

Health and Human Services Appropriations Bill House File 2698

Last Action:
House Appropriations
Committee
April 15, 2024

An Act relating to and making appropriations for veterans and health and human services, including other related provisions and appropriations, and including effective date and retroactive applicability provisions.

**Fiscal Services Division
Legislative Services Agency**

NOTES ON BILLS AND AMENDMENTS (NOBA)

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

LSA Staff Contacts: Lindsey Ingraham (515.281.6764) Louie Hoehle (515.281.6561)

FUNDING SUMMARY

General Fund FY 2025: Appropriates a total of \$2,217.4 million from the General Fund and 4,171.0 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 \$92.4 million and an increase of 6.0 FTE positions compared to estimated FY 2024.

General Fund FY 2026: Appropriates a total of \$2.0 million from the General Fund to the HHS.

Other Funds FY 2025: Appropriates a total of \$470.7 million from other funds. This is an increase of \$2.5 million compared to estimated FY 2024.

Standing Appropriations FY 2025: In addition to the appropriations in the Bill, the attached tracking includes the following standing appropriations that are automatically appropriated in statute:

- \$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.
- \$224,000 to the HHS for the Center for Congenital and Inherited Disorders Central Registry.
- \$1.2 million for the Psychiatry Residency and Fellowship Program
- \$990,000 for the County Commissions of Veteran Affairs Fund

Provides a \$3.0 million FY 2024 supplemental appropriation for Child and Family Services from the federal TANF Block Grant. The Bill also renames the appropriation Child Protective Services and requires up to \$3.0 million of the appropriation to be used for the kinship caregiver stipend program.

Page 60, Line 3

NEW PROGRAMS, SERVICES, OR ACTIVITIES

Department of Health and Human Services — Medical Assistance Home and Community-Based Services (HCBS) Waiver for Individuals with an Intellectual Disability: Appropriates a total of \$2.0 million from the General Fund. This is a new appropriation for FY 2026.

Page 22, Line 19

Requires health care technology platforms to register annually with the DIAL and pay an annual registration fee of \$500, which is retained by the DIAL. Prohibits a platform from contracting with any health care entity in the State if the platform fails to register with the DIAL. Specifies that a platform is an authorized agency

Page 51, Line 4

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for purposes of access to the single contact repository if the platform allows independent nursing services professionals to utilize the platform to bid on shifts. Requires platforms to rerun background checks for an independent nursing services professional following two consecutive years of inactivity on the platform.

Requires the Department of Inspections, Appeals, and Licensing (DIAL) to semiannually provide joint training sessions for inspectors and nursing facilities to review at least 3 of the 10 most frequently issued federal citations in the State during the immediately preceding calendar year. Requires the DIAL to develop a protocol to identify regional citation patterns relating to complaints, standards, and outcomes in the nursing facility inspection process. Requires the DIAL to include the State Long-Term Care Ombudsman, or designee, and representatives of each nursing facility provider association in the State in the planning process for the joint training sessions.

Page 61, Line 11

Requires the DIAL to establish and maintain a process to review each citation for immediate jeopardy or substandard quality of care prior to issuance of final findings of an investigation or inspection. Allows representatives of nursing facilities that have been issued a citation to participate in the review.

Page 61, Line 25

MAJOR INCREASES/DECREASES/TRANSFERS OF EXISTING PROGRAMS

Department of Veterans Affairs: Appropriates a total of \$13.0 million from the General Fund and 15.0 FTE positions. This is an increase of \$1.7 million in funding and an increase of 6.0 FTE positions compared to estimated FY 2024 including the following:

Page 1, Line 3

- An increase of \$336,000 for unfunded need in General Administration.
- A new appropriation of \$292,000 for cemetery grounds services.
- An increase of \$1.0 million to support administering care at the Iowa Veterans Home.

Department of Health and Human Services — Aging and Disability Services: Appropriates a total of \$19.1 million from the General Fund. This is a net increase of \$155,000 compared to estimated FY 2024.

Page 1, Line 35

Region Incentive Fund (RIF): Appropriates \$3.0 million to the HHS to support the statewide 988 suicide and crisis line and to support the transition to the new Behavioral Health System, if 2024 Iowa Acts, [House File 2509](#) (Behavioral Health Service System Bill), or successor legislation is enacted.

Page 4, Line 8

Department of Health and Human Services — Community Access and Eligibility: Appropriates a total of \$68.0 million from the General Fund. This is a net decrease of \$2.1 million compared to estimated FY 2024 including the following:

Page 6, Line 12

- An increase of \$784,000 for operational needs.
- A decrease of \$2.9 million due to decreased enrollment in the Family Investment Program and

PROMISE JOBS.

Temporary Assistance for Needy Families (TANF) Block Grant: Appropriates \$144.0 million for various HHS programs funded through the TANF Block Grant. This is an increase of \$13.0 million compared to estimated FY 2024.

Page 8, Line 26

Department of Health and Human Services — Medical Assistance, State Supplementary Assistance (SSA), and Healthy and Well Kids in Iowa (Hawki) Program: Appropriates a total of \$1,651.3 million from the General Fund. This is a net increase of \$107.7 million compared to estimated FY 2024 including the following:

Page 10, Line 27

- An increase of \$41.3 million to include the Children’s Health Insurance Program (CHIP) in the Medicaid appropriation beginning in FY 2025. The CHIP amount is an increase of \$2.7 million compared to estimated FY 2024 due to higher enrollment in the Hawki Program and is offset by appropriation transfers to Community Access and Eligibility and Health Program Operations beginning in FY 2025.
- An increase of \$40.9 million to fund Medicaid at the Medicaid Forecasting Group’s March 2024 estimate, which does not include an FY 2025 increase for Medicaid capitation rates.
- An increase of \$16.5 million to the HCBS program to offset federal American Rescue Plan Act of 2021 (ARPA) funding that expired.
- An increase of \$14.6 million to increase access to community-based providers.
- An increase of \$5.0 million for enhanced case management to coordinate care for vulnerable populations.
- An increase of \$4.5 million to include SSA in the Medicaid appropriation beginning in FY 2025. The SSA amount is a decrease of \$2.9 million compared to estimated FY 2024 due to lower enrollment and an appropriation transfer to Aging and Disability Services beginning in FY 2025.
- An increase of \$3.0 million for a home health provider rate adjustment.
- An increase of \$2.3 million for a mental health provider rate adjustment.
- An increase of \$2.0 million for pharmacy dispensