256,799 for deposit in the School Ready Children Grants Account of the ECI Fund for General Aid.</p> <p>DETAIL: This is a new allocation for the HHS. Funding was previously appropriated from the Education Appropriations Act. This is no change compared to estimated FY 2023. The funds are distributed to local ECI Area Boards in addition to the following four allocations:</p>

- Funding for technical assistance through the ECI Office within the DOM and to provide skill development and support for training the ECI State Board.
- Funding to local ECI Area Boards to improve the quality of early care, health, and education programs.
- Funding to support professional development and training activities for people working in early care, health, and education.
- Funding for the State's early childhood database system.
- Funding for community-based early childhood programs

37 29 a. Of the amount deposited under this subsection, not
 37 30 more than \$265,950 is allocated for the early childhood Iowa
 37 31 program and other technical assistance activities. Moneys
 37 32 allocated under this lettered paragraph may be used by the
 37 33 early childhood Iowa state board for the purpose of skills
 37 34 development and support for ongoing training of staff. The
 37 35 early childhood Iowa state board may reserve a portion of the
 38 1 allocation under paragraph "b", not to exceed \$88,650, for
 38 2 the technical assistance expenses of the early childhood Iowa
 38 3 program, including the reimbursement of staff. However, except
 38 4 as otherwise provided in this subsection, moneys shall not be
 38 5 used for additional staff or for the reimbursement of staff.

Specifies the following uses for the moneys deposited in the School Ready Children Grants Account for FY 2024:

- Allocates a maximum of \$265,950 for the ECI Office and other technical assistance activities. This is no change compared to the FY 2023 allocation.
- Permits funds allocated under this provision to be used by the ECI State Board for the purpose of skills development and support for ongoing training of staff.
- Specifies that up to \$88,650 of the allocation may be used for the technical assistance expenses of the ECI State Board, including the reimbursement of staff members.
- Prohibits the use of funds for additional staff or for the reimbursement of staff.

38 6 b. Of the amount deposited under this subsection,
 38 7 \$2,318,018 shall be used for efforts to improve the quality
 38 8 of early care, health, and education programs. Moneys
 38 9 allocated pursuant to this lettered paragraph may be used
 38 10 for additional staff and for the reimbursement of staff in
 38 11 early childhood Iowa areas and for local quality improvement
 38 12 efforts. The early childhood Iowa state board shall determine
 38 13 the methodology to make the most productive use of the funding,
 38 14 which may include use of the distribution formula, grants, or
 38 15 other means.

Allocates \$2,318,018 to be used by local ECI areas to improve the quality of early care, health, and education programs.

DETAIL: This is a new allocation for the HHS. Funding was previously appropriated from the Education Appropriations Act. This is no change in funding compared to the funds appropriated for this purpose for estimated FY 2023.

38 16 c. Of the amount deposited under this subsection, \$825,030
 38 17 shall be used for support of professional development and
 38 18 training activities for persons working in early care,
 38 19 health, and education by the early childhood Iowa state

Allocates \$825,030 to the ECI State Board to provide child care and preschool providers with high-quality professional development in collaboration with the Professional Development Component Groups of the ECI Stakeholders Alliance and local ECI Area Boards.

38 20 board in collaboration with the professional development
 38 21 component group maintained by the early childhood Iowa
 38 22 stakeholders alliance pursuant to section 256I.12, and the
 38 23 early childhood Iowa area boards. Expenditures shall be
 38 24 limited to professional development and training activities,
 38 25 and strategic plan implementation staff as agreed upon by the
 38 26 parties participating in the collaboration as approved by the
 38 27 early childhood Iowa state board.

Expenditures will be limited to professional development and training activities agreed upon by the parties participating in the collaboration as approved by the ECI State Board.

DETAIL: This is a new allocation for the HHS. Funding was previously appropriated from the Education Appropriations Act. This is no change in funding compared to the funds appropriated for this purpose for estimated FY 2023.

38 28 d. Of the amount deposited under this subsection, \$200,000
 38 29 shall be used to invest in the state's early childhood database
 38 30 system that integrates state administrative data to provide
 38 31 results that inform and improve the early childhood system of
 38 32 programs and services in the state.

Allocates \$200,000 to the ECI State Board to be invested in the State's early childhood database system, which integrates State administrative data to provide results that inform and improve the early childhood system or programs and services in the State.

DETAIL: This is no change compared to the estimated FY 2023 allocation.

38 33 e. Of the amount deposited under this subsection,
 38 34 \$5,850,000 shall be distributed for funding of community-based
 38 35 early childhood programs targeted to children from birth
 39 1 through five years of age developed by early childhood Iowa
 39 2 areas in accordance with approved community plans as provided
 39 3 in section 256I.8. Up to \$65,000 of the funds allocated in
 39 4 this paragraph may be used for additional technical assistance
 39 5 staff.

Allocates \$5,850,000 to be transferred to the Early Childhood Programs Grants Account in the ECI Fund, of which up to \$65,000 may be used for additional technical assistance staff.

DETAIL: This is no change compared to the estimated FY 2023 allocation.

39 6 5. The department may use any of the funds appropriated
 39 7 in this section as a match to obtain federal funds for use in
 39 8 expanding child care assistance and related programs. For
 39 9 the purpose of expenditures of state and federal child care
 39 10 funding, funds shall be considered obligated at the time
 39 11 expenditures are projected or are allocated to the department's
 39 12 service areas. Projections shall be based on current and
 39 13 projected caseload growth, current and projected provider
 39 14 rates, staffing requirements for eligibility determination
 39 15 and management of program requirements including data systems
 39 16 management, staffing requirements for administration of the
 39 17 program, contractual and grant obligations and any transfers
 39 18 to other state agencies, and obligations for decategorization
 39 19 or innovation projects.

Permits funds appropriated for CCA to be used as matching funds for federal grants for the expansion of related programs. Specifies that funds are obligated when expenditures are projected or allocated to the HHS service areas.

39 20 6. A portion of the state match for the federal child care

Requires a portion of the State match for the federal Child Care and

39 21 and development block grant shall be provided as necessary to
 39 22 meet federal matching funds requirements through the state
 39 23 general fund appropriation made for child development grants
 39 24 and other programs for at-risk children in section 279.51.

Development Block Grant to be provided from the State appropriation for child development grants and other programs for at-risk children as necessary to meet federal matching requirements.

39 25 7. If a uniform reduction ordered by the governor under
 39 26 section 8.31 or other operation of law, transfer, or federal
 39 27 funding reduction reduces the appropriation made in this
 39 28 section for the fiscal year, the percentage reduction in the
 39 29 amount paid out to or on behalf of the families participating
 39 30 in the state child care assistance program shall be equal to or
 39 31 less than the percentage reduction made for any other purpose
 39 32 payable from the appropriation made in this section and the
 39 33 federal funding relating to it. The percentage reduction to
 39 34 the other allocations made in this section shall be the same as
 39 35 the uniform reduction ordered by the governor or the percentage
 40 1 change of the federal funding reduction, as applicable. If
 40 2 there is an unanticipated increase in federal funding provided
 40 3 for state child care services, the entire amount of the
 40 4 increase, except as necessary to meet federal requirements
 40 5 including quality set asides, shall be used for state child
 40 6 care assistance payments. If the appropriations made for
 40 7 purposes of the state child care assistance program for the
 40 8 fiscal year are determined to be insufficient, it is the intent
 40 9 of the general assembly to appropriate sufficient funding for
 40 10 the fiscal year in order to avoid establishment of waiting list
 40 11 requirements.

Specifies the following related to CCA Program operations:

- Any reductions to the CCA appropriation, either State or federal, must be applied in an equal percentage across all operating areas of the CCA Program before a reduction to service payments is made. The reduction for payable services must be equal to or less than the reduction for other items.
- Any unanticipated increase in federal funding must be used only for the CCA Program.
- It is the intent of the General Assembly to provide sufficient funding for the Program in FY 2024 to avoid the establishment of a waiting list.

40 12 8. Notwithstanding section 8.33, moneys advanced for
 40 13 purposes of the programs developed by early childhood Iowa
 40 14 areas, advanced for purposes of wraparound child care, or
 40 15 received from the federal appropriations made for the purposes
 40 16 of this section that remain unencumbered or unobligated at the
 40 17 close of the fiscal year shall not revert to any fund but shall
 40 18 remain available for expenditure for the purposes designated
 40 19 until the close of the succeeding fiscal year.

CODE: Allows any unexpended funds advanced for the programs developed by ECI areas, advanced for wraparound child care, or received from federal appropriations for CCA to carry forward for expenditure in FY 2025.

40 20 Sec. 18. JUVENILE INSTITUTION. There is appropriated from
 40 21 the general fund of the state to the department of health and
 40 22 human services for the fiscal year beginning July 1, 2023, and
 40 23 ending June 30, 2024, the following amounts, or so much thereof
 40 24 as is necessary, to be used for the purposes designated:

General Fund appropriation to the State Training School at Eldora.

DETAIL: This is a decrease of \$38,360 and no change in FTE

40 25 1. a. For operation of the state training school at Eldora
 40 26 and for salaries, support, maintenance, and miscellaneous
 40 27 purposes, and for not more than the following full-time
 40 28 equivalent positions:
 40 29 \$ 17,568,511
 40 30 FTEs 207.00

positions compared to estimated FY 2023. The appropriation decrease is due to restructuring the OCIO's Cybersecurity Office from fee-based funding to a General Fund appropriation.

40 31 b. Of the funds appropriated in this subsection, \$91,000
 40 32 shall be used for distribution to licensed classroom teachers
 40 33 at this and other institutions under the control of the
 40 34 department of health and human services based upon the average
 40 35 student yearly enrollment at each institution as determined by
 41 1 the department.

Allocates \$91,000 for licensed classroom teachers in State institutions.

DETAIL: This is no change compared to the estimated FY 2023 allocation.

41 2 2. A portion of the moneys appropriated in this section
 41 3 shall be used by the state training school at Eldora for
 41 4 grants for adolescent pregnancy prevention activities at the
 41 5 institution in the fiscal year beginning July 1, 2023.

Requires a portion of the funds appropriated for the Eldora State Training School to be used for pregnancy prevention activities in FY 2023.

41 6 3. Of the funds appropriated in this subsection, \$212,000
 41 7 shall be used by the state training school at Eldora for a
 41 8 substance use disorder treatment program at the institution for
 41 9 the fiscal year beginning July 1, 2023.

Allocates \$212,000 for a substance use disorder treatment program at Eldora State Training School.

DETAIL: This is no change compared to the estimated FY 2023 allocation.

41 10 4. Notwithstanding section 8.33, moneys appropriated in
 41 11 this section that remain unencumbered or unobligated at the
 41 12 close of the fiscal year shall not revert but shall remain
 41 13 available for expenditure for the purposes designated until the
 41 14 close of the succeeding fiscal year.

CODE: Allows any unexpended funds appropriated for FY 2024 to remain available for FY 2025.

41 15 Sec. 19. CHILD AND FAMILY SERVICES.

General Fund appropriation for Child and Family Services.

41 16 1. There is appropriated from the general fund of the state
 41 17 to the department of health and human services for the fiscal
 41 18 year beginning July 1, 2023, and ending June 30, 2024, the
 41 19 following amount, or so much thereof as is necessary, to be
 41 20 used for the purpose designated:
 41 21 For child and family services:
 41 22 \$ 79,027,794

DETAIL: This is a net decrease of \$14,543,883 compared to estimated FY 2023. The changes include:

- A decrease of \$15,543,000 resulting from the transfer of the funding for court-ordered services and graduated sanctions to the Judicial Branch.
- An increase of \$1,000,000 for qualified residential treatment programs to address a projected shortfall in future fiscal years.
- A decrease of \$883 due to restructuring the OCIO's

PG LN	GA:90 SF561	Explanation
		Cybersecurity Office from fee-based funding to a General Fund appropriation.
41 23 41 24 41 25 41 26 41 27 41 28 41 29 41 30 41 31 41 32	2. The department may transfer funds appropriated in this section as necessary to pay the nonfederal costs of services reimbursed under the medical assistance program, the state child care assistance program, or FIP which are provided to children who would otherwise receive services paid under the appropriation in this section. The department may transfer funds appropriated in this section to the appropriations made in this division of this Act for general administration and for field operations for resources necessary to implement and operate the services funded in this section.	Permits the HHS to transfer funds appropriated for Child and Family Services to Medicaid, the FIP, General Administration, or Field Operations to pay for costs associated with child welfare services under these appropriations.
41 33 41 34 41 35	3. Of the funds appropriated in this section, up to \$40,500,000 is allocated for group foster care maintenance and services.	Allocates up to \$40,500,000 for group foster care services and maintenance costs. DETAIL: This is no change compared to the estimated FY 2023 allocation.
42 1 42 2 42 3 42 4 42 5 42 6 42 7	4. In accordance with the provisions of section 232.188, the department shall continue the child welfare and juvenile justice funding initiative during fiscal year 2023-2024. Of the funds appropriated in this section, \$1,717,000 is allocated specifically for expenditure for fiscal year 2023-2024 through the decategorization services funding pools and governance boards established pursuant to section 232.188.	Allocates \$1,717,000 for decategorization services funding pools and governance boards. DETAIL: This is no change compared to the estimated FY 2023 allocation.
42 8 42 9 42 10 42 11 42 12	5. A portion of the funds appropriated in this section may be used for emergency family assistance to provide other resources required for a family participating in a family preservation or reunification project or successor project to stay together or to be reunified.	Permits funds to be used for emergency family assistance under specified conditions.
42 13 42 14 42 15 42 16	6. Of the funds appropriated in this section, a sufficient amount is allocated for shelter care and the child welfare emergency services contracting implemented to provide for or prevent the need for shelter care.	Permits a sufficient amount of funds to be used for shelter care and child welfare emergency services. DETAIL: This is no change compared to FY 2023. The language that capped the amount to be used for these services was removed in FY 2020.

42 17 7. Federal funds received by the state during the fiscal
 42 18 year beginning July 1, 2023, as the result of the expenditure
 42 19 of state funds appropriated during a previous state fiscal
 42 20 year for a service or activity funded under this section are
 42 21 appropriated to the department to be used as additional funding
 42 22 for services and purposes provided for under this section.
 42 23 Notwithstanding section 8.33, moneys received in accordance
 42 24 with this subsection that remain unencumbered or unobligated at
 42 25 the close of the fiscal year shall not revert to any fund but
 42 26 shall remain available for the purposes designated until the
 42 27 close of the succeeding fiscal year.

CODE: Requires federal funds received in FY 2024 as a result of the expenditure of State funds in a previous year to be used for child welfare services. Allows any unexpended funds to remain available for expenditure through FY 2025.

42 28 8. a. Of the funds appropriated in this section, up to
 42 29 \$748,000 is allocated for the payment of the expenses of
 42 30 court-ordered services provided to children who are under the
 42 31 supervision of the department, which expenses are a charge upon
 42 32 the state pursuant to section 232.141, subsection 4.

Allocates up to \$748,000 for court-ordered services provided to children who are under the supervision of the HHS.

DETAIL: This is no change compared to the estimated FY 2023 allocation.

NOTE: A separate allocation for court-ordered services of \$3,290,000 has been transferred to the Judicial Branch.

42 33 b. Notwithstanding section 232.141 or any other
 42 34 provision of law to the contrary, the amounts allocated in
 42 35 this subsection shall be distributed as determined by the
 43 1 department. The department shall make the determination of the
 43 2 distribution amounts on or before June 15, 2023.

CODE: Requires allocations to be distributed as determined by the HHS by June 15, 2023.

43 3 c. Notwithstanding chapter 232 or any other provision
 43 4 of law to the contrary, a district or juvenile court shall
 43 5 not order any service which is a charge upon the state
 43 6 pursuant to section 232.141 if the court-ordered services
 43 7 distribution amount is insufficient to pay for the service.
 43 8 The department shall encourage use of the funds allocated in
 43 9 this subsection such that there are sufficient funds to pay
 43 10 for all court-related services during the entire year. The
 43 11 department shall attempt to anticipate potential surpluses
 43 12 and shortfalls in the distribution amounts and shall transfer
 43 13 distribution amounts as prudent.

CODE: Prohibits a district or juvenile court from ordering any service that is a charge to the State if there are insufficient funds to pay for the service. Requires the Chief Juvenile Court Officer to use the funds in a manner that will cover the entire fiscal year, and permits funds to be transferred between districts.

43 14 d. Notwithstanding any provision of law to the contrary,
 43 15 a district or juvenile court shall not order a county to pay

CODE: Requires a district or juvenile court not to order a county to pay for any service provided to a juvenile for expenses relating to transport, examinations, and care or treatment ordered by the court

43 16 for any service provided to a juvenile pursuant to an order
 43 17 entered under chapter 232 which is a charge upon the state
 43 18 under section 232.141, subsection 4.

under Iowa Code chapter [232](#).

43 19 9. Of the funds appropriated in this section, \$1,658,000
 43 20 shall be used for the child protection center grant program for
 43 21 child protection centers located in Iowa in accordance with
 43 22 section 135.118. The grant amounts under the program shall be
 43 23 equalized so that each center receives a uniform base amount of
 43 24 \$245,000, and so that the remaining funds are awarded through
 43 25 a funding formula based upon the volume of children served.
 43 26 To increase access to child protection center services for
 43 27 children in rural areas, the funding formula for the awarding
 43 28 of the remaining funds shall provide for the awarding of an
 43 29 enhanced amount to eligible grantees to develop and maintain
 43 30 satellite centers in underserved regions of the state.

Requires \$1,658,000 to be used for the Child Protection Center (CPC) Grant Program. Each CPC will receive \$245,000, and the remaining funds will be distributed through a funding formula based on the volume of children served. Requires the funding formula to provide for the awarding of an enhanced amount to eligible grantees to develop and maintain satellite centers in underserved regions of the state.

DETAIL: This is no change compared to the estimated FY 2023 allocation.

43 31 10. Of the funds appropriated in this section, up to
 43 32 \$4,025,000 is allocated for the preparation for adult living
 43 33 program pursuant to section 234.46.

Allocates \$4,025,000 to the Preparation for Adult Living (PAL) Program.

DETAIL: This is no change compared to the estimated FY 2023 allocation.

43 34 11. Of the funds appropriated in this section, \$227,000
 43 35 shall be used for the public purpose of continuing a grant to a
 44 1 nonprofit human services organization, providing services to
 44 2 individuals and families in multiple locations in southwest
 44 3 Iowa and Nebraska for support of a project providing immediate,
 44 4 sensitive support and forensic interviews, medical exams, needs
 44 5 assessments, and referrals for victims of child abuse and their
 44 6 nonoffending family members.

Allocates \$227,000 to Project Harmony for support of victims of child abuse and their nonoffending family members.

DETAIL: This is no change compared to the estimated FY 2023 allocation.

44 7 12. Of the funds appropriated in this section, \$300,000
 44 8 is allocated for the foster care youth council approach of
 44 9 providing a support network to children placed in foster care.

Allocates \$300,000 to provide support for foster care youth councils.

DETAIL: This is no change compared to the estimated FY 2023 allocation.

44 10 13. Of the funds appropriated in this section, \$202,000 is
 44 11 allocated for use pursuant to section 235A.1 for continuation
 44 12 of the initiative to address child sexual abuse implemented
 44 13 pursuant to 2007 Iowa Acts, chapter 218, section 18, subsection

Allocates \$202,000 to an initiative to address child sexual abuse.

DETAIL: This is no change compared to the estimated FY 2023 allocation.

44 14 21.	
44 15 14. Of the funds appropriated in this section, \$630,000 is 44 16 allocated for the community partnership for child protection 44 17 sites.	Allocates \$630,000 to the Community Partnerships for Protecting Children (CPPC) sites. DETAIL: This is no change compared to the estimated FY 2023 allocation. The CPPC sites work to prevent child abuse and neglect, safely decrease the number of out-of-home placements, and promote timely reunification when children are placed in foster care.
44 18 15. Of the funds appropriated in this section, up to 44 19 \$371,000 is allocated for the department's minority youth and 44 20 family projects under the redesign of the child welfare system.	Allocates \$371,000 to minority youth and family projects included in the child welfare redesign. DETAIL: This is no change compared to the estimated FY 2023 allocation.
44 21 16. Of the funds appropriated in this section, \$851,000 44 22 is allocated for funding of the community circle of care 44 23 collaboration for children and youth in northeast Iowa.	Allocates \$851,000 to the Community Circle of Care Grant Program in northeast Iowa. DETAIL: This is no change compared to the estimated FY 2023 allocation. The Community Circle of Care Program is a regional System of Care program that coordinates community-based services and support to address the needs of children and youth with severe behavioral or mental health conditions.
44 24 17. Of the funds appropriated in this section, at least 44 25 \$147,000 shall be used for the continuation of the child 44 26 welfare provider training program.	Allocates \$147,000 to the Online Child Welfare Provider Training Academy. DETAIL: This is no change compared to the estimated FY 2023 allocation.
44 27 18. Of the funds appropriated in this section, \$211,000 44 28 shall be used for continuation of the central Iowa system of 44 29 care program grant for the purposes of funding community-based 44 30 services and other supports with a system of care approach for 44 31 children with serious emotional disturbance and their families 44 32 through a nonprofit provider that is located in a county 44 33 with a population of more than 450,000 according to the 2020 44 34 certified federal census, is licensed as a psychiatric medical 44 35 institution for children, and was a system of care grantee 45 1 prior to July 1, 2023.	Allocates \$211,000 for the continuation of a System of Care Program Grant in Polk County through June 30, 2024. DETAIL: This is no change compared to the estimated FY 2023 allocation.

45 2 19. Of the funds appropriated in this section, \$235,000
 45 3 shall be used for the public purpose of the continuation
 45 4 and expansion of a system of care program grant implemented
 45 5 in Cerro Gordo and Linn counties to utilize a comprehensive
 45 6 and long-term approach for helping children and families by
 45 7 addressing the key areas in a child’s life of childhood basic
 45 8 needs, education and work, family, and community.

Allocates \$235,000 for the continuation and expansion of a System of Care program in Cerro Gordo and Linn counties at Four Oaks.

DETAIL: This is no change compared to the estimated FY 2023 allocation.

45 9 20. Of the funds appropriated in this section, \$110,000
 45 10 shall be used for the public purpose of funding community-based
 45 11 services and other supports with a system of care approach
 45 12 for children with a serious emotional disturbance and their
 45 13 families through a nonprofit provider of child welfare services
 45 14 that has been in existence for more than 115 years, is located
 45 15 in a county with a population of more than 230,000 according to
 45 16 the 2020 certified federal census, is licensed as a psychiatric
 45 17 medical institution for children, and was a system of care
 45 18 grantee prior to July 1, 2023.

Allocates \$110,000 to Tanager Place Behavioral Health Clinic in Cedar Rapids.

DETAIL: This is no change compared to the estimated FY 2023 allocation.

45 19 21. If a separate funding source is identified that reduces
 45 20 the need for state funds within an allocation under this
 45 21 section, the allocated state funds may be redistributed to
 45 22 other allocations under this section for the same fiscal year.

Specifies that if other funding is available, the allocations of State funds in this Section may be redistributed to other allocations for FY 2024.

DETAIL: Other funding sources for Child and Family Services include Title IV-B and IV-E of the Social Security Act, TANF, and the Social Services Block Grant.

45 23 22. Of the funds appropriated in this section, a portion may
 45 24 be used for family-centered services for purposes of complying
 45 25 with the federal Family First Prevention Services Act of 2018,
 45 26 Pub.L. No.115-123, and successor legislation.

Allows the HHS to use a portion of the funds allocated in this Section for family-centered services to comply with the federal [Family First Prevention Services Act](#).

45 27 Sec. 20. ADOPTION SUBSIDY.

General Fund appropriation to the Adoption Subsidy Program.

45 28 1. There is appropriated from the general fund of the state
 45 29 to the department of health and human services for the fiscal
 45 30 year beginning July 1, 2023, and ending June 30, 2024, the
 45 31 following amount, or so much thereof as is necessary, to be
 45 32 used for the purpose designated:

DETAIL: This is an increase of \$287,500 to fund an increase in the reimbursement provided to an adoptive parent for nonrecurring legal expenses from \$500 to \$1,000.

45 33 a. For adoption subsidy payments and related costs and for
 45 34 other operations and services provided for under paragraph “b”:
 45 35 \$ 40,883,507

<p>46 1 b. (1) Of the funds appropriated in this section, a 46 2 sufficient amount is allocated for adoption subsidy payments 46 3 and related costs.</p>	
<p>46 4 (2) Any funds appropriated in this section remaining after 46 5 the allocation under subparagraph (1) are designated and 46 6 allocated as state savings resulting from implementation of 46 7 the federal Fostering Connections to Success and Increasing 46 8 Adoptions Act of 2008, Pub.L. No.110-351, and successor 46 9 legislation, as determined in accordance with 42 U.S.C. 46 10 §673(a)(8), and shall be used for post-adoption services and 46 11 for other purposes allowed under these federal laws, Tit.IV-B 46 12 or Tit.IV-E of the federal Social Security Act.</p>	<p>CODE: Directs the HHS to use the funds appropriated to the Adoption Subsidy Program for adoption subsidy payments and postadoption services as allowed under Title IV-B and Title IV-E of the federal Social Security Act, due to the federal Fostering Connections to Success and Increasing Adoptions Act of 2008. Permits the HHS to transfer funds (specifically those funds from federal Title IV-E savings) to the Child and Family Services General Fund appropriation for postadoption services. A federal mandate regarding the use of federal Title IV-E funds requires savings to be reinvested and used for child welfare services instead of reverting to the General Fund. Allows any unexpended funds to not revert but remain available until expended.</p>
<p>46 13 (a) The department of health and human services may transfer 46 14 funds allocated in this subparagraph (2) to the appropriation 46 15 for child and family services in this division of this Act for 46 16 the purposes designated in this subparagraph (2).</p>	
<p>46 17 (b) Notwithstanding section 8.33, moneys allocated 46 18 under this subparagraph (2) shall not revert to any fund but 46 19 shall remain available for the purposes designated in this 46 20 subparagraph (2) until expended.</p>	
<p>46 21 2. The department may transfer funds appropriated in this 46 22 section remaining after the transfer of funds under subsection 46 23 1, paragraph “b”, to the appropriation made in this division 46 24 of this Act for general administration for costs paid from the 46 25 appropriation relating to adoption subsidy.</p>	<p>Permits the HHS to transfer funds to the General Administration appropriation for costs relating to the Program.</p>
<p>46 26 3. Federal funds received by the state during the 46 27 fiscal year beginning July 1, 2023, as the result of the 46 28 expenditure of state funds during a previous state fiscal 46 29 year for a service or activity funded under this section are 46 30 appropriated to the department to be used as additional funding 46 31 for the services and activities funded under this section. 46 32 Notwithstanding section 8.33, moneys received in accordance 46 33 with this subsection that remain unencumbered or unobligated 46 34 at the close of the fiscal year shall not revert to any fund 46 35 but shall remain available for expenditure for the purposes 47 1 designated until the close of the succeeding fiscal year.</p>	<p>CODE: Requires federal funds received in FY 2024 for the expenditure of State funds in a previous fiscal year to be used for adoption subsidies.</p>
<p>47 2 4. Notwithstanding section 8.33, moneys appropriated in 47 3 this section that remain unencumbered or unobligated at the 47 4 close of the fiscal year shall not revert but shall remain</p>	<p>Permits nonreversion of funds in this subsection until the close of FY 2025.</p>

47 5 available for the purposes designated until the close of the
47 6 succeeding fiscal year.

47 7 Sec. 21. FAMILY SUPPORT SUBSIDY PROGRAM.
47 8 1. There is appropriated from the general fund of the state
47 9 to the department of health and human services for the fiscal
47 10 year beginning July 1, 2023, and ending June 30, 2024, the
47 11 following amount, or so much thereof as is necessary, to be
47 12 used for the purpose designated:
47 13 For the family support subsidy program subject to the
47 14 enrollment restrictions in section 225C.37, subsection 3:
47 15 \$ 949,282

General Fund appropriation to the HHS for the Family Support Subsidy Program.

DETAIL: This is no change compared to estimated FY 2023.

47 16 2. At least \$931,536 of the moneys appropriated in this
47 17 section shall be used for the family support center component
47 18 of the comprehensive family support program under chapter 225C,
47 19 subchapter V.

Allocates \$931,536 to the HHS to continue the Children at Home Program. The HHS has existing statewide coordinated intake for family support services through the Division of Health Promotion and Chronic Disease Prevention.

DETAIL: This is no change compared to the estimated FY 2023 allocation. The Family Support Subsidy Program is projected to end in FY 2024.

47 20 3. If at any time during the fiscal year, the amount of
47 21 funding available for the family support subsidy program
47 22 is reduced from the amount initially used to establish the
47 23 figure for the number of family members for whom a subsidy
47 24 is to be provided at any one time during the fiscal year,
47 25 notwithstanding section 225C.38, subsection 2, the department
47 26 shall revise the figure as necessary to conform to the amount
47 27 of funding available.

CODE: Requires the HHS to reduce funding to participants in the Family Support Subsidy Program if available funds are less than anticipated.

47 28 Sec. 22. CONNER DECREE. There is appropriated from the
47 29 general fund of the state to the department of health and human
47 30 services for the fiscal year beginning July 1, 2023, and ending
47 31 June 30, 2024, the following amount, or so much thereof as is
47 32 necessary, to be used for the purpose designated:
47 33 For building community capacity through the coordination
47 34 and provision of training opportunities in accordance with the
47 35 consent decree of Conner v.Branstad, No.4-86-CV-30871(S.D.
48 1 Iowa, July 14, 1994):
48 2 \$ 33,632

General Fund appropriation to the HHS for Conner Decree training requirements.

DETAIL: This is no change compared to estimated FY 2023. The funds are used for training purposes to comply with the [Conner v. Branstad](#) consent decree mandating placement of persons with developmental disabilities in the least restrictive setting possible.

48 3 Sec. 23. MENTAL HEALTH INSTITUTES.
 48 4 1. There is appropriated from the general fund of the state
 48 5 to the department of health and human services for the fiscal
 48 6 year beginning July 1, 2023, and ending June 30, 2024, the
 48 7 following amounts, or so much thereof as is necessary, to be
 48 8 used for the purposes designated:

48 9 a. For operation of the state mental health institute at
 48 10 Cherokee as required by chapters 218 and 226 for salaries,
 48 11 support, maintenance, and miscellaneous purposes, and for not
 48 12 more than the following full-time equivalent positions:
 48 13 \$ 15,923,252
 48 14 FTEs 188.00

General Fund appropriation to the HHS for the mental health institute (MHI) at Cherokee.

DETAIL: This is a net increase of \$309,628 and 29.81 FTE positions compared to estimated FY 2023. The increase includes:

- An increase of \$340,000 for 0.50 Psychologist FTE position and 3.80 Security Guard FTE positions because Cherokee MHI will receive 12 new adult beds that will take the place of 12 youth beds, which are shifting to Independence MHI. This increase requires an annualization of 19.00 FTE positions in FY 2025.
- An increase of FTE positions in FY 2024 to match the FY 2023 authorized amount.
- A decrease of \$30,372 due to restructuring the OCIO's Cybersecurity Office from fee-based funding to a General Fund appropriation.

48 15 b. For operation of the state mental health institute at
 48 16 Independence as required by chapters 218 and 226 for salaries,
 48 17 support, maintenance, and miscellaneous purposes, and for not
 48 18 more than the following full-time equivalent positions:
 48 19 \$ 19,811,470
 48 20 FTEs 211.00

General Fund appropriation to the HHS for the MHI at Independence.

DETAIL: This is a net increase of \$122,542 and 28.80 FTE positions compared to estimated FY 2023. The increase includes:

- An increase of \$160,000 for 1.50 Educator FTE positions and 0.20 Psychologist FTE position as Independence MHI realigns beds to provide specialized treatment for complex behavioral youth. This increase requires an annualization of 3.00 FTE positions in FY 2025.
- An increase of FTE positions in FY 2024 to match the FY 2023 authorized amount.
- A decrease of \$37,458 due to restructuring the OCIO's Cybersecurity Office from fee-based funding to a General Fund appropriation.

48 21 2. a. Notwithstanding sections 218.78 and 249A.11, any
 48 22 revenue received from the state mental health institute at

CODE: Allows the HHS to retain Medicaid revenues received by the MHIs.

48 23 Cherokee or the state mental health institute at Independence
 48 24 pursuant to 42 C.F.R. §438.6(e) may be retained and expended
 48 25 by the mental health institute.

48 26 b. Notwithstanding sections 218.78 and 249A.11, any
 48 27 COVID-19 related funding received through federal funding
 48 28 sources by the state mental health institute at Cherokee or the
 48 29 state mental health institute at Independence may be retained
 48 30 and expended by the mental health institute.

48 31 3. Notwithstanding any provision of law to the contrary,
 48 32 a Medicaid member residing at the state mental health
 48 33 institute at Cherokee or the state mental health institute
 48 34 at Independence shall retain Medicaid eligibility during
 48 35 the period of the Medicaid member's stay for which federal
 49 1 financial participation is available.

49 2 4. Notwithstanding section 8.33, moneys appropriated in
 49 3 this section that remain unencumbered or unobligated at the
 49 4 close of the fiscal year shall not revert but shall remain
 49 5 available for expenditure for the purposes designated until the
 49 6 close of the succeeding fiscal year.

49 7 Sec. 24. STATE RESOURCE CENTERS.

49 8 1. There is appropriated from the general fund of the state
 49 9 to the department of health and human services for the fiscal
 49 10 year beginning July 1, 2023, and ending June 30, 2024, the
 49 11 following amounts, or so much thereof as is necessary, to be
 49 12 used for the purposes designated:

49 13 a. For the state resource center at Glenwood for salaries,
 49 14 support, maintenance, and miscellaneous purposes:
 49 15 \$ 16,255,132

49 16 b. For the state resource center at Woodward for salaries,
 49 17 support, maintenance, and miscellaneous purposes:
 49 18 \$ 13,389,577

CODE: Allows the HHS to retain revenues received by the MHIs related to COVID-19.

Specifies that Medicaid members residing at either of the two MHIs are required to retain Medicaid eligibility for the first 14 days of their residence.

CODE: Allows any unexpended funds appropriated for the Cherokee and Independence MHIs for FY 2024 to remain available for FY 2025.

General Fund appropriation to the HHS for the State Resource Center at Glenwood.

DETAIL: This is a decrease of \$33,607 compared to estimated FY 2023 due to restructuring the OCIO's Cybersecurity Office from fee-based funding to a General Fund appropriation.

General Fund appropriation to the State Resource Center at Woodward.

DETAIL: This is a decrease of \$19,717 compared to estimated FY

<p>49 19 2. The department may continue to bill for state resource 49 20 center services utilizing a scope of services approach used for 49 21 private providers of intermediate care facilities for persons 49 22 with an intellectual disability services, in a manner which 49 23 does not shift costs between the medical assistance program, 49 24 mental health and disability services regions, or other sources 49 25 of funding for the state resource centers.</p>	<p>2023 due to restructuring the OCIO's Cybersecurity Office from fee-based funding to a General Fund appropriation.</p>
<p>49 26 3. The state resource centers may expand the time-limited 49 27 assessment and respite services during the fiscal year.</p>	<p>Permits the HHS to continue billing practices that do not include cost shifting.</p> <p>Permits the State resource centers to expand time-limited assessment and respite services.</p> <p>DETAIL: Time-limited assessments include analysis of patient conditions and development of therapy plans to assist families in caring for individuals with intellectual or developmental disabilities. Respite services provide care for special needs individuals for a limited duration to provide families with a temporary reprieve of caretaking responsibilities.</p>
<p>49 28 4. If the department's administration and the department 49 29 of management concur with a finding by a state resource 49 30 center's superintendent that projected revenues can reasonably 49 31 be expected to pay the salary and support costs for a new 49 32 employee position, or that such costs for adding a particular 49 33 number of new positions for the fiscal year would be less 49 34 than the overtime costs if new positions would not be added, 49 35 the superintendent may add the new position or positions. If 50 1 the vacant positions available to a resource center do not 50 2 include the position classification desired to be filled, the 50 3 state resource center's superintendent may reclassify any 50 4 vacant position as necessary to fill the desired position. The 50 5 superintendents of the state resource centers may, by mutual 50 6 agreement, pool vacant positions and position classifications 50 7 during the course of the fiscal year in order to assist one 50 8 another in filling necessary positions.</p>	<p>Specifies that FTE positions may be added at the two State resource centers if projected revenues are sufficient to pay the salary and support costs of the additional FTE positions and if approved by the DOM.</p>
<p>50 9 5. If existing capacity limitations are reached in 50 10 operating units, a waiting list is in effect for a service or 50 11 a special need for which a payment source or other funding</p>	<p>Permits a State resource center to open certain facilities if a service waiting list exists and funding is available.</p>

50 12 is available for the service or to address the special need,
 50 13 and facilities for the service or to address the special need
 50 14 can be provided within the available payment source or other
 50 15 funding, the superintendent of a state resource center may
 50 16 authorize opening not more than two units or other facilities
 50 17 and begin implementing the service or addressing the special
 50 18 need during fiscal year 2023-2024.

50 19 6. Notwithstanding section 8.33, and notwithstanding
 50 20 the amount limitation specified in section 222.92, moneys
 50 21 appropriated in this section that remain unencumbered or
 50 22 unobligated at the close of the fiscal year shall not revert
 50 23 but shall remain available for expenditure for the purposes
 50 24 designated until the close of the succeeding fiscal year.

50 25 Sec. 25. SEXUALLY VIOLENT PREDATORS.
 50 26 1. There is appropriated from the general fund of the state
 50 27 to the department of health and human services for the fiscal
 50 28 year beginning July 1, 2023, and ending June 30, 2024, the
 50 29 following amount, or so much thereof as is necessary, to be
 50 30 used for the purpose designated:
 50 31 For costs associated with the commitment and treatment of
 50 32 sexually violent predators in the unit located at the state
 50 33 mental health institute at Cherokee, including costs of legal
 50 34 services and other associated costs, including salaries,
 50 35 support, maintenance, and miscellaneous purposes, and for not
 51 1 more than the following full-time equivalent positions:
 51 2 \$ 14,865,337
 51 3 FTEs 167.00

51 4 2. Unless specifically prohibited by law, if the amount
 51 5 charged provides for recoupment of at least the entire amount
 51 6 of direct and indirect costs, the department of health and
 51 7 human services may contract with other states to provide
 51 8 care and treatment of persons placed by the other states at
 51 9 the unit for sexually violent predators at Cherokee. The
 51 10 moneys received under such a contract shall be considered
 51 11 to be repayment receipts and used for the purposes of the
 51 12 appropriation made in this section.

51 13 3. Notwithstanding section 8.33, moneys appropriated in

CODE: Allows any unexpended funds appropriated for the State resource centers at Glenwood and Woodward for FY 2024 to remain available for FY 2025.

General Fund appropriation to the HHS for the Civil Commitment Unit for Sexual Offenders (CCUSO).

DETAIL: This is a net increase of \$974,061 and 31.71 FTE positions compared to estimated FY 2023. The changes include:

- An increase of \$1,000,000 and 10.00 FTE positions to staff a new secure facility due to an increasing population at the CCUSO. This increase in FTE positions will require 27.00 FTE positions for an annualization in FY 2025.
- An increase of FTE positions in FY 2024 to match the FY 2023 authorized amount.
- A decrease of \$25,939 due to restructuring the OCIO's Cybersecurity Office from fee-based funding to a General Fund appropriation.

Allows the HHS to contract with other states to provide treatment services at the CCUSO.

CODE: Allows any unexpended funds appropriated for the CCUSO for

51 14 this section that remain unencumbered or unobligated at the
 51 15 close of the fiscal year shall not revert but shall remain
 51 16 available for expenditure for the purposes designated until the
 51 17 close of the succeeding fiscal year.

FY 2024 to remain available for FY 2025.

51 18 Sec. 26. FIELD OPERATIONS.

General Fund appropriation to the HHS for Field Operations staff and support.

51 19 1. There is appropriated from the general fund of the state
 51 20 to the department of health and human services for the fiscal
 51 21 year beginning July 1, 2023, and ending June 30, 2024, the
 51 22 following amount, or so much thereof as is necessary, to be
 51 23 used for the purposes designated:

DETAIL: This is a net increase of \$6,162,507 and no change in FTE positions compared to estimated FY 2023. The changes include:

51 24 For field operations, including salaries, support,
 51 25 maintenance, and miscellaneous purposes, and for not more than
 51 26 the following full-time equivalent positions:

- An increase of \$1,370,436 to increase wages for social workers providing support for child welfare case workers.
- An increase of \$5,000,000 to increase wages for Field Operations staff throughout the State.
- A decrease of \$207,929 due to restructuring the OCIO's Cybersecurity Office from fee-based funding to a General Fund appropriation.

51 27 \$ 72,056,945
 51 28 FTEs 1,589.00

51 29 2. Of the funds appropriated in this section, \$1,370,436
 51 30 shall be used for the purpose of increasing compensation for
 51 31 child welfare case workers and to support case workers with
 51 32 complex cases in all service areas.

51 33 3. In addition to subsection 2, priority in filling
 51 34 full-time equivalent positions shall be given to those
 51 35 positions related to child protection services and eligibility
 52 1 determination for low-income families.

Requires priority to be given to filling FTE positions related to child protection services and eligibility determination for low-income families.

52 2 Sec. 27. GENERAL ADMINISTRATION. There is appropriated
 52 3 from the general fund of the state to the department of health
 52 4 and human services for the fiscal year beginning July 1, 2023,
 52 5 and ending June 30, 2024, the following amount, or so much
 52 6 thereof as is necessary, to be used for the purpose designated:

General Fund appropriation for General Administration.

52 7 For general administration, including salaries, support,
 52 8 maintenance, and miscellaneous purposes, and for not more than
 52 9 the following full-time equivalent positions:

DETAIL: This is a net increase of \$3,071,473 and 50.56 FTE positions compared to estimated FY 2023. The changes include:

52 10 \$ 18,913,662
 52 11 FTEs 341.86

- An increase of \$500,000 to expand the More Options for Maternal Support (MOMS) Program.
- An increase of \$2,602,312 and 29.86 FTE positions for the Child Advocacy Board, which was transferred to HHS due to government alignment.
- A decrease of \$30,839 due to restructuring the OCIO's Cybersecurity Office from fee-based funding to a General Fund appropriation.
- An increase of 4.70 FTE positions to match the FY 2023 authorized amount and an additional 16.00 FTE positions to convert contract positions to permanent FTE positions pursuant to Iowa Code section [8.36A](#).

52 12 1. The department shall report at least monthly to the
 52 13 general assembly concerning the department's operational and
 52 14 program expenditures.

Requires the HHS to provide a monthly operational and expenditure report to the General Assembly.

52 15 2. Of the funds appropriated in this section, \$150,000 shall
 52 16 be used for the provision of a program to provide technical
 52 17 assistance, support, and consultation to providers of home and
 52 18 community-based services under the medical assistance program.

Allocates \$150,000 for technical assistance for providers of HCBS under the Medicaid Program.

DETAIL: This is no change compared to the estimated FY 2023 allocation.

52 19 3. Of the funds appropriated in this section, \$50,000
 52 20 is transferred to the Iowa finance authority to be used
 52 21 for administrative support of the council on homelessness
 52 22 established in section 16.2D and for the council to fulfill its
 52 23 duties in addressing and reducing homelessness in the state.

Transfers \$50,000 to the Iowa Finance Authority to be used for support of the Council on Homelessness.

DETAIL: This is no change compared to the estimated FY 2023 transfer.

52 24 4. Of the funds appropriated in this section, \$200,000 shall
 52 25 be transferred to and deposited in the administrative fund of
 52 26 the Iowa ABLE savings plan trust created in section 12I.4, to
 52 27 be used for implementation and administration activities of the
 52 28 Iowa ABLE savings plan trust.

Transfers \$200,000 to the Treasurer of State to implement the Iowa ABLE Savings Plan Trust.

DETAIL: This is no change compared to the estimated FY 2023 transfer. The Iowa ABLE Savings Plan Trust makes tax-free savings accounts available to individuals with disabilities to cover qualified expenses such as education, housing, and transportation.

52 29 5. Of the funds appropriated in this section, \$200,000 is
 52 30 transferred to the Iowa commission on volunteer service to
 52 31 continue to be used for the RefugeeRISE AmeriCorps program
 52 32 established under section 15H.8 for member recruitment and
 52 33 training to improve the economic well-being and health of
 52 34 economically disadvantaged refugees in local communities across
 52 35 Iowa. Funds transferred may be used to supplement federal
 53 1 funds under federal regulations.

Transfers \$200,000 to the IEDA through the HHS for the RefugeeRISE AmeriCorps Program, to be used for member recruitment and training.

DETAIL: This is no change compared to the estimated FY 2023 transfer. This transfer was authorized for the first time in FY 2017. The transfer requires funds to be used to supplement federal funds.

53 2 6. Of the funds appropriated in this section, up to \$300,000
 53 3 shall be used as follows:

Allocates \$300,000 for children's mental health initiatives.

DETAIL: This is no change in funding compared to the estimated FY 2023 allocation. However, this amount is further allocated in the following paragraphs.

53 4	a. To fund not more than 1.00 full-time equivalent position	Specifies that the funding is for 1.00 FTE position to support the
53 5	to address the department's responsibility to support the work	Children's Behavioral Health System State Board.
53 6	of the children's behavioral health system state board and	
53 7	implementation of the services required pursuant to section	
53 8	331.397.	
53 9	b. To support the cost of establishing and implementing new	Specifies that the funding is to support the establishment and
53 10	or additional services required pursuant to sections 331.397	implementation of new or additional children's behavioral health
53 11	and 331.397A.	services.
53 12	c. Of the amount allocated, \$32,000 shall be used to support	Requires the HHS to use \$32,000 for the Your Life Iowa Program to
53 13	the costs of establishing and implementing new or additional	include information on the Iowa Children's Behavioral Health System.
53 14	services required pursuant to sections 331.397 and 331.397A.	DETAIL: This is no change compared to the estimated FY 2023.
53 15	7. Of the funds appropriated in this section, \$800,000 shall	Allocates \$800,000 to provide assistance to nursing homes for facility
53 16	be used for the renovation and construction of certain nursing	improvements.
53 17	facilities, consistent with the provisions of chapter 249K.	DETAIL: This is no change compared to the estimated FY 2023
		allocation. Prior to FY 2022, the program was funded through the
		Rebuild Iowa Infrastructure Fund. The Nursing Home Financial
		Assistance Program in Iowa Code chapter 249K was established in
		2007 Iowa Acts, chapter 219 (FY 2008 Infrastructure Appropriations
		Act), to support an appropriate number of nursing facility beds for the
		State's citizens and financially assist nursing facilities to remain
		compliant with applicable health and safety regulations.
53 18	8. Of the funds appropriated under this section, \$1,000,000	Allocates \$1,000,000 to be used for administration and pregnancy
53 19	shall be used for the purposes of program administration and	support services through the MOMS Program.
53 20	provision of pregnancy support services through the more	DETAIL: This is an increase of \$500,000 compared to estimated FY
53 21	options for maternal support program in accordance with section	2023.
53 22	217.41C.	
53 23	9. Of the funds appropriated under this section, \$2,602,312	Allocates \$2,602,312 to the Child Advocacy Board.
53 24	shall be used for the child advocacy board for foster care	DETAIL: This is a decrease of \$5,142 compared to estimated FY 2023
53 25	review and the court appointed special advocate program,	due to restructuring the OCIO's Cybersecurity Office from fee-based
53 26	including for salaries, support, maintenance, and miscellaneous	funding to a General Fund appropriation. In prior years, the Child
53 27	purposes.	Advocacy Board received an appropriation in the Administration and
		Regulation Appropriations Act and has been moved to this Bill as a
		result of Senate File 514 (State Government Alignment Act).

The Child Advocacy Board oversees the State's Local Foster Care Review Boards and the Court Appointed Special Advocate (CASA) Program. These programs recruit, train, and support community volunteers throughout the State to represent the interests of abused and neglected children.

53 28 a. The department, in coordination with the child advocacy
53 29 board, shall submit an application for funding available
53 30 pursuant to Tit.IV-E of the federal Social Security Act for
53 31 claims for child advocacy board administrative review costs.

Requires the HHS and the Child Advocacy Board to cooperate in filing an application for federal funds for Child Advocacy Board administrative review costs.

53 32 b. The court appointed special advocate program shall
53 33 investigate and develop opportunities for expanding fundraising
53 34 for the program.

Requires the CASA Program to seek additional donations and grants.

53 35 c. Administrative costs charged by the department for items
54 1 funded under this subsection shall not exceed 4 percent of the
54 2 amount appropriated in this subsection.

Limits the administrative costs of the HHS to 4.00% (\$104,092) of the funds appropriated.

54 3 Sec. 28. DEPARTMENT-WIDE DUTIES.
54 4 There is appropriated from the general fund of the state to
54 5 the department of health and human services for the fiscal year
54 6 beginning July 1, 2023, and ending June 30, 2024, the following
54 7 amount, or so much thereof as is necessary, to be used for the
54 8 purposes designated:

General Fund appropriation to the HHS facilities.

54 9 For salaries, support, maintenance, and miscellaneous
54 10 purposes at facilities under the purview of the department of
54 11 health and human services:
54 12 \$ 2,157,590

DETAIL: This is a decrease of \$2,014,533 resulting from government alignment savings.

54 13 The department shall submit a report to the general assembly
54 14 detailing the expenditure of the funds appropriated under this
54 15 section.

Requires the HHS to submit a report to the General Assembly detailing the moneys expended under this Section.

54 16 Sec. 29. VOLUNTEERS. There is appropriated from the
54 17 general fund of the state to the department of health and human
54 18 services for the fiscal year beginning July 1, 2023, and ending
54 19 June 30, 2024, the following amount, or so much thereof as is
54 20 necessary, to be used for the purpose designated:

General Fund appropriation to the HHS for the development and coordination of the Volunteer Services Program.

54 21 For development and coordination of volunteer services:
54 22 \$ 84,686

DETAIL: This is no change compared to estimated FY 2023.

54 23 Sec. 30. MEDICAL ASSISTANCE, STATE SUPPLEMENTARY
 54 24 ASSISTANCE, AND SOCIAL SERVICE PROVIDERS REIMBURSED UNDER THE
 54 25 DEPARTMENT OF HEALTH AND HUMAN SERVICES.

54 26 1. a. (1) (a) (i) Notwithstanding any provision of
 54 27 law to the contrary, for the fiscal period beginning July 1,
 54 28 2023, and ending June 30, 2025, the department of health and
 54 29 human services shall rebase case-mix nursing facility rates
 54 30 beginning July 1, 2023, using the Medicaid cost reports on file
 54 31 for the period ending December 31, 2022, and applying a minimum
 54 32 occupancy factor of 70 percent, as provided pursuant to 2021
 54 33 Iowa Acts, chapter 182, section 39, to the extent possible
 54 34 within the state funding, including the \$15,000,000 provided
 54 35 for this purpose.

55 1 (ii) For the fiscal year beginning July 1, 2023, the
 55 2 department of health and human services shall determine and
 55 3 adjust each nursing facility's case-mix index on a semiannual
 55 4 basis. A separate calculation shall be made to determine the
 55 5 average case-mix index for a nursing facility-wide case-mix
 55 6 index, and a case-mix index for the residents of a nursing
 55 7 facility who are medical assistance program recipients using
 55 8 all of the minimum data set reports by the nursing facility for
 55 9 the previous semiannual period of the state fiscal year using a
 55 10 day weighted calculation.

55 11 (b) For the fiscal year beginning July 1, 2023, non-case-mix
 55 12 and special population nursing facilities shall be reimbursed
 55 13 in accordance with the methodology in effect on June 30, 2023.

55 14 (c) For managed care claims, the department of health
 55 15 and human services shall adjust the payment rate floor for
 55 16 nursing facilities, annually, to maintain a rate floor that is
 55 17 no lower than the Medicaid fee-for-service case-mix adjusted
 55 18 rate calculated in accordance with subparagraph division
 55 19 (a) and 441 IAC 81.6. The department shall then calculate
 55 20 adjusted reimbursement rates, including but not limited to
 55 21 add-on payments, annually, and shall notify Medicaid managed
 55 22 care organizations of the adjusted reimbursement rates within
 55 23 30 days of determining the adjusted reimbursement rates. Any
 55 24 adjustment of reimbursement rates under this subparagraph
 55 25 division shall be budget neutral to the state budget.

Requires the HHS to rebase case-mix nursing facility and non-case-mix nursing facility reimbursement rates for FY 2023 and FY 2024, using the Medicaid cost reports on file as of December 31, 2022, and applying a minimum occupancy factor of 70.00%, to the extent possible within State funding, including the \$15,000,000 provided for Medicaid in Section 13 of the Bill. The HHS is required to adjust each nursing facility's case-mix index on a semiannual basis in FY 2023.

Requires the HHS to reimburse non-case-mix and special population nursing facilities in accordance with the methodology in effect on June 30, 2023.

Requires the HHS to adjust the payment rate floor for nursing facilities that are reimbursed under managed care to maintain a floor no lower than the Medicaid fee-for-service case-mix adjusted rate. Any adjustment is required to be budget neutral to the State.

55 26 (d) For the fiscal year beginning July 1, 2023, Medicaid
 55 27 managed care long-term services and supports capitation rates
 55 28 shall be adjusted to reflect the case-mix adjusted rates
 55 29 specified pursuant to subparagraph division (a) for the patient
 55 30 populations residing in Medicaid-certified nursing facilities.

Requires the FY 2024 Medicaid managed care long-term services and supports capitation rates to be adjusted to reflect the case-mix methodology defined above for patients residing in Medicaid-certified nursing facilities.

55 31 (2) Medicaid managed care organizations shall adjust
 55 32 facility-specific rates based upon payment rate listings issued
 55 33 by the department. The rate adjustments shall be applied
 55 34 prospectively from the effective date of the rate letter issued
 55 35 by the department.

Requires managed care organizations (MCOs) to adjust facility-specific rates based on payment rate listings issued by the HHS. The rates are to be applied prospectively from the effective date of the rate letter issued by the HHS.

56 1 b. (1) For the fiscal year beginning July 1, 2023, the
 56 2 department shall establish the fee-for-service pharmacy
 56 3 dispensing fee reimbursement at \$10.38 per prescription,
 56 4 until a cost of dispensing survey is completed. The actual
 56 5 dispensing fee shall be determined by a cost of dispensing
 56 6 survey performed by the department and required to be completed
 56 7 by all medical assistance program participating pharmacies
 56 8 every two years, adjusted as necessary to maintain expenditures
 56 9 within the amount appropriated to the department for this
 56 10 purpose for the fiscal year. A change in the dispensing
 56 11 fee shall become effective following federal approval of the
 56 12 Medicaid state plan.

Requires the FY 2024 pharmacy dispensing fee to be \$10.38 per prescription.

DETAIL: This is no change compared to the FY 2023 dispensing fee.

56 13 (2) The department shall utilize an average acquisition
 56 14 cost reimbursement methodology for all drugs covered under the
 56 15 medical assistance program in accordance with 2012 Iowa Acts,
 56 16 chapter 1133, section 33.

Requires the HHS to continue an average acquisition cost (AAC) reimbursement methodology for all drugs covered under the Medicaid Program. The methodology is to utilize a survey of pharmacy invoices to determine the AAC. The HHS is to provide a process for pharmacies to address AAC prices that are not reflective of the actual drug cost.

56 17 c. (1) For the fiscal year beginning July 1, 2023,
 56 18 reimbursement rates for outpatient hospital services shall
 56 19 be rebased effective January 1, 2024, subject to Medicaid
 56 20 program upper payment limit rules, and adjusted as necessary
 56 21 to maintain expenditures within the amount appropriated to the
 56 22 department for this purpose for the fiscal year.

Requires the FY 2024 outpatient hospital services reimbursement rates to be rebased effective January 1, 2024, subject to the Medicaid upper payment limit (UPL) rules.

56 23 (2) For the fiscal year beginning July 1, 2023,
 56 24 reimbursement rates for inpatient hospital services shall

Requires the FY 2024 rate of reimbursement for inpatient hospital services to remain at the rates in effect on June 30, 2023, subject to

56 25 remain at the rates in effect on June 30, 2023, subject to
56 26 Medicaid program upper payment limit rules, and adjusted
56 27 as necessary to maintain expenditures within the amount
56 28 appropriated to the department for this purpose for the fiscal
56 29 year.

the Medicaid UPL rules.

56 30 (3) For the fiscal year beginning July 1, 2023, under
56 31 both fee-for-service and managed care administration of
56 32 the Medicaid program, critical access hospitals shall be
56 33 reimbursed for inpatient and outpatient services based on the
56 34 hospital-specific critical access hospital cost adjustment
56 35 factor methodology utilizing the most recent and complete cost
57 1 reporting period as applied prospectively within the funds
57 2 appropriated for such purpose for the fiscal year.

Requires the FY 2024 critical access hospital reimbursement rates to be based on the hospital-specific cost adjustment factor methodology within the funds appropriated.

57 3 (4) For the fiscal year beginning July 1, 2023, the graduate
57 4 medical education and disproportionate share hospital fund
57 5 shall remain at the amount in effect on June 30, 2023, except
57 6 that the portion of the fund attributable to graduate medical
57 7 education shall be reduced in an amount that reflects the
57 8 elimination of graduate medical education payments made to
57 9 out-of-state hospitals.

Requires the FY 2024 Graduate Medical Education and Disproportionate Share Hospital Fund to remain at the amount in effect on June 30, 2023, except for the portion that eliminates graduate medical education payments made to out-of-state hospitals.

57 10 (5) In order to ensure the efficient use of limited state
57 11 funds in procuring health care services for low-income lowans,
57 12 funds appropriated in this Act for hospital services shall
57 13 not be used for activities which would be excluded from a
57 14 determination of reasonable costs under the federal Medicare
57 15 program pursuant to 42 U.S.C.§1395x(v)(1)(N).

Requires funds appropriated to hospital activities to be used for activities pursuant to the federal Medicare Program.

57 16 d. For the fiscal year beginning July 1, 2023, reimbursement
57 17 rates for hospices and acute psychiatric hospitals shall be
57 18 increased in accordance with increases under the federal
57 19 Medicare program or as supported by their Medicare audited
57 20 costs.

Requires FY 2024 hospice services and acute psychiatric hospitals rates to be increased in accordance with increases under the federal Medicare Program.

57 21 e. For the fiscal year beginning July 1, 2023, independent
57 22 laboratories and rehabilitation agencies shall be reimbursed
57 23 using the same methodology in effect on June 30, 2023.

Requires the FY 2024 reimbursement methodology for independent laboratories and rehabilitation agencies to remain the same as the methodology in effect on June 30, 2023.

57 24 f. (1) For the fiscal year beginning July 1, 2023,
57 25 reimbursement rates for home health agencies shall continue to

Requires the FY 2024 home health agency reimbursement rates to be based on the Medicare low utilization payment adjustment (LUPA) to

<p>57 26 be based on the Medicare low utilization payment adjustment 57 27 (LUPA) methodology with state geographic wage adjustments. 57 28 The department shall continue to update the rates every two 57 29 years to reflect the most recent Medicare LUPA rates to the 57 30 extent possible within the state funding appropriated for this 57 31 purpose.</p>	<p>the extent possible within State funding appropriated for this purpose.</p>
<p>57 32 (2) For the fiscal year beginning July 1, 2023, the 57 33 department shall continue the reimbursement rate structure that 57 34 provides incentives to home health care providers located in 57 35 rural areas and providing home health care to Medicaid members. 58 1 The rate structure shall include a telehealth component to 58 2 incentivize the provision of necessary supervision for skilled 58 3 care without requiring travel time. For the purposes of this 58 4 subparagraph (2), "rural area" means an area that is not an 58 5 Iowa core based statistical area as defined by the federal 58 6 office of management and budget.</p>	<p>Requires the HHS to continue the reimbursement rate structure for FY 2024 that provides incentives for rural home health care providers and defines "rural area" to mean an area that is not an Iowa core based statistical area as defined by the federal Office of Management and Budget.</p>
<p>58 7 (3) For the fiscal year beginning July 1, 2023, rates for 58 8 private duty nursing and personal care services under the early 58 9 and periodic screening, diagnostic, and treatment program 58 10 benefit shall be calculated based on the methodology in effect 58 11 on June 30, 2023.</p>	<p>Requires the FY 2024 rates for private duty nursing and personal care services under the EPSDT Program to remain the same as the methodology on June 30, 2023.</p>
<p>58 12 g. For the fiscal year beginning July 1, 2023, federally 58 13 qualified health centers and rural health clinics shall receive 58 14 cost-based reimbursement for 100 percent of the reasonable 58 15 costs for the provision of services to recipients of medical 58 16 assistance.</p>	<p>Requires the FY 2024 federally qualified health center and rural health clinic reimbursement rates to be 100.00% of the reasonable costs for provision of services to Medicaid Program recipients.</p>
<p>58 17 h. For the fiscal year beginning July 1, 2023, the 58 18 reimbursement rates for dental services shall remain at the 58 19 rates in effect on June 30, 2023, unless the department is 58 20 able to adjust rates in a budget neutral manner within overall 58 21 dental program expenditures.</p>	<p>Requires the FY 2024 reimbursement rates for dental services to remain at the rates in effect on June 30, 2023, unless the HHS can adjust reimbursement rates in a budget neutral manner.</p>
<p>58 22 i. (1) For the fiscal year beginning July 1, 2023, 58 23 reimbursement rates for non-state-owned psychiatric medical 58 24 institutions for children shall be based on the reimbursement 58 25 methodology in effect on June 30, 2023.</p>	<p>Requires the FY 2024 non-State-owned psychiatric medical institution for children (PMIC) reimbursement rates to remain at the rates in effect on June 30, 2023.</p>
<p>58 26 (2) As a condition of participation in the medical</p>	<p>Requires PMIC providers to accept the Medicaid reimbursement rate</p>

58 27 assistance program, enrolled providers shall accept the medical
58 28 assistance reimbursement rate for any covered goods or services
58 29 provided to recipients of medical assistance who are children
58 30 under the custody of a psychiatric medical institution for
58 31 children.

for any covered goods or services for children under the custody of the PMIC.

58 32 j. For the fiscal year beginning July 1, 2023, unless
58 33 otherwise specified in this Act, all noninstitutional medical
58 34 assistance provider reimbursement rates shall remain at the
58 35 rates in effect on June 30, 2023, except for area education
59 1 agencies, local education agencies, infant and toddler
59 2 services providers, home and community-based services providers
59 3 including consumer-directed attendant care providers under a
59 4 section 1915(c) or 1915(i) waiver, targeted case management
59 5 providers, and those providers whose rates are required to be
59 6 determined pursuant to section 249A.20, or to meet federal
59 7 mental health parity requirements.

Requires the FY 2024 reimbursement rates for all noninstitutional Medicaid providers, with the exception of Area Education Agencies, local education agencies, infant and toddler services providers, HCBS providers, and those providers required to meet federal mental health parity requirements, to remain at the rates in effect on June 30, 2023.

59 8 k. Notwithstanding any provision to the contrary, for the
59 9 fiscal year beginning July 1, 2023, the reimbursement rate for
59 10 anesthesiologists shall remain at the rates in effect on June
59 11 30, 2023, and updated on January 1, 2024, to align with the
59 12 most current Iowa Medicare anesthesia rate.

Requires the FY 2024 reimbursement rates for anesthesiologists to remain at the rates in effect on June 30, 2023, and updated on January 1, 2024, to align with the most current Iowa Medicare anesthesia rate.

59 13 l. Notwithstanding section 249A.20, for the fiscal year
59 14 beginning July 1, 2023, the average reimbursement rate for
59 15 health care providers eligible for use of the federal Medicare
59 16 resource-based relative value scale reimbursement methodology
59 17 under section 249A.20 shall remain at the rate in effect on
59 18 June 30, 2023; however, this rate shall not exceed the maximum
59 19 level authorized by the federal government.

Requires the FY 2024 reimbursement rates for health care providers eligible for use of the federal Medicare resource-based relative value scale reimbursement methodology to remain at the rates in effect on June 30, 2023, and not exceed the maximum level authorized by the federal government.

59 20 m. For the fiscal year beginning July 1, 2023, the
59 21 reimbursement rate for residential care facilities shall not
59 22 be less than the minimum payment level as established by the
59 23 federal government to meet the federally mandated maintenance
59 24 of effort requirement. The flat reimbursement rate for
59 25 facilities electing not to file annual cost reports shall not
59 26 be less than the minimum payment level as established by the
59 27 federal government to meet the federally mandated maintenance
59 28 of effort requirement.

Requires the FY 2024 reimbursement rates for residential care facilities to be no less than the minimum payment level to meet the federal requirement.

59 29 n. (1) For the fiscal year beginning July 1, 2023, the 59 30 reimbursement rates for inpatient mental health services 59 31 provided at hospitals shall remain at the rates in effect on 59 32 June 30, 2023, subject to Medicaid program upper payment limit 59 33 rules and adjusted as necessary to maintain expenditures within 59 34 the amount appropriated to the department for this purpose for 59 35 the fiscal year; and psychiatrists shall be reimbursed at the 60 1 medical assistance program fee-for-service rate in effect on 60 2 June 30, 2023.	Requires the FY 2024 reimbursement rates for inpatient mental health hospital services to remain at the rates in effect on June 30, 2023, subject to Medicaid UPL rules, and requires psychiatrist reimbursement rates to remain at the rate in effect on June 30, 2023.
60 3 (2) The department of health and human services shall 60 4 continue the tiered rate reimbursement methodology for 60 5 psychiatric intensive inpatient care.	
60 6 o. For the fiscal year beginning July 1, 2023, community 60 7 mental health centers may choose to be reimbursed for the 60 8 services provided to recipients of medical assistance through 60 9 either of the following options: 60 10 (1) For 100 percent of the reasonable costs of the services. 60 11 (2) In accordance with the alternative reimbursement rate 60 12 methodology approved by the department of health and human 60 13 services in effect on June 30, 2023.	Allows Community Mental Health Centers (CMHCs) to choose between two different methodologies for reimbursement for FY 2024. The first option allows the CMHCs to be reimbursed at 100.00% of reasonable cost of service and uses a cost settlement methodology. The second option is based on rates in effect on June 30, 2023.
60 14 p. For the fiscal year beginning July 1, 2023, the 60 15 reimbursement rate for providers of family planning services 60 16 that are eligible to receive a 90 percent federal match shall 60 17 remain at the rates in effect on June 30, 2023.	Requires the FY 2024 reimbursement rates for family planning services eligible to receive a 90.00% federal match to remain at the rates in effect on June 30, 2023.
60 18 q. For the fiscal year beginning July 1, 2023, the 60 19 reimbursement rates for emergency medical service providers 60 20 shall remain at the rates in effect on June 30, 2023, or as 60 21 approved by the centers for Medicare and Medicaid services of 60 22 the United States department of health and human services.	Requires the FY 2024 reimbursement rates for emergency medical service providers to remain at the rates in effect on June 30, 2023, or as approved by the U.S. Department of Health and Human Services.
60 23 r. For the fiscal year beginning July 1, 2023, reimbursement 60 24 rates for substance use disorder treatment programs licensed 60 25 under section 125.13 shall remain at the rates in effect on 60 26 June 30, 2023.	Requires the FY 2024 reimbursement rates for substance abuse disorder treatment providers to remain at the rates in effect on June 30, 2023.
60 27 s. For the fiscal year beginning July 1, 2023, assertive 60 28 community treatment per diem rates shall remain at the rates in 60 29 effect on June 30, 2023.	Requires the FY 2024 assertive community treatment per diem rates to remain at the rates in effect June 30, 2023.

<p>60 30 t. For the fiscal year beginning July 1, 2023, the 60 31 reimbursement rate for family-centered services providers shall 60 32 be established by contract.</p>	<p>Requires the FY 2024 reimbursement rates for family-centered services providers to be established by contract.</p>
<p>60 33 u. For the fiscal year beginning July 1, 2023, the 60 34 reimbursement rate for air ambulance services shall remain at 60 35 the rate in effect on June 30, 2023.</p>	<p>Requires the FY 2024 reimbursement rates for air ambulance services to remain at the rates in effect on June 30, 2023.</p>
<p>61 1 v. For the fiscal year beginning July 1, 2023, all applied 61 2 behavioral analysis services reimbursement rates shall remain 61 3 at the rates in effect on June 30, 2023.</p>	<p>Requires the FY 2024 reimbursement rates for applied behavioral analysis services to remain at the rates in effect on June 30, 2023.</p>
<p>61 4 w. For the fiscal year beginning July 1, 2023, all 61 5 behavioral health intervention services reimbursement rates 61 6 shall remain at the rates in effect on June 30, 2023.</p>	<p>Requires the FY 2024 reimbursement rates for behavioral health intervention services to remain at the rates in effect on June 30, 2023.</p>
<p>61 7 2. For the fiscal year beginning July 1, 2023, the 61 8 reimbursement rate for providers reimbursed under the 61 9 in-home-related care program shall not be less than the minimum 61 10 payment level as established by the federal government to meet 61 11 the federally mandated maintenance of effort requirement.</p>	<p>Requires the FY 2024 reimbursement rate for providers of the In-Home-Related Care Program be no less than the minimum payment level established by the federal government.</p>
<p>61 12 3. Unless otherwise directed in this section, when the 61 13 department's reimbursement methodology for any provider 61 14 reimbursed in accordance with this section includes an 61 15 inflation factor, this factor shall not exceed the amount 61 16 by which the consumer price index for all urban consumers 61 17 increased during the most recently ended calendar year.</p>	<p>Specifies that when the required reimbursement methodology for providers under this subsection includes an inflation factor, the factor must not exceed the increase in the Consumer Price Index for All Urban Consumers for the most recently ended calendar year.</p>
<p>61 18 4. Notwithstanding section 234.38, for the fiscal 61 19 year beginning July 1, 2023, the foster family basic daily 61 20 maintenance rate and the maximum adoption subsidy rate for 61 21 children ages 0 through 5 years shall be \$16.78, the rate for 61 22 children ages 6 through 11 years shall be \$17.45, the rate for 61 23 children ages 12 through 15 years shall be \$19.10, and the 61 24 rate for children and young adults ages 16 and older shall be 61 25 \$19.35. For youth ages 18 to 23 who have exited foster care, 61 26 the preparation for adult living program maintenance rate shall 61 27 be up to \$602.70 per month as calculated based on the age of the 61 28 participant.</p>	<p>CODE: Sets the FY 2024 Foster Family Basic Daily Maintenance Rate and the Maximum Adoption Subsidy Rate for youth from birth through age 23. The rates for each age range are as follows:</p> <ul style="list-style-type: none"> • \$16.78 for children 0-5 years of age. • \$17.45 for children 6-12 years of age. • \$19.10 for children 13-15 years of age. • \$19.35 for children 16-18 years of age. <p>For adults under the age of 23 who have exited foster care, the PAL Program maintenance rate is \$602.70 per month.</p>
<p>61 29 5. For the fiscal year beginning July 1, 2023, the maximum</p>	<p>Requires the FY 2024 reimbursement rates for social services</p>

<p>61 30 reimbursement rates for social services providers under 61 31 contract shall remain at the rates in effect on June 30, 2023, 61 32 or the provider's actual and allowable cost plus inflation for 61 33 each service, whichever is less. However, if a new service 61 34 or service provider is added after June 30, 2023, the initial 61 35 reimbursement rate for the service or provider shall be based 62 1 upon a weighted average of provider rates for similar services.</p>	<p>providers under contract to remain at the rates in effect on June 30, 2023, or the provider's actual and allowable cost plus inflation for each service, whichever is less. This subsection also addresses reimbursement rates if a new service or service provider is added after June 30, 2023.</p>
<p>62 2 6. a. For the fiscal year beginning July 1, 2023, the 62 3 reimbursement rates for resource family recruitment and 62 4 retention contractors shall be established by contract.</p>	<p>Requires the FY 2024 reimbursement rates for resource family recruitment and retention contractors to be established by contract.</p>
<p>62 5 b. For the fiscal year beginning July 1, 2023, the 62 6 reimbursement rates for supervised apartment living foster care 62 7 providers shall be established by contract.</p>	<p>Requires the FY 2024 reimbursement rates for supervised apartment living foster care providers to be established by contract.</p>
<p>62 8 7. For the fiscal year beginning July 1, 2023, the 62 9 reimbursement rate for group foster care providers shall be the 62 10 combined service and maintenance reimbursement rate established 62 11 by contract.</p>	<p>Requires the FY 2024 combined reimbursement rates for group foster care to be established by contract.</p>
<p>62 12 8. The group foster care reimbursement rates paid for 62 13 placement of children out of state shall be calculated 62 14 according to the same rate-setting principles as those used for 62 15 in-state providers, unless the director of health and human 62 16 services or the director's designee determines that appropriate 62 17 care cannot be provided within the state. The payment of the 62 18 daily rate shall be based on the number of days in the calendar 62 19 month in which service is provided.</p>	<p>Requires the group foster care reimbursement rates paid for placement of children out of state to be calculated according to the same rate-setting principles as those used for in-state providers, unless the Director of the HHS determines that appropriate care cannot be provided in the State. Also, requires payment of the daily rate to be based on the number of days in the calendar month this service is provided.</p>
<p>62 20 9. a. For the fiscal year beginning July 1, 2023, the 62 21 reimbursement rate paid for shelter care and the child welfare 62 22 emergency services implemented to provide or prevent the need 62 23 for shelter care shall be established by contract.</p>	<p>Requires the FY 2024 reimbursement rates for shelter care and child welfare emergency services to be established by contract.</p>
<p>62 24 b. For the fiscal year beginning July 1, 2023, the combined 62 25 service and maintenance components of the per day reimbursement 62 26 rate paid for shelter care services shall be based on the 62 27 financial and statistical report submitted to the department. 62 28 The maximum per day reimbursement rate shall be the maximum 62 29 per day reimbursement rate in effect on June 30, 2023. The 62 30 department shall reimburse a shelter care provider at the</p>	<p>Requires the FY 2024 combined service and maintenance components of the reimbursement rate paid to shelter care providers to be based on the cost report submitted to the HHS. Also, requires a maximum reimbursement rate of \$101.83 per day, the rate in effect on June 30, 2023, and requires the HHS to reimburse shelter care providers at the actual and allowable unit cost, plus inflation, not to exceed the maximum reimbursement rate.</p>

62 31 provider's actual and allowable unit cost, plus inflation, not
62 32 to exceed the maximum reimbursement rate.

62 33 10. For the fiscal year beginning July 1, 2023, the
62 34 department shall calculate reimbursement rates for intermediate
62 35 care facilities for persons with an intellectual disability
63 1 at the 80th percentile. Beginning July 1, 2023, the rate
63 2 calculation methodology shall utilize the consumer price index
63 3 inflation factor applicable to the fiscal year beginning July
63 4 1, 2023.

Requires the HHS to calculate reimbursement rates for intermediate care facilities for persons with intellectual disabilities at the 80th percentile for FY 2024. The rate calculation methodology is required to use the Consumer Price Index inflation factor applicable for FY 2024.

63 5 11. The department may adopt emergency rules to implement
63 6 this section.

Allows the HHS to adopt emergency administrative rules to implement the Section of this Bill related to reimbursement rates.

63 7 Sec. 31. EMERGENCY RULES.

63 8 1. If necessary to comply with federal requirements
63 9 including time frames, or if specifically authorized by a
63 10 provision of this division of this Act, the department of
63 11 health and human services or the mental health and disability
63 12 services commission shall adopt administrative rules under
63 13 section 17A.4, subsection 3, and section 17A.5, subsection 2,
63 14 paragraph "b", to implement the provisions of this division
63 15 of this Act and shall submit such rules to the administrative
63 16 rules coordinator and the administrative code editor pursuant
63 17 to section 17A.5, subsection 1. The rules shall be effective
63 18 immediately upon filing unless a later date is specified in the
63 19 rules. Any rules adopted in accordance with this section shall
63 20 also be published as a notice of intended action as provided
63 21 in section 17A.4.

Allows the HHS or the Mental Health and Disability Services Commission to adopt emergency rules to comply with federal requirements or to implement this Division of this Bill. The rules are required effective immediately upon filing or on a later effective date specified in the rules unless delayed or suspended by the Administrative Rules Review Committee (ARRC), but shall not take effect before being reviewed by the ARRC.

63 22 2. If during a fiscal year, the department of health and
63 23 human services is adopting rules in accordance with this
63 24 section or as otherwise directed or authorized by state
63 25 law, and the rules will result in an expenditure increase
63 26 beyond the amount anticipated in the budget process or if the
63 27 expenditure was not addressed in the budget process for the
63 28 fiscal year, the department shall notify the general assembly
63 29 and the department of management concerning the rules and the
63 30 expenditure increase. The notification shall be provided at
63 31 least thirty calendar days prior to the date notice of the
63 32 rules is submitted to the administrative rules coordinator and

Requires the HHS to report to the General Assembly and the DOM at least 30 days prior to submitting administrative rules that have a fiscal impact that was not addressed in the budget process.

63 33 the administrative code editor.

63 34 Sec. 32. REPORTS. Unless otherwise provided, any reports or
63 35 other information required to be compiled and submitted under
64 1 this Act during the fiscal year beginning July 1, 2023, shall
64 2 be submitted on or before the dates specified for submission
64 3 of the reports or information.

Requires any reports required by this Bill to be submitted to the General Assembly on or before the dates specified for submission.

64 4 Sec. 33. EFFECTIVE UPON ENACTMENT. The following provision
64 5 of this division of this Act, being deemed of immediate
64 6 importance, takes effect upon enactment:
64 7 The provision relating to section 232.141 and directing
64 8 the department of health and human services to make the
64 9 determination, by June 15, 2023, of the distribution of funds
64 10 allocated for the payment of the expenses of court-ordered
64 11 services provided to juveniles which are a charge upon the
64 12 state.

Specifies that the provision directing the HHS to determine the distribution of funds allocated for the payment of State expenses of court-ordered services for juveniles by June 15, 2023, takes effect upon enactment.

64 13 DIVISION VI
64 14 DEPARTMENT OF HEALTH AND HUMAN SERVICES — HUMAN RIGHTS

64 15 Sec. 34. DEPARTMENT OF HEALTH AND HUMAN SERVICES — HUMAN
64 16 RIGHTS. There is appropriated from the general fund of the
64 17 state to the department of health and human services for the
64 18 fiscal year beginning July 1, 2023, and ending June 30, 2024,
64 19 the following amounts, or so much thereof as is necessary, to
64 20 be used for the purposes designated:

64 21	1. HUMAN RIGHTS CENTRAL ADMINISTRATION		
64 22	For salaries, support, maintenance, and miscellaneous		
64 23	purposes, and for not more than the following full-time		
64 24	equivalent positions:		
64 25	..... \$	186,913	
64 26	..... FTEs	5.54	

General Fund appropriation to the HHS for the Human Rights Central Administration.

DETAIL: This is a new appropriation for the HHS. Funding was previously appropriated by the Administration and Regulations Appropriations Act. This is a decrease of \$2,158 and no change in FTE positions compared to estimated FY 2023 due to restructuring the OCIO's Cybersecurity Office from fee-based funding to a General Fund appropriation.

64 27 2. COMMUNITY ADVOCACY AND SERVICES
64 28 For salaries, support, maintenance, and miscellaneous
64 29 purposes, and for not more than the following full-time
64 30 equivalent positions:

General Fund appropriation to the HHS for Community Advocacy and Services.

DETAIL: This is a new appropriation for the HHS. Funding was

64	31	..... \$	956,894
64	32	..... FTEs	7.55

previously appropriated from the Administration and Regulations Appropriations Act. This is no change in funding and a decrease of 0.08 FTE position compared to estimated FY 2023. Community Advocacy and Services is comprised of seven offices that promote self-sufficiency for their respective constituency populations by providing training, developing partnerships, and advocating on the populations' behalf. The seven offices include:

- Office on the Status of African Americans
- Office of Asian and Pacific Islander Affairs
- Office on the Status of Women
- Office of Latino Affairs
- Office of Persons with Disabilities
- Office of Deaf Services
- Office of Native Americans

64	33	3. CRIMINAL AND JUVENILE JUSTICE PLANNING	
64	34	a. For salaries, support, maintenance, and miscellaneous	
64	35	purposes, and for not more than the following full-time	
65	1	equivalent positions:	
65	2	..... \$	1,318,547
65	3	..... FTEs	9.00

General Fund appropriation to the Criminal and Juvenile Justice Planning Division (CJJP) of the HHS.

DETAIL: This is a new appropriation for the HHS. Funding was previously appropriated by the Justice System Appropriations Act. This is no change compared to estimated FY 2023.

65	4	b. (1) For a single grant to a program located in a city	
65	5	with a higher than average juvenile crime rate as determined by	
65	6	the department of health and human services and a population	
65	7	greater than 80,000 as determined by the 2020 federal decennial	
65	8	census, which may be used for studying, planning, programming,	
65	9	and capital, that is committed to deterring juvenile	
65	10	delinquency through early intervention in the criminal justice	
65	11	system by providing a comprehensive, multifaceted delivery of	
65	12	social services and which shall meet the guiding principles	
65	13	and standards for assessment centers set forth by the national	
65	14	assessment center association:	
65	15	..... \$	140,000

General Fund appropriation to the CJJP of the HHS for a single grant to a program committed to deterring juvenile delinquency through early intervention in the criminal justice system by providing a comprehensive, multifaceted delivery of social services to a city with a higher-than-average juvenile crime rate as determined by the CJJP and a population of greater than 80,000 as determined by the 2020 federal decennial census.

DETAIL: This is a new appropriation for the HHS. Funding was previously appropriated by the Justice System Appropriations Act. This is no change compared to estimated FY 2023. The grant funding is intended to be used for studying, planning, programming, and capital purchases related to a program that is committed to deterring juvenile delinquency through early intervention in the criminal justice system by providing a comprehensive, multifaceted delivery of social services and that is required to meet the guiding principles and standards for assessment centers set forth by the National Assessment Center Association.

NOTE: Family Resources of Davenport was selected to receive the

	funding in FY 2023. Family Resources offers survivor services, foster group care, family restoration, child welfare emergency services, and mental health care services.
65 16 (2) The program shall use no more than 5 percent of the 65 17 grant for administrative costs.	Requires that the program committed to deterring juvenile delinquency through early intervention in the criminal justice system use no more than 5.00% (\$7,000) of grant funding for administrative costs.
65 18 (3) A city shall not receive a grant under this paragraph, 65 19 or a similar grant from the state, for more than two 65 20 consecutive fiscal years unless no other city meets the 65 21 requirements specified in subparagraph (1).	Specifies that a city must not receive this grant, or a similar grant from the State of Iowa, for more than two consecutive fiscal years unless no other city meets the requirements specified in subsection 3, paragraph "b," subparagraph 1, of this Section.
65 22 c. The justice advisory board and the juvenile justice 65 23 advisory council shall coordinate their efforts in carrying out 65 24 their respective duties relative to juvenile justice.	Requires the Justice Advisory Board and the Juvenile Justice Advisory Council to coordinate their efforts.
65 25 Sec. 35. JUVENILE DETENTION HOME FUND. Moneys deposited 65 26 in the juvenile detention home fund created in section 232.142 65 27 during the fiscal year beginning July 1, 2023, and ending June 65 28 30, 2024, are appropriated to the department of health and 65 29 human services for the fiscal year beginning July 1, 2023, and 65 30 ending June 30, 2024, for distribution of an amount equal to 65 31 a percentage of the costs of the establishment, improvement, 65 32 operation, and maintenance of county or multicounty juvenile 65 33 detention homes in the fiscal year beginning July 1, 2022. 65 34 Moneys appropriated for distribution in accordance with 65 35 this section shall be allocated among eligible detention 66 1 homes, prorated on the basis of an eligible detention home's 66 2 proportion of the costs of all eligible detention homes in the 66 3 fiscal year beginning July 1, 2022. The percentage figure 66 4 shall be determined by the department of health and human 66 5 services based on the amount available for distribution for 66 6 the fund. Notwithstanding section 232.142, the financial aid 66 7 percentage of total costs payable by the state under that 66 8 provision for the fiscal year beginning July 1, 2023, shall be 66 9 limited to the amount appropriated for the purposes of this 66 10 section.	Requires funds deposited in the Juvenile Detention Home Fund to be distributed to eligible juvenile detention centers for FY 2024. Funds are to be allocated to the eligible county detention centers based on an amount equal to the FY 2023 juvenile detention home establishment, operation, maintenance, and improvement costs.

DIVISION VII

66 13 FY 2023-2024

66 14 Sec. 36. PHARMACEUTICAL SETTLEMENT ACCOUNT — DEPARTMENT
 66 15 OF HEALTH AND HUMAN SERVICES. There is appropriated from the
 66 16 pharmaceutical settlement account created in section 249A.33 to
 66 17 the department of health and human services for the fiscal year
 66 18 beginning July 1, 2023, and ending June 30, 2024, the following
 66 19 amount, or so much thereof as is necessary, to be used for the
 66 20 purpose designated:
 66 21 Notwithstanding any provision of law to the contrary, to
 66 22 supplement the appropriations made in this Act for health
 66 23 program operations under the medical assistance program for the
 66 24 fiscal year beginning July 1, 2023, and ending June 30, 2024:
 66 25 \$ 234,193

Pharmaceutical Settlement Account appropriation to the HHS for Health Program Operations appropriation.

DETAIL: This is no change compared to estimated FY 2023.

66 26 Sec. 37. QUALITY ASSURANCE TRUST FUND — DEPARTMENT OF
 66 27 HEALTH AND HUMAN SERVICES. Notwithstanding any provision to
 66 28 the contrary and subject to the availability of funds, there is
 66 29 appropriated from the quality assurance trust fund created in
 66 30 section 249L.4 to the department of health and human services
 66 31 for the fiscal year beginning July 1, 2023, and ending June
 66 32 30, 2024, the following amounts, or so much thereof as is
 66 33 necessary, for the purposes designated:
 66 34 To supplement the appropriation made in this Act from the
 66 35 general fund of the state to the department of health and human
 67 1 services for medical assistance for the same fiscal year:
 67 2 \$ 111,216,205

Quality Assurance Trust Fund appropriation to the HHS to supplement nursing facilities under the Medicaid Program.

DETAIL: This is an increase of \$54,911,066 compared to estimated FY 2023, which is related to increasing the Quality Assurance Assessment Fee from 3.00% to 6.00% effective April 1, 2023. This fee change was authorized in 2018 Iowa Acts, chapter [1165](#) (FY 2019 Health and Human Services Appropriation Act).

67 3 Sec. 38. HOSPITAL HEALTH CARE ACCESS TRUST FUND —
 67 4 DEPARTMENT OF HEALTH AND HUMAN SERVICES. Notwithstanding any
 67 5 provision to the contrary and subject to the availability of
 67 6 funds, there is appropriated from the hospital health care
 67 7 access trust fund created in section 249M.4 to the department
 67 8 of health and human services for the fiscal year beginning July
 67 9 1, 2023, and ending June 30, 2024, the following amounts, or so
 67 10 much thereof as is necessary, for the purposes designated:
 67 11 To supplement the appropriation made in this Act from the
 67 12 general fund of the state to the department of health and human
 67 13 services for medical assistance for the same fiscal year:
 67 14 \$ 33,920,554

Hospital Health Care Access Trust Fund appropriation to the HHS for the Medicaid Program.

DETAIL: This is no change compared to estimated FY 2023.

67 15 Sec. 39. MEDICAL ASSISTANCE PROGRAM — NONREVERSION

CODE: Requires nonreversion of funds from the Medicaid Program for

67 16 FOR FY 2023-2024. Notwithstanding section 8.33, if moneys
 67 17 appropriated for purposes of the medical assistance program for
 67 18 the fiscal year beginning July 1, 2023, and ending June 30,
 67 19 2024, from the general fund of the state, the quality assurance
 67 20 trust fund, and the hospital health care access trust fund, are
 67 21 in excess of actual expenditures for the medical assistance
 67 22 program and remain unencumbered or unobligated at the close
 67 23 of the fiscal year, the excess moneys shall not revert but
 67 24 shall remain available for expenditure for the purposes of the
 67 25 medical assistance program until the close of the succeeding
 67 26 fiscal year.

FY 2024. The funds are to carry forward and remain available for use and expenditure in FY 2025.

67 27
 67 28 DIVISION VIII
 67 29 DECATORIZATION CARRYOVER FUNDING — TRANSFER TO MEDICAID PROGRAM

67 30 Sec. 40. DECATORIZATION CARRYOVER FUNDING FY 2021 —
 67 31 TRANSFER TO MEDICAID PROGRAM. Notwithstanding section 232.188,
 67 32 subsection 5, paragraph "b", any state-appropriated moneys in
 67 33 the funding pool that remained unencumbered or unobligated at
 67 34 the close of the fiscal year beginning July 1, 2020, and were
 67 35 deemed carryover funding to remain available for the three
 68 1 succeeding fiscal years that still remain unencumbered or
 68 2 unobligated at the close of the fiscal year beginning July 1,
 68 3 2023, shall not revert but shall be transferred to the medical
 68 4 assistance program for the fiscal year beginning July 1, 2024.

CODE: Transfers decategorization carryover funding to Medicaid that would otherwise revert to the General Fund.

DETAIL: As of the March 2023 Medicaid Forecasting Group meeting, the Medicaid Forecasting Group is not anticipating any decategorization carryover funding to revert.

68 5
 68 6 DIVISION IX
 68 7 HEALTH AND HUMAN SERVICES — PRIOR APPROPRIATIONS AND OTHER PROVISIONS

68 8 FAMILY INVESTMENT PROGRAM GENERAL FUND

68 9 Sec. 41. 2022 Iowa Acts, chapter 1131, section 9, is amended
 68 10 by adding the following new subsection:
 68 11 NEW SUBSECTION 7. Notwithstanding section 8.33, moneys
 68 12 appropriated in this section that remain unencumbered or
 68 13 unobligated at the close of the fiscal year shall not revert
 68 14 but shall remain available for the purposes designated until
 68 15 the close of the succeeding fiscal year.

CODE: Allows any unexpended funds appropriated in 2022 Iowa Acts, [House File 2578](#) (FY 2023 Health and Human Services Appropriations Act), for FY 2023 from the General Fund for the FIP to remain available for FY 2024.

68 16 STATE CHILD CARE ASSISTANCE

68 17 Sec. 42. 2022 Iowa Acts, chapter 1131, section 17,
 68 18 subsection 8, is amended to read as follows:
 68 19 8. Notwithstanding section 8.33, moneys ~~advanced for~~
 68 20 ~~purposes of the programs developed by early childhood Iowa~~
 68 21 ~~areas, advanced for purposes of wraparound child care, or~~
 68 22 ~~received from the federal appropriations made for the purposes~~
 68 23 ~~of appropriated in this section that remain unencumbered or~~
 68 24 unobligated at the close of the fiscal year shall not revert
 68 25 to any fund but shall remain available for expenditure for the
 68 26 purposes designated until the close of the succeeding fiscal
 68 27 year.

CODE: Allows any unexpended funds appropriated in 2022 Iowa Acts, House File 2578 (FY 2023 Health and Human Services Appropriations Act), for FY 2023 from the General Fund for CCA to remain available for FY 2024.

68 28 CHILD AND FAMILY SERVICES

68 29 Sec. 43. 2022 Iowa Acts, chapter 1131, section 19, is
 68 30 amended by adding the following new subsection:
 68 31 NEW SUBSECTION 25. Notwithstanding section 8.33, moneys
 68 32 appropriated in this section that remain unencumbered or
 68 33 unobligated at the close of the fiscal year shall not revert
 68 34 but shall remain available for the purposes designated until
 68 35 the close of the succeeding fiscal year.

CODE: Allows any unexpended funds appropriated in 2022 Iowa Acts, House File 2578 (FY 2023 Health and Human Services Appropriations Act), for FY 2023 from the General Fund for Child and Family Services to remain available for FY 2024.

69 1 FIELD OPERATIONS

69 2 Sec. 44. 2022 Iowa Acts, chapter 1131, section 27, is
 69 3 amended by adding the following new subsection:
 69 4 NEW SUBSECTION 3. Notwithstanding section 8.33, moneys
 69 5 appropriated in this section that remain unencumbered or
 69 6 unobligated at the close of the fiscal year shall not revert
 69 7 but shall remain available for the purposes designated until
 69 8 the close of the succeeding fiscal year.

CODE: Allows any unexpended funds appropriated in 2022 Iowa Acts, House File 2578 (FY 2023 Health and Human Services Appropriations Act), for FY 2023 from the General Fund for Field Operations to remain available for FY 2024.

69 9 MORE OPTIONS FOR MATERNAL SUPPORT PROGRAM

69 10 Sec. 45. 2022 Iowa Acts, chapter 1131, section 28,
 69 11 subsection 8, is amended to read as follows:
 69 12 8. Of the funds appropriated under this section, \$500,000
 69 13 shall be used for the purposes of program administration
 69 14 and provision of pregnancy support services through the
 69 15 more options for maternal support program created in this
 69 16 Act. Notwithstanding section 8.33, moneys allocated in this
 69 17 subsection that remain unencumbered or unobligated at the close

CODE: Allows any unexpended funds allocated in 2022 Iowa Acts, House File 2578 (FY 2023 Health and Human Services Appropriations Act), for FY 2023 from the General Fund for the MOMS Program to remain available for FY 2024.

69 18 of the fiscal year shall not revert but shall remain available
69 19 for the purposes designated until the close of the succeeding
69 20 fiscal year.

69 21 GENERAL ADMINISTRATION

69 22 Sec. 46. 2022 Iowa Acts, chapter 1131, section 28, is
69 23 amended by adding the following new subsection:
69 24 NEW SUBSECTION 9. Notwithstanding section 8.33, moneys
69 25 appropriated in this section that remain unencumbered or
69 26 unobligated at the close of the fiscal year shall not revert
69 27 but shall remain available for the purposes designated until
69 28 the close of the succeeding fiscal year.

CODE: Allows any unexpended funds appropriated in 2022 Iowa Acts, House File 2578 (FY 2023 Health and Human Services Appropriations Act), for FY 2023 from the General Fund for General Administration to remain available for FY 2024.

69 29 QUALITY ASSURANCE TRUST FUND

69 30 Sec. 47. 2022 Iowa Acts, chapter 1131, section 36,
69 31 unnumbered paragraph 2, is amended to read as follows:
69 32 To supplement the appropriation made in this Act from the
69 33 general fund of the state to the department of health and human
69 34 services for medical assistance for the same fiscal year:
69 35 \$ 56,305,139
70 1 66,282,906

Supplemental appropriation to Medicaid in FY 2023 from the Quality Assurance Trust Fund.

DETAIL: Appropriates \$66,282,906 from the Fund in FY 2023, an increase of \$9,977,767 compared to the amount appropriated in 2022 Iowa Acts, House File 2578 (FY 2023 Health and Human Services Appropriations Act). This is related to increasing the Quality Assurance Assessment Fee from 3.00% to 6.00% effective April 1, 2023. This fee change was authorized in 2018 Iowa Acts, chapter [1165](#) (FY 2019 Health and Human Services Appropriation Act).

70 2 Sec. 48. EFFECTIVE DATE. This division of this Act, being
70 3 deemed of immediate importance, takes effect upon enactment.

Specifies that the provisions requiring any balance of the moneys appropriated in FY 2023 to the FIP, CCA, Child and Family Services, Field Operations, the MOMS Program, and General Administration to remain available for FY 2024, and increasing the FY 2023 appropriation from the Quality Assurance Trust Fund, are effective upon enactment.

70 4 DIVISION X
70 5 HEALTH AND HUMAN SERVICES — REPORT ON NONREVERSION OF FUNDS

70 6 Sec. 49. REPORT ON NONREVERSION OF FUNDS. The department
70 7 of health and human services shall report the expenditure of
70 8 any moneys for which nonreversion authorization was provided
70 9 for the fiscal year beginning July 1, 2022, and ending June 30,
70 10 2023, to the general assembly on a quarterly basis beginning

Requires the HHS to submit a report to the General Assembly on a quarterly basis, beginning October 1, 2023, on the nonreversion of funds for which nonreversion authorization was provided for FY 2023.

70 11 October 1, 2023.

70 12 DIVISION XI
70 13 ELIMINATION OF REPEAL OF HOSPITAL HEALTH CARE ACCESS ASSESSMENT
70 14 PROGRAM

70 15 Sec. 50. REPEAL. Section 249M.5, Code 2023, is repealed.

Eliminates Iowa Code section [249M.5](#), which repeals, as of July 1, 2023, Iowa Code chapter [249M](#) creating the Hospital Health Care Access Assessment Program and Hospital Health Care Access Trust (HHCAT) Fund.

DETAIL: The Hospital Health Care Access Assessment is imposed on privately owned hospitals paid on a Prospective Payment System (PPS) basis by Medicare and Medicaid. Revenue received from the assessment is deposited in the HHCAT Fund under the authority of the HHS, and is used to provide a supplemental appropriation to the Medicaid Program, matched with federal financial participation, intended to increase hospital reimbursement for PPS hospitals to the upper payment limit. The assessment is based on 1.26% of net patient revenue, and \$33,920,554 was appropriated in FY 2023 from the HHCAT Fund for Medicaid.

FISCAL IMPACT: The assessment revenue to the State for the Medicaid Program in FY 2024 is \$33,920,554. This is no change compared to estimated FY 2023.

70 16 Sec. 51. EFFECTIVE DATE. This division of this Act, being
70 17 deemed of immediate importance, takes effect upon enactment.

Specifies that Division XI of the Bill eliminating the repeal of the Hospital Health Care Access Assessment Program is effective upon enactment.

70 18 DIVISION XII
70 19 HEALTH AND HUMAN SERVICES — REALIGNMENT PROVISIONS

70 20 DIRECTOR OF HEALTH AND HUMAN SERVICES — INSTITUTIONS — BUYING
70 21 AND SELLING OF REAL ESTATE — FUND

70 22 Sec. 52. Section 218.94, as amended by 2023 Iowa Acts,
70 23 Senate File 514, section 411, as enacted is amended to read as
70 24 follows:

70 25 218.94 DIRECTOR MAY BUY AND SELL REAL ESTATE — OPTIONS —
70 26 FUND .

70 27 1. a. The director may secure options to purchase real

CODE: Requires proceeds of any real estate sold by the HHS Director to be deposited into a Capital Reinvestment Fund administered by the Department, and allows the funding to be used for property improvement on property owned by the State and used by the Department.

70 28 estate, to acquire and sell real estate, and to grant utility
70 29 easements, for the proper uses of the institutions. Real
70 30 estate shall be acquired and sold and utility easements
70 31 granted, upon such terms and conditions as the director may
70 32 determine. Upon sale of the real estate, the proceeds shall
70 33 be deposited ~~with the treasurer of state and credited to the~~
70 34 general fund of the state in a health and human services
70 35 capital reinvestment fund created in the state treasury under
71 1 the control of the department. There is appropriated from ~~the~~
71 2 general such capital reinvestment fund of the state a sum equal
71 3 to the proceeds deposited and credited to the ~~general capital~~
71 4 reinvestment fund of the state to the department, which may be
71 5 used to purchase other real estate, ~~or~~ for capital improvements
71 6 upon property under the director's control, ~~or for improvements~~
71 7 to property which is owned by the state and utilized by the
71 8 department.

71 9 b. Notwithstanding section 8.33, moneys in the capital
71 10 reinvestment fund shall not revert at the close of a fiscal
71 11 year, and shall not be transferred, used, obligated,
71 12 appropriated, or otherwise encumbered, except as provided in
71 13 this section. Notwithstanding section 12C.7, subsection 2,
71 14 interest or earnings on moneys deposited in the fund shall be
71 15 credited to the fund.

71 16 c. Any proceeds from the sale of real estate that were
71 17 credited to the general fund of the state pursuant to section
71 18 218.94, Code 2022, and that remain available on June 30, 2023,
71 19 are transferred to the capital reinvestment fund to be used for
71 20 the purposes of the fund.

71 21 2. The costs incident to securing of options, acquisition
71 22 and sale of real estate and granting of utility easements,
71 23 including but not limited to appraisals, invitations for
71 24 offers, abstracts, and other necessary costs, may be paid
71 25 from moneys appropriated for support and maintenance to the
71 26 institution at which the real estate is located. ~~Such costs~~
71 27 shall be and the source from which the moneys were appropriated
71 28 shall be reimbursed from the proceeds of the sale.
71 29 SCHOOL READY CHILDREN GRANTS ACCOUNT

71 30 Sec. 53. Section 256I.11, subsection 2, unnumbered

CODE: Allows any unexpended funds transferred to the Capital Reinvestment Fund to remain in the Fund in future fiscal years. Allows interest or earnings on moneys deposited in the Fund to be credited to the Fund.

CODE: Transfers any existing proceeds from the sale of real estate that were credited to the General Fund and that remain available on June 30, 2023, to the Fund.

CODE: Reimburses the source of funds for appraisals, invitations for offers, and other costs of a real estate sale from the proceeds of a sale.

CODE: Transfers authority of the School Ready Children Grants

71 31 paragraph 1, as amended by 2023 Iowa Acts, Senate File 514,
 71 32 section 1005, is amended to read as follows:
 71 33 A school ready children grants account is created in the
 71 34 fund under the authority of the director of the department of
 71 35 ~~education~~. Moneys credited to the account are appropriated
 72 1 to and shall be distributed by the department of ~~education~~ in
 72 2 the form of grants to early childhood Iowa areas pursuant to
 72 3 criteria established by the state board in accordance with law.

Account under the ECI Program from the Director of the Department of Education (DE) to the Director of the HHS.

72 4 DIVISION XIII
 72 5 ADMINISTRATOR OF CHILD AND FAMILY SERVICES CONFORMING REPEAL

72 6 Sec. 54. 2023 Iowa Acts, Senate File 514, section 1357, as
 72 7 enacted, is amended to read as follows:
 72 8 SEC. 1357. REPEAL. Sections 135.2, 135.3, 135.6, 135.7,
 72 9 135.8, 135.9, 135.10, 216A.2, 217.7, 217.8, 217.9, 217.10,
 72 10 217.15, 217.16, 217.17, 218.19, 218.20, 218.40, 218.53, 218.54,
 72 11 222.6, 227.19, 231.22, and 234.2, Code 2023, are repealed.

Amends [Senate File 514](#) (State Government Alignment Act) to include Iowa Code section [217.8](#) in the list of sections repealed by the Act.

72 12 DIVISION XIV
 72 13 HEALTH POLICY OVERSIGHT COMMITTEE — MEDICAID PROGRAM

72 14 Sec. 55. Section 2.45, subsection 5, Code 2023, is amended
 72 15 to read as follows:
 72 16 5. The legislative health policy oversight committee,
 72 17 which shall be composed of ten members of the general
 72 18 assembly, consisting of five members from each house, to
 72 19 be appointed by the legislative council. The legislative
 72 20 health policy oversight committee ~~shall~~ may meet ~~at least two~~
 72 21 ~~times; annually, during the legislative interim~~ to provide
 72 22 continuing oversight for Medicaid managed care, and to ensure
 72 23 effective and efficient administration of the program, address
 72 24 stakeholder concerns, monitor program costs and expenditures,
 72 25 and make recommendations.

CODE: Changes the meeting frequency of the Legislative Health Policy Oversight Committee from twice annually to at most once annually.

72 26 DIVISION XV
 72 27 PUBLIC ASSISTANCE PROGRAM PROVISIONS
 72 28 Sec. 56. Section 234.1, subsection 6, as enacted by 2023
 72 29 Iowa Acts, Senate File 514, section 669, is amended to read as
 72 30 follows:

72 31 6. "Supplemental nutrition assistance program" or "SNAP"

CODE: Provides definition for "Supplemental Nutrition Assistance

72 32 means benefits provided by the federal program administered
72 33 through 7 C.F.R.pts.270 – ~~280~~ 283, as amended.

Program" or "SNAP" by reference to the federal program administered through [7 C.F.R.pts.270 – 283](#).

72 34 Sec. 57. Section 239.1, subsections 2 and 3, if enacted by
72 35 2023 Iowa Acts, Senate File 494, are amended by striking the
73 1 subsections and inserting in lieu thereof the following:
73 2 2. "Asset" for the purposes of the asset test for the
73 3 supplemental nutrition assistance program under section 239.4
73 4 means all of the following resources countable toward the
73 5 maximum allowed household asset limit of fifteen thousand
73 6 dollars:
73 7 a. All liquid resources.
73 8 b. All other personal property excluding one vehicle and
73 9 the fair market value in excess of ten thousand dollars of an
73 10 additional vehicle.
73 11 3. "Asset test" for the purposes of the asset test for
73 12 the supplemental nutrition assistance program under section
73 13 239.4 means the comparison of the collective value of all
73 14 countable assets of the members of the applicant's household to
73 15 the maximum allowed household asset limit of fifteen thousand
73 16 dollars.

CODE: Amends 2023 Iowa Acts, [Senate File 494](#) (Public Assistance Program Oversight Act), if enacted, to specify that the definitions of "asset" and "asset test" are for the purposes of the SNAP.

73 17 Sec. 58. Section 239.4, subsection 1, if enacted by 2023
73 18 Iowa Acts, Senate File 494, is amended to read as follows:
73 19 1. For the purposes of determining eligibility for receipt
73 20 of SNAP benefits, the department shall conduct an asset test
73 21 on all members of the applicant's household. The allowable
73 22 financial resources to be included in or excluded from a
73 23 determination of eligibility for SNAP shall be those specified
73 24 in ~~7 U.S.C. §2014(g)(1)~~ 7 U.S.C. §2014(g), to the extent
73 25 consistent with the term "asset" as defined in this chapter.

CODE: Amends 2023 Iowa Acts, Senate File 494 (Public Assistance Program Oversight Act), if enacted, to include financial resources allowable under [7 U.S.C. §2014\(g\)](#) as part of an asset review for the SNAP.

73 26 Sec. 59. Section 239.9, subsection 1, if enacted by 2023
73 27 Iowa Acts, Senate File 494, is amended to read as follows:
73 28 1. Following a review of an applicant's or recipient's
73 29 eligibility under this chapter, the department may refer cases
73 30 of suspected fraud along with any supportive information to
73 31 the department of inspections, ~~and appeals,~~ and licensing for
73 32 review.

CODE: Inserts language to make a technical change.

73 33 Sec. 60. Section 239.10, subsection 1, if enacted by 2023

CODE: Strikes language to make a technical change.

73 34 Iowa Acts, Senate File 494, is amended to read as follows:
 73 35 1. The department of ~~health and human services~~ shall adopt
 74 1 rules pursuant to chapter 17A to administer this chapter.

74 2 Sec. 61. 2023 Iowa Acts, Senate File 494, if enacted, is
 74 3 amended by adding the following new section:
 74 4 NEW SECTION SEC. 10A.NEW SECTION 239.11 PUBLIC
 74 5 ASSISTANCE MODERNIZATION FUND.
 74 6 1. A public assistance modernization fund is created in
 74 7 the state treasury under the control of the department. The
 74 8 fund shall consist of moneys appropriated or transferred to, or
 74 9 deposited in, the fund as provided by law.
 74 10 2. The moneys in the fund shall be used and shall be
 74 11 appropriated only for the purposes of modernizing information
 74 12 technology systems and for other modernization initiatives
 74 13 related to delivery of public assistance programs.

74 14 3. The moneys deposited in the fund are not subject to
 74 15 section 8.33 and shall not be transferred, used, obligated,
 74 16 appropriated, or otherwise encumbered except as provided in
 74 17 this section. Notwithstanding section 12C.7, subsection 2,
 74 18 interest or earnings on moneys deposited in the state capitol
 74 19 maintenance fund shall be credited to the fund.

74 20 4. This section is repealed July 1, 2028.

74 21 Sec. 62. 2023 Iowa Acts, Senate File 494, section 12,
 74 22 subsection 6, if enacted, is amended to read as follows:

74 23 6. The department of health and human services may contract
 74 24 with multiple third-party vendors to administer this Act.

74 25 Sec. 63. ONE-TIME SETTLEMENT FUNDS — DEPOSIT IN PUBLIC
 74 26 ASSISTANCE MODERNIZATION FUND. For the fiscal year beginning
 74 27 July 1, 2023, and ending June 30, 2024, the department of
 74 28 health and human services shall deposit up to \$8,000,000
 74 29 received from one-time medical assistance settlement funds in
 74 30 the public assistance modernization fund, if enacted in this
 74 31 division of this Act.

74 32 DIVISION XVI
 74 33 HOME AND COMMUNITY-BASED SERVICES WAIVER RECIPIENT RESIDENCES

CODE: Amends 2023 Iowa Acts, Senate File 494 (Public Assistance Program Oversight Act), if enacted, to create the Public Assistance Modernization Fund in the State Treasury under control of the HHS to use for the purposes of modernizing information technology systems and for other modernization initiatives related to delivery of public assistance programs.

CODE: Specifies that moneys in the Public Assistance Modernization Fund are not subject to reversion and are required to be used according to Section 10A of SF 494.

CODE: Repeals Section 10A of SF 494 effective July 1, 2028.

CODE: Inserts language to make a technical change.

CODE: Appropriates up to \$8,000,000 in one-time Medicaid program settlement funds to the Public Assistance Modernization Fund, if 2023 Iowa Acts, Senate File 494 (Public Assistance Program Oversight Act), is enacted.

74 34 — SPRINKLER SYSTEMS

74 35 Sec. 64. Section 335.34, Code 2023, is amended to read as
 75 1 follows:
 75 2 335.34 HOME AND COMMUNITY-BASED SERVICES WAIVER RECIPIENT
 75 3 RESIDENCE.

75 4 1. A county, county board of supervisors, or county zoning
 75 5 commission shall consider the residence of the recipient of
 75 6 services under a home and community-based services waiver as
 75 7 a residential use of property for the purposes of zoning and
 75 8 shall treat the use of the residence as a permitted use in all
 75 9 residential zones or districts, including all single-family
 75 10 residential zones or districts, of the county.

75 11 2. A county, county board of supervisors, or a county zoning
 75 12 commission shall not require that the recipient, or the owner
 75 13 of such a residence if other than the recipient, obtain a
 75 14 conditional use permit, special use permit, special exception,
 75 15 or variance. A county, county board of supervisors, or county
 75 16 zoning commission shall not establish limitations regarding the
 75 17 proximity of one such residence to another.

75 18 3. A county, county board of supervisors, or a county
 75 19 zoning commission shall not classify such a residence as a
 75 20 residential group R-3 occupancy or as a care facility within
 75 21 a dwelling for the purposes of enforcement of compliance
 75 22 with the sprinkler systems provisions specified in section
 75 23 903.3.1.3 of the international building code or section P2904
 75 24 of the international residential code, if adopted, or if such
 75 25 residence is inspected by the county.

75 26 ~~3.~~ 4. This section applies to the residence of a recipient
 75 27 of services under a home and community-based services waiver if
 75 28 the residence meets any of the following conditions:

75 29 a. The residence is a single-family dwelling owned or rented
 75 30 by the recipient.

75 31 b. The residence is a multifamily dwelling which does not
 75 32 hold itself out to the public as a community-based residential
 75 33 provider otherwise regulated by law, including but not limited
 75 34 to a residential care facility, and which provides dwelling
 75 35 units to no more than four recipients of services under a home
 76 1 and community-based services waiver at any one time.

76 2 ~~4.~~ 5. For the purposes of this section, "home and
 76 3 community-based services waiver" means "waiver" as defined in

CODE: Amends Iowa Code section [335.34](#) regarding HCBS waiver recipient residences to require a county, county board of supervisors, or county zoning commission to conform with specifications in the International Building Code or the International Residence Code that would allow more HCBS residences without sprinkler systems.

CODE: Prohibits a county, county board of supervisors, or a county zoning commission from classifying an HCBS waiver recipient residence as a residential group R-3 occupancy or care facility within a dwelling for the purposes of enforcement of compliance with sprinkler system provisions specified in section [903.3.1.3](#) of the International Building Code or section [P2904](#) of the International Residence Code, if adopted, or if the residence is inspected by the county.

76 4 section 249A.29.

76 5 Sec. 65. Section 414.32, Code 2023, is amended to read as
 76 6 follows:
 76 7 414.32 HOME AND COMMUNITY-BASED SERVICES WAIVER RECIPIENT
 76 8 RESIDENCE.

76 9 1. A city, city council, or city zoning commission shall
 76 10 consider the residence of the recipient of services under a
 76 11 home and community-based services waiver as a residential use
 76 12 of property for the purposes of zoning and shall treat the use
 76 13 of the residence as a permitted use in all residential zones
 76 14 or districts, including all single-family residential zones or
 76 15 districts, of the city.

76 16 2. A city, city council, or city zoning commission shall
 76 17 not require that the recipient, or owner of such residence if
 76 18 other than the recipient, obtain a conditional use permit,
 76 19 special use permit, special exception, or variance. A city,
 76 20 city council, or city zoning commission shall not establish
 76 21 limitations regarding the proximity of one such residence to
 76 22 another.

76 23 3. A city, city council, or city zoning commission shall not
 76 24 classify such a residence as a residential group R-3 occupancy
 76 25 or as a care facility within a dwelling for the purposes of
 76 26 enforcement of compliance with the sprinkler systems provisions
 76 27 specified in section 903.3.1.3 of the international building
 76 28 code or section P2904 of the international residential code, if
 76 29 adopted, or if such residence is inspected by the city.

76 30 ~~3.~~ 4. This section applies to the residence of a recipient
 76 31 of services under a home and community-based services waiver if
 76 32 the residence meets any of the following conditions:

76 33 a. The residence is a single-family dwelling owned or rented
 76 34 by the recipient.

76 35 b. The residence is a multifamily dwelling which does not
 77 1 hold itself out to the public as a community-based residential
 77 2 provider otherwise regulated by law, including but not limited
 77 3 to a residential care facility, and which provides dwelling
 77 4 units to no more than four recipients of services under a home
 77 5 and community-based services waiver at any one time.

77 6 ~~4.~~ 5. For the purposes of this section, "home and
 77 7 community-based services waiver" means "waiver" as defined in
 77 8 section 249A.29.

CODE: Amends Iowa Code section [414.32](#) regarding HCBS waiver recipient residences to require a city, city council, or city zoning commission to conform with specifications in the International Building Code or the International Residence Code that would allow more HCBS residences without sprinkler systems.

CODE: Prohibits a city, city council, or a city zoning commission from classifying an HCBS waiver recipient residence as a residential group R-3 occupancy or care facility within a dwelling for the purposes of enforcement of compliance with sprinkler system provisions specified in section 903.3.1.3 of the International Building Code or section P2904 of the International Residence Code, if adopted, or if the residence is inspected by the city.

77 9 Sec. 66. EFFECTIVE DATE. This division of this Act, being
77 10 deemed of immediate importance, takes effect upon enactment.

Specifies that Division XV of the Bill relating to HCBS sprinkler systems takes effect upon enactment.

77 11 DIVISION XVII
77 12 STATE-FUNDED FAMILY MEDICINE OBSTETRICS FELLOWSHIP PROGRAM

77 13 Sec. 67. NEW SECTION 135.182 STATE-FUNDED FAMILY MEDICINE
77 14 OBSTETRICS FELLOWSHIP PROGRAM — FUND.

77 15 1. The department shall establish a state-funded family
77 16 medicine obstetrics fellowship program to increase access
77 17 to family medicine obstetrics practitioners in rural and
77 18 underserved areas of the state. A person who has completed an
77 19 accreditation council for graduate medical education residency
77 20 program in family medicine is eligible for participation
77 21 in the fellowship program. Participating fellows shall
77 22 enter into a program agreement with a participating teaching
77 23 hospital which, at a minimum, requires the fellow to complete a
77 24 one-year fellowship and to engage in full-time family medicine
77 25 obstetrics practice in a rural or underserved area of the
77 26 state for a period of at least five years within nine months
77 27 following completion of the fellowship and receipt of a license
77 28 to practice medicine in the state.

Requires the HHS to establish a State-funded Family Medicine Obstetrics Fellowship Program in rural and underserved areas of the State. Participants will have completed an accredited residency program in family medicine and will be required to enter into a program agreement with a teaching hospital for a minimum of one year, after which they will engage in full-time practice of family medicine obstetrics in a rural or underserved part of the State for at least five years.

77 29 2. Each fellow participating in the program shall be
77 30 eligible for a salary and benefits including a stipend as
77 31 determined by the participating teaching hospital which shall
77 32 be funded through the family medicine obstetrics fellowship
77 33 program fund.

Specifies that participants in the Program will be eligible for a salary and benefits as determined by the teaching hospital and funded by through the Family Medicine Obstetrics Fellowship Program Fund.

77 34 3. The department shall adopt rules pursuant to chapter
77 35 17A to administer the program, including defining rural and
78 1 underserved areas for the purpose of the required full-time
78 2 practice of a person following completion of the fellowship.

Requires the HHS to adopt administrative rules to administer the State-funded Family Medicine Obstetrics Fellowship Program.

78 3 4. a. A family medicine obstetrics fellowship program
78 4 fund is created in the state treasury consisting of the moneys
78 5 appropriated or credited to the fund by law. Notwithstanding
78 6 section 8.33, moneys in the fund at the end of each fiscal year
78 7 shall not revert to any other fund but shall remain in the fund
78 8 for use in subsequent fiscal years. Moneys in the fund are
78 9 appropriated to the department to be used to fund fellowship

Creates the Family Medicine Obstetrics Fellowship Program Fund in the State Treasury. Moneys in the Fund do not revert to the General Fund at the end of the fiscal year.

78 10 positions as provided in this section.

78 11 b. For the fiscal year beginning July 1, 2023, and each
78 12 fiscal year beginning July 1 thereafter, there is appropriated
78 13 from the general fund of the state for deposit in the family
78 14 medicine obstetrics fellowship program fund an amount
78 15 sufficient to support the creation of four fellowship positions
78 16 as provided in this section.

Appropriates from the General Fund for FY 2024 and each fiscal year after an amount sufficient to support creation of four fellowship positions.

78 17 5. The department and the participating teaching hospitals
78 18 shall regularly evaluate and document their experiences
78 19 including identifying ways the program may be modified or
78 20 expanded to facilitate increased access to family medicine
78 21 obstetrics practitioners in rural and underserved areas of the
78 22 state. The department shall submit an annual report to the
78 23 general assembly by January 1. The report shall include the
78 24 number of fellowships funded to date and any other information
78 25 identified by the department and the participating teaching
78 26 hospitals as indicators of outcomes and the effectiveness of
78 27 the program.

Directs the HHS and participating hospitals to evaluate and document their experiences to identify ways to modify or expand the Program to facilitate increased access to obstetrics services in rural and underserved parts of the State. The HHS is directed to submit an annual report to the General Assembly by January 1 identifying the number of fellowships funded as well as any other information identified as indicators of outcomes and effectiveness of the Program.

78 28 6. For the purposes of this section, "teaching hospital"
78 29 means a hospital or medical center that provides medical
78 30 education to prospective and current health professionals.

Defines "teaching hospital" as a hospital or medical center that provides medical education to prospective and current health professionals.

78 31 DIVISION XVIII
78 32 ADOPTION SUBSIDY PROGRAM — NONRECURRING ADOPTION EXPENSES

78 33 Sec. 68. NEW SECTION 234.48 ADOPTION SUBSIDY —
78 34 NONRECURRING ADOPTION EXPENSES.
78 35 Notwithstanding any provision to the contrary, the maximum
79 1 reimbursement provided to an adoptive parent under the
79 2 adoption subsidy program for nonrecurring adoption expenses
79 3 is one thousand dollars. For the purposes of this section,
79 4 "nonrecurring adoption expenses" means the same as defined in 45
79 5 C.F.R. §1356.41. The department shall adopt rules pursuant to
79 6 chapter 17A to administer this section.

CODE: Sets the maximum reimbursement provided to an adoptive parent under the Adoption Subsidy Program for nonrecurring adoption expenses at \$1,000.

79 7 Sec. 69. REPEAL. 2010 Iowa Acts, chapter 1031, section 408,
79 8 is repealed.

CODE: Repeals 2010 Iowa Acts, chapter [1031](#), section 408, wherein the maximum reimbursement provided to an adoptive parent for nonrecurring court costs and legal expenses is currently set at \$500.

79 9 DIVISION XIX
79 10 SAFE HAVEN ACT HARMONIZATION

79 11 Sec. 70. Section 233.2, Code 2023, is amended to read as
79 12 follows:

79 13 233.2 NEWBORN INFANT CUSTODY RELEASE PROCEDURES.

79 14 1. a. A parent of a newborn infant may voluntarily release
79 15 custody of the newborn infant ~~by~~ as follows:

79 16 (1) By relinquishing physical custody of the newborn
79 17 infant, without expressing an intent to again assume physical
79 18 custody, at an institutional health facility or a fire station,
79 19 to an adoption service provider, or by authorizing another
79 20 person to relinquish physical custody on the parent's behalf.
79 21 If physical custody of the newborn infant is not relinquished
79 22 directly to an individual on duty at ~~the~~ an institutional
79 23 health facility or a fire station, or to an adoption service
79 24 provider, the parent may take other actions to be reasonably
79 25 sure that ~~an~~ the individual on duty or the adoption service
79 26 provider is aware that the newborn infant has been left at
79 27 the institutional health facility, the fire station, or the
79 28 location of the adoption service provider. The actions may
79 29 include but are not limited to making telephone contact with
79 30 the institutional health facility, the fire station, or the
79 31 adoption service provider, or a 911 service.

79 32 (2) By relinquishing physical custody of the newborn infant
79 33 to medical staff at a hospital or other facility following
79 34 delivery of the newborn infant in the hospital or other
79 35 facility when the parent notifies the medical staff that the
80 1 parent is voluntarily relinquishing physical custody of the
80 2 newborn infant without expressing an intent to again assume
80 3 physical custody.

80 4 (3) By relinquishing physical custody of the newborn infant
80 5 at a hospital, a fire station, or an emergency medical care
80 6 provider location, through a newborn safety device, without
80 7 expressing an intent to again assume physical custody.

80 8 b. In lieu of the procedure described in paragraph "a",
80 9 a parent of a newborn infant may make telephone contact with
80 10 a 911 service and relinquish physical custody of the newborn
80 11 infant, without expressing an intent to again assume physical
80 12 custody, to a first responder who responds to the 911 telephone
80 13 call.

Details and delineates the duties and obligations of a fire station, an adoption service provider, hospital staff, or an emergency medical provider in the event of a voluntary relinquishment of a newborn through the Newborn Safe Haven Act as determined by which entity is chosen by the relinquisher to receive physical custody of the newborn.

80 14 c. For the purposes of this chapter and for any judicial
80 15 proceedings associated with the newborn infant, a rebuttable
80 16 presumption arises that the person who relinquishes physical
80 17 custody ~~at an institutional health facility or to a first~~
80 18 ~~responder~~ in accordance with this section is the newborn
80 19 infant's parent or has relinquished physical custody with the
80 20 parent's authorization.

80 21 2. a. Unless the parent or other person relinquishing
80 22 physical custody of a newborn infant clearly expresses an
80 23 intent to return to again assume physical custody of the
80 24 newborn infant, ~~an~~ the individual on duty or the medical staff
80 25 at the institutional health facility, the emergency medical
80 26 care provider location, or the fire station at which physical
80 27 custody of the newborn infant was relinquished, the adoption
80 28 service provider to whom physical custody of the newborn infant
80 29 was relinquished, or a the first responder to whom physical
80 30 custody of the newborn infant was relinquished, pursuant
80 31 to subsection 1 shall take physical custody of the newborn
80 32 infant. The individual on duty or the medical staff, the
80 33 adoption service provider, or the first responder who takes
80 34 physical custody of the newborn infant may request the parent
80 35 or other person to provide the name of the parent or parents
81 1 and information on the medical history of the newborn infant
81 2 and the newborn infant's parent or parents. However, the
81 3 parent or other person is not required to provide the names or
81 4 medical history information to comply with this section. The
81 5 individual on duty or the medical staff, the adoption service
81 6 provider, or the first responder who takes physical custody of
81 7 the newborn infant may perform reasonable acts necessary to
81 8 protect the physical health or safety of the newborn infant.
81 9 The individual on duty and or the medical staff, the adoption
81 10 service provider, and the first responder to whom physical
81 11 custody of the newborn infant was relinquished, and the
81 12 institutional health facility in, the emergency medical care
81 13 provider location, and the fire station at which the individual
81 14 was on duty and the first responder physical custody of the
81 15 newborn infant was relinquished are immune from criminal or
81 16 civil liability for any acts or omissions made in good faith to
81 17 comply with this section.

81 18 b. If the physical custody of a newborn infant is
81 19 relinquished at an emergency medical care provider location or

81 20 a fire station, to an adoption service provider, or to a first
81 21 responder, the individual on duty at the emergency medical
81 22 care provider location or the fire station, the adoption
81 23 service provider, or the first responder who responded to the
81 24 911 telephone call shall transport the newborn infant to the
81 25 nearest institutional health facility. The individual on duty
81 26 at the emergency medical care provider location or the fire
81 27 station, the adoption service provider, or the first responder
81 28 who took physical custody of the newborn infant shall provide
81 29 any parental identification or medical history information to
81 30 the institutional health facility.

81 31 c. If the physical custody of the newborn infant is
81 32 relinquished at an institutional health facility, the state
81 33 shall reimburse the institutional health facility for the
81 34 institutional health facility's actual expenses in providing
81 35 care to the newborn infant and in performing acts necessary to
82 1 protect the physical health or safety of the newborn infant.
82 2 The reimbursement shall be paid from moneys appropriated for
82 3 this purpose to the department of ~~human services~~.

82 4 d. If the name of the parent is unknown to the institutional
82 5 health facility, the individual on duty at the institutional
82 6 health facility or other person designated by the institutional
82 7 health facility at which physical custody of the newborn infant
82 8 was relinquished shall submit the certificate of birth report
82 9 as required pursuant to section 144.14. If the name of the
82 10 parent is disclosed to the institutional health facility,
82 11 the facility shall submit the certificate of birth report as
82 12 required pursuant to section 144.13. The department of ~~public~~
82 13 ~~health~~ shall not file the certificate of birth with the county
82 14 of birth and shall otherwise maintain the confidentiality of
82 15 the birth certificate in accordance with section 144.43.

82 16 3. a. As soon as possible after the individual on duty
82 17 or the medical staff, the adoption service provider, or the
82 18 first responder assumes physical custody of a newborn infant
82 19 released under subsection 1, and, if applicable, the individual
82 20 on duty at the emergency medical care provider location
82 21 or the fire station, the adoption service provider, or the
82 22 first responder transports the newborn infant to the nearest
82 23 institutional health facility under subsection 2, paragraph
82 24 "b", the individual ~~or~~ on duty or the medical staff shall notify
82 25 either the department or an adoption service provider and the

82 26 first responder shall notify the department of human services
82 27 ~~and the~~. The department or the adoption service provider shall
82 28 take the actions necessary to assume the care, control, and
82 29 custody of the newborn infant. ~~The~~ as follows:

82 30 (1) If physical custody of the newborn infant was not
82 31 initially relinquished to an adoption service provider,
82 32 the department shall immediately notify the juvenile court
82 33 and the county attorney of the department's action and the
82 34 circumstances surrounding the action and request an ex parte
82 35 order from the juvenile court ordering, in accordance with the
83 1 requirements of section 232.78, subsection 9, the department
83 2 to take custody of the newborn infant. Upon receiving the
83 3 order, the department shall take custody of the newborn
83 4 infant. After the department takes custody of the newborn
83 5 infant, notwithstanding any provision to the contrary relating
83 6 to priority placement of the child under section 232.78, the
83 7 department shall, if feasible, place the newborn infant in
83 8 a prospective adoptive home. The department shall maintain
83 9 a list of prospective adoptive homes that have completed
83 10 placement investigations and have been preapproved by the
83 11 department or a certified adoption investigator.

83 12 (2) If physical custody of the newborn infant was initially
83 13 relinquished to an adoption service provider, the adoption
83 14 service provider shall immediately notify the juvenile court
83 15 and the county attorney of the adoption service provider's
83 16 action and the circumstances surrounding the action and
83 17 request an ex parte order from the juvenile court ordering, in
83 18 accordance with the requirements of section 232.78, subsection
83 19 9, the adoption service provider to take custody of the
83 20 newborn infant. Upon receiving the order, the adoption service
83 21 provider shall take custody of the newborn infant.

83 22 b. Within twenty-four hours of the department or the
83 23 adoption service provider taking custody of the newborn infant,
83 24 the department or the adoption service provider shall notify
83 25 the juvenile court and the county attorney in writing of the
83 26 department's or adoption service provider's action and the
83 27 circumstances surrounding the action.

83 28 c. Within twenty-four hours of the adoption service provider
83 29 taking custody of the newborn infant, the adoption service
83 30 provider shall notify the department in writing that the
83 31 adoption service provider has taken custody of the newborn

83 32 infant and will comply with the requirements of chapter 233.
83 33 4. a. Upon being notified in writing by the department or
83 34 the adoption service provider under subsection 3, the county
83 35 attorney shall file a petition alleging the newborn infant to
84 1 be a child in need of assistance in accordance with section
84 2 232.87 and a petition for termination of parental rights with
84 3 respect to the newborn infant in accordance with section
84 4 232.111, subsection 2, paragraph "a". A hearing on a child in
84 5 need of assistance petition filed pursuant to this subsection
84 6 shall be held at the earliest practicable time. A hearing on a
84 7 termination of parental rights petition filed pursuant to this
84 8 subsection shall be held no later than thirty days after the
84 9 day the physical custody of the newborn child was relinquished
84 10 in accordance with subsection 1 unless the juvenile court
84 11 continues the hearing beyond the thirty days for good cause
84 12 shown.

84 13 b. Notice of a petition filed pursuant to this subsection by
84 14 either the department or the adoption service provider shall
84 15 be provided to any known parent and others in accordance with
84 16 the provisions of chapter 232 and shall be served upon any
84 17 putative father registered with the state registrar of vital
84 18 statistics pursuant to section 144.12A. In addition, prior to
84 19 holding a termination of parental rights hearing with respect
84 20 to the newborn infant, notice by publication shall be provided
84 21 as described in section 600A.6, subsection 5.

84 22 5. Reasonable efforts, as defined in section 232.102, that
84 23 are made in regard to the newborn infant shall be limited to
84 24 the efforts made in a timely manner to finalize a permanency
84 25 plan for the newborn infant.

84 26 6. ~~An~~ The individual on duty or the medical staff at an
84 27 institutional health facility, emergency medical care provider
84 28 location, or fire station, the adoption service provider, or
84 29 the first responder who assumes physical custody of a newborn
84 30 infant upon the release of the newborn infant under subsection
84 31 1 shall be provided notice of any hearing held concerning
84 32 the newborn infant at the same time notice is provided to
84 33 other parties to the hearing and the individual on duty or the
84 34 medical staff, the adoption service provider, or the first
84 35 responder may provide testimony at the hearing.

85 1 Sec. 71. Section 233.6, Code 2023, is amended to read as
85 2 follows:

Requires the HHS to develop and distribute informational materials informing the public of a parent's rights and relinquishment procedures

85	3	233.6 EDUCATIONAL AND PUBLIC INFORMATION.	established under the Newborn Safe Haven Act as described in Iowa
85	4	The department of human services, in consultation with the	Code chapter 233 .
85	5	Iowa department of public health and the department of justice,	
85	6	shall develop and distribute the following:	
85	7	1. An information card or other publication for	
85	8	distribution by an institutional health facility, <u>an emergency</u>	
85	9	<u>medical care provider location, a fire station, an adoption</u>	
85	10	<u>service provider, or a first responder to a parent who releases</u>	
85	11	<u>custody of a newborn infant in accordance with this chapter.</u>	
85	12	The publication shall inform the parent of a parent's rights	
85	13	under section 233.4, explain the request for medical history	
85	14	information under section 233.2, subsection 2, and provide	
85	15	other information deemed pertinent by the departments.	
85	16	2. Educational materials, public information announcements,	
85	17	and other resources to develop awareness of the availability	
85	18	of the newborn safe haven Act <u>and the involvement of adoption</u>	
85	19	<u>service providers</u> among adolescents, young parents, and others	
85	20	who might avail themselves of this chapter.	
85	21	3. Signage that may be used to identify the institutional	
85	22	health facilities, <u>emergency medical care provider locations,</u>	
85	23	<u>fire stations, and adoption service provider locations</u> at which	
85	24	physical custody of a newborn infant may be relinquished in	
85	25	accordance with this chapter.	
85	26	Sec. 72. 2023 Iowa Acts, Senate File 514, section 656,	Strikes section 656 of 2023 Iowa Acts, Senate File 514 (State
85	27	amending section 233.6, unnumbered paragraph 1, Code 2023, as	Government Alignment Act), wherein Iowa Code section 233.6,
85	28	enacted, is amended by striking the section.	unnumbered paragraph 1 is struck.
85	29	Sec. 73. 2023 Iowa Acts, House File 425, section 2, amending	Strikes section 2 of 2023 Iowa Acts, House File 425 , wherein the
85	30	section 233.2, Code 2023, if enacted, is amended by striking	Newborn Safe Haven Act is amended to describe release procedures
85	31	the section.	for relinquishing an infant at a fire station, hospital, or to emergency
			medical care provider.
85	32	Sec. 74. 2023 Iowa Acts, House File 425, section 4, amending	Strikes section 4 of 2023 Iowa Acts, House File 425, wherein the
85	33	section 233.6, Code 2023, if enacted, is amended by striking	Newborn Safe Haven Act is amended to include emergency medical
85	34	the section.	providers, and fire stations as entities responsible for dissemination of
			information to the public.
85	35	Sec. 75. 2023 Iowa Acts, House File 474, section 8, amending	Strikes section 8 of 2023 Iowa Acts, House File 474 , wherein the
86	1	section 233.2, Code 2023, if enacted, is amended by striking	Newborn Safe Haven Act is amended to describe release procedures
86	2	the section.	for relinquishing an infant to an adoption service provider.

86 3 Sec. 76. 2023 Iowa Acts, House File 474, section 10,
86 4 amending section 233.6, Code 2023, if enacted, is amended by
86 5 striking the section.

Strikes section 10 of 2023 Iowa Acts, House File 474, wherein the Newborn Safe Haven Act is amended to include adoption service providers as entities responsible for dissemination of information to the public.

Health and Human Services

General Fund

	Actual FY 2022 (1)	Estimated FY 2023 (2)	Gov Rec Align FY 2024 (3)	Final Action FY 2024 (4)	Final Action vs Est FY 2023 (5)	Page and Line # (6)
<u>Aging, Iowa Department on</u>						
Aging, Dept. on						
Aging Programs	\$ 11,304,082	\$ 11,304,082	\$ 0	\$ 0	\$ -11,304,082	
Office of LTC Ombudsman	1,149,821	1,149,821	0	0	-1,149,821	
Total Aging, Iowa Department on	\$ 12,453,903	\$ 12,453,903	\$ 0	\$ 0	\$ -12,453,903	
<u>Public Health, Department of</u>						
Public Health, Dept. of						
Addictive Disorders	\$ 23,659,379	\$ 23,659,379	\$ 0	\$ 0	\$ -23,659,379	
Healthy Children and Families	5,816,681	5,816,681	0	0	-5,816,681	
Chronic Conditions	4,258,373	4,258,373	0	0	-4,258,373	
Community Capacity	7,319,306	6,519,306	0	0	-6,519,306	
Essential Public Health Services	7,662,464	7,662,464	0	0	-7,662,464	
Infectious Diseases	1,796,206	1,796,206	0	0	-1,796,206	
Public Protection	4,466,601	4,466,601	0	0	-4,466,601	
Resource Management	933,871	933,871	0	0	-933,871	
Congenital & Inherited Disorders Registry	199,910	223,521	0	0	-223,521	
Total Public Health, Department of	\$ 56,112,791	\$ 55,336,402	\$ 0	\$ 0	\$ -55,336,402	
<u>Veterans Affairs, Department of</u>						
Veterans Affairs, Dept. of						
General Administration	\$ 1,229,763	\$ 1,229,763	\$ 1,033,289	\$ 1,033,289	\$ -196,474	PG 2 LN 9
Home Ownership Assistance Program	2,000,000	2,000,000	2,000,000	2,200,000	200,000	PG 2 LN 32
Veterans County Grants	990,000	990,000	990,000	990,000	0	PG 3 LN 3
Veterans Affairs, Dept. of	\$ 4,219,763	\$ 4,219,763	\$ 4,023,289	\$ 4,223,289	\$ 3,526	
Veterans Affairs, Dept. of						
Iowa Veterans Home	\$ 7,131,552	\$ 7,131,552	\$ 7,115,335	\$ 7,115,335	\$ -16,217	PG 2 LN 15
Total Veterans Affairs, Department of	\$ 11,351,315	\$ 11,351,315	\$ 11,138,624	\$ 11,338,624	\$ -12,691	
<u>Human Services, Department of</u>						
Assistance						
Family Investment Program/PROMISE JOBS	\$ 41,003,978	\$ 41,003,978	\$ 41,003,575	\$ 41,003,575	\$ -403	PG 25 LN 7
Medical Assistance	1,503,848,253	1,510,127,388	1,525,126,779	1,543,626,779	33,499,391	PG 28 LN 21
Health Program Operations	17,831,343	17,446,343	17,446,067	17,446,067	-276	PG 34 LN 5
State Supplementary Assistance	7,349,002	7,349,002	7,349,002	7,349,002	0	PG 35 LN 13
State Children's Health Insurance	37,957,643	38,661,688	38,661,688	38,661,688	0	PG 36 LN 16
Child Care Assistance	40,816,931	40,816,931	64,223,730	64,223,730	23,406,799	PG 37 LN 3
Child and Family Services	89,071,930	93,571,677	80,027,794	79,027,794	-14,543,883	PG 41 LN 15
Adoption Subsidy	40,596,007	40,596,007	40,883,507	40,883,507	287,500	PG 45 LN 27
Family Support Subsidy	949,282	949,282	949,282	949,282	0	PG 47 LN 7
Conner Training	33,632	33,632	33,632	33,632	0	PG 47 LN 28

Health and Human Services

General Fund

	Actual FY 2022 (1)	Estimated FY 2023 (2)	Gov Rec Align FY 2024 (3)	Final Action FY 2024 (4)	Final Action vs Est FY 2023 (5)	Page and Line # (6)
Volunteers	84,686	84,686	84,686	84,686	0	PG 54 LN 16
Child Abuse Prevention	199,910	232,570	232,570	232,570	0	STANDING
Assistance	\$ 1,779,742,597	\$ 1,790,873,184	\$ 1,816,022,312	\$ 1,833,522,312	\$ 42,649,128	
Eldora Training School						
Eldora Training School	\$ 17,397,068	\$ 17,606,871	\$ 17,568,511	\$ 17,568,511	\$ -38,360	PG 40 LN 20
Cherokee						
Cherokee MHI	\$ 15,457,597	\$ 15,613,624	\$ 15,923,252	\$ 15,923,252	\$ 309,628	PG 48 LN 9
Independence						
Independence MHI	\$ 19,652,379	\$ 19,688,928	\$ 19,811,470	\$ 19,811,470	\$ 122,542	PG 48 LN 15
Glenwood						
Glenwood Resource Center	\$ 14,802,873	\$ 16,288,739	\$ 16,255,132	\$ 16,255,132	\$ -33,607	PG 49 LN 13
Woodward						
Woodward Resource Center	\$ 12,237,937	\$ 13,409,294	\$ 13,389,577	\$ 13,389,577	\$ -19,717	PG 49 LN 16
Cherokee CCUSO						
Civil Commitment Unit for Sexual Offenders	\$ 13,643,727	\$ 13,891,276	\$ 14,865,337	\$ 14,865,337	\$ 974,061	PG 50 LN 25
Field Operations						
Child Support Services	\$ 15,942,885	\$ 15,942,885	\$ 15,914,329	\$ 15,914,329	\$ -28,556	PG 27 LN 8
Field Operations	60,596,667	65,894,438	65,686,509	72,056,945	6,162,507	PG 51 LN 18
Field Operations	\$ 76,539,552	\$ 81,837,323	\$ 81,600,838	\$ 87,971,274	\$ 6,133,951	
General Administration						
Aging Programs	\$ 0	\$ 0	\$ 12,006,290	\$ 11,799,361	\$ 11,799,361	PG 3 LN 16
Office of LTC Ombudsman	0	0	1,148,959	1,148,959	1,148,959	PG 5 LN 28
Addictive Disorders	0	0	23,656,992	23,656,992	23,656,992	PG 6 LN 13
Healthy Children and Families	0	0	5,815,491	5,815,491	5,815,491	PG 8 LN 4
Chronic Conditions	0	0	4,256,595	4,256,595	4,256,595	PG 9 LN 34
Community Capacity	0	0	8,010,682	7,435,682	7,435,682	PG 11 LN 30
Essential Public Health Services	0	0	7,662,464	7,662,464	7,662,464	PG 16 LN 9
Infectious Diseases	0	0	1,795,902	1,795,902	1,795,902	PG 16 LN 15
Public Protection	0	0	4,581,792	4,581,792	4,581,792	PG 16 LN 21
Resource Management	0	0	933,543	933,543	933,543	PG 17 LN 20
Congenital & Inherited Disorders Registry	0	0	223,521	223,521	223,521	STANDING
General Administration	15,342,189	15,842,189	19,913,662	18,913,662	3,071,473	PG 52 LN 2
HHS Facilities	2,879,274	4,172,123	9,356,423	2,157,590	-2,014,533	PG 54 LN 3
Central Administration	0	0	261,672	186,913	186,913	PG 64 LN 21
Community Advocacy and Services	0	0	956,894	956,894	956,894	PG 64 LN 27
Criminal & Juvenile Justice	0	0	1,318,547	1,318,547	1,318,547	PG 64 LN 33
Single Grant Program	0	0	140,000	140,000	140,000	PG 65 LN 4
LiHEAP Weatherization Assistance Program	0	0	1	1	1	STANDING
Commission of Inquiry	0	1,394	1,394	1,394	0	STANDING
Nonresident Mental Illness Commitment	18,138	142,802	142,802	142,802	0	STANDING
General Administration	\$ 18,239,601	\$ 20,158,508	\$ 102,183,626	\$ 93,128,105	\$ 72,969,597	

Health and Human Services

General Fund

	Actual FY 2022 (1)	Estimated FY 2023 (2)	Gov Rec Align FY 2024 (3)	Final Action FY 2024 (4)	Final Action vs Est FY 2023 (5)	Page and Line # (6)
Total Human Services, Department of	\$ 1,967,713,331	\$ 1,989,367,747	\$ 2,097,620,055	\$ 2,112,434,970	\$ 123,067,223	
Total Health and Human Services	<u>\$ 2,047,631,340</u>	<u>\$ 2,068,509,367</u>	<u>\$ 2,108,758,679</u>	<u>\$ 2,123,773,594</u>	<u>\$ 55,264,227</u>	

Health and Human Services

Other Funds

	Actual FY 2022 (1)	Estimated FY 2023 (2)	Supp-Final Action FY 2023 (3)	Gov Rec Align FY 2024 (4)	Final Action FY 2024 (5)	Final Action vs Est FY 2023 (6)	Page and Line # (7)
Public Health, Department of							
Public Health, Dept. of							
Gambling Treatment Program - SWRF	\$ 1,750,000	\$ 1,750,000	\$ 0	\$ 0	\$ 0	\$ -1,750,000	
Total Public Health, Department of	\$ 1,750,000	\$ 1,750,000	\$ 0	\$ 0	\$ 0	\$ -1,750,000	
Human Services, Department of							
General Administration							
Gambling Treatment - SWRF	\$ 0	\$ 0	\$ 0	\$ 1,750,000	\$ 1,750,000	\$ 1,750,000	PG 18 LN 7
FIP - TANF	1,931,687	5,002,006	0	5,002,006	5,002,006	0	PG 18 LN 32
PROMISE JOBS - TANF	3,986,449	5,412,060	0	5,412,060	5,412,060	0	PG 19 LN 1
FaDSS - TANF	2,889,837	2,888,980	0	2,888,980	2,888,980	0	PG 19 LN 5
Field Operations - TANF	31,826,088	31,296,232	0	31,296,232	31,296,232	0	PG 19 LN 16
General Administration - TANF	3,744,000	3,744,000	0	3,744,000	3,744,000	0	PG 19 LN 18
Child Care Assistance - TANF	26,205,412	47,166,826	0	47,166,826	47,166,826	0	PG 19 LN 20
Child & Family Services - TANF	32,380,654	32,380,654	0	32,380,654	32,380,654	0	PG 20 LN 5
Child Abuse Prevention - TANF	125,000	125,000	0	125,000	125,000	0	PG 20 LN 7
Training & Technology - TANF	324,543	1,037,186	0	1,037,186	1,037,186	0	PG 20 LN 25
General Administration	\$ 103,413,670	\$ 129,052,944	\$ 0	\$ 130,802,944	\$ 130,802,944	\$ 1,750,000	
Assistance							
Pregnancy Prevention - TANF	\$ 1,604,227	\$ 1,913,203	\$ 0	\$ 1,913,203	\$ 1,913,203	\$ 0	PG 20 LN 9
Categorical Eligibility SNAP - TANF	10,516	14,236	0	14,236	14,236	0	PG 21 LN 26
Medical Assistance - HCTF	201,200,000	200,660,000	0	189,860,000	189,860,000	-10,800,000	PG 28 LN 3
Medicaid Supplemental - MFF	200,000	150,000	0	150,000	150,000	0	PG 28 LN 12
Health Program Operations - PSA	234,193	234,193	0	234,193	234,193	0	PG 66 LN 14
Medical Assistance - QATF	56,305,139	56,305,139	66,282,906	56,305,139	111,216,205	54,911,066	PG 66 LN 26
Medical Assistance - HHCAT	33,920,554	33,920,554	0	33,920,554	33,920,554	0	PG 67 LN 3
Public Assistance Modernization Fund	0	0	0	0	8,000,000	8,000,000	PG 74 LN 25
Assistance	\$ 293,474,629	\$ 293,197,325	\$ 66,282,906	\$ 282,397,325	\$ 345,308,391	\$ 52,111,066	
Total Human Services, Department of	\$ 396,888,299	\$ 422,250,269	\$ 66,282,906	\$ 413,200,269	\$ 476,111,335	\$ 53,861,066	
Total Health and Human Services	\$ 398,638,299	\$ 424,000,269	\$ 66,282,906	\$ 413,200,269	\$ 476,111,335	\$ 52,111,066	

Health and Human Services

FTE Positions

	Actual FY 2022 (1)	Estimated FY 2023 (2)	Gov Rec Align FY 2024 (3)	Final Action FY 2024 (4)	Final Action vs Est FY 2023 (5)	Page and Line # (6)
<u>Veterans Affairs, Department of</u>						
Veterans Affairs, Dept. of General Administration	11.68	15.00	15.00	15.00	0.00	PG 2 LN 9
Total Veterans Affairs, Department of	11.68	15.00	15.00	15.00	0.00	
<u>Aging, Iowa Department on</u>						
Aging, Dept. on						
Aging Programs	29.50	31.00	0.00	0.00	-31.00	
Office of LTC Ombudsman	11.50	11.98	0.00	0.00	-11.98	
Total Aging, Iowa Department on	41.00	42.98	0.00	0.00	-42.98	
<u>Public Health, Department of</u>						
Public Health, Dept. of						
Addictive Disorders	9.39	12.00	0.00	0.00	-12.00	
Healthy Children and Families	11.51	14.00	0.00	0.00	-14.00	
Chronic Conditions	8.64	10.00	0.00	0.00	-10.00	
Community Capacity	6.53	13.00	0.00	0.00	-13.00	
Infectious Diseases	3.56	6.00	0.00	0.00	-6.00	
Public Protection	141.00	144.60	0.00	0.00	-144.60	
Resource Management	1.78	4.00	0.00	0.00	-4.00	
Total Public Health, Department of	182.41	203.60	0.00	0.00	-203.60	
<u>Human Services, Department of</u>						
Assistance						
Family Investment Program/PROMISE JOBS	26.71	28.35	26.50	26.50	-1.85	PG 25 LN 7
Medical Assistance	7.07	11.11	11.10	11.10	-0.01	PG 28 LN 21
Health Program Operations	3.80	3.01	3.00	3.00	-0.01	PG 34 LN 5
Child Care Assistance	2.51	3.00	3.00	3.00	0.00	PG 37 LN 3
Child and Family Services	4.43	6.00	5.00	5.00	-1.00	PG 41 LN 15
Assistance	44.51	51.47	48.60	48.60	-2.87	
Eldora Training School						
Eldora Training School	174.96	207.00	207.00	207.00	0.00	PG 40 LN 20
Cherokee						
Cherokee MHI	150.00	158.19	171.19	188.00	29.81	PG 48 LN 9
Independence						
Independence MHI	176.13	182.20	185.20	211.00	28.80	PG 48 LN 15
Glenwood						
Glenwood Resource Center	540.74	592.50	592.50	592.50	0.00	PG 49 LN 13
Woodward						
Woodward Resource Center	468.46	521.90	521.90	521.90	0.00	PG 49 LN 16

Health and Human Services

FTE Positions

	Actual FY 2022 (1)	Estimated FY 2023 (2)	Gov Rec Align FY 2024 (3)	Final Action FY 2024 (4)	Final Action vs Est FY 2023 (5)	Page and Line # (6)
Cherokee CCUSO						
Civil Commitment Unit for Sexual Offenders	128.70	135.29	142.29	167.00	31.71	PG 50 LN 25
Field Operations						
Child Support Services	408.61	423.00	423.00	459.00	36.00	PG 27 LN 8
Field Operations	1,497.11	1,589.00	1,589.00	1,589.00	0.00	PG 51 LN 18
Field Operations	<u>1,905.71</u>	<u>2,012.00</u>	<u>2,012.00</u>	<u>2,048.00</u>	<u>36.00</u>	
General Administration						
Aging Programs	0.00	0.00	31.00	31.00	31.00	PG 3 LN 16
Office of LTC Ombudsman	0.00	0.00	11.98	12.00	12.00	PG 5 LN 28
Addictive Disorders	0.00	0.00	12.00	12.00	12.00	PG 6 LN 13
Healthy Children and Families	0.00	0.00	14.00	14.00	14.00	PG 8 LN 4
Chronic Conditions	0.00	0.00	10.00	10.00	10.00	PG 9 LN 34
Community Capacity	0.00	0.00	13.00	14.00	14.00	PG 11 LN 30
Infectious Diseases	0.00	0.00	6.00	6.00	6.00	PG 16 LN 15
Public Protection	0.00	0.00	57.00	57.00	57.00	PG 16 LN 21
Resource Management	0.00	0.00	4.00	4.00	4.00	PG 17 LN 20
General Administration	267.67	291.30	330.81	341.86	50.56	PG 52 LN 2
Central Administration	0.00	0.00	5.54	5.54	5.54	PG 64 LN 21
Community Advocacy and Services	0.00	0.00	7.55	7.55	7.55	PG 64 LN 27
Criminal & Juvenile Justice	0.00	0.00	9.00	9.00	9.00	PG 64 LN 33
General Administration	<u>267.67</u>	<u>291.30</u>	<u>511.88</u>	<u>523.95</u>	<u>232.65</u>	
Total Human Services, Department of	<u>3,856.89</u>	<u>4,151.85</u>	<u>4,392.56</u>	<u>4,507.95</u>	<u>356.10</u>	
Total Health and Human Services	<u><u>4,091.97</u></u>	<u><u>4,413.43</u></u>	<u><u>4,407.56</u></u>	<u><u>4,522.95</u></u>	<u><u>109.52</u></u>	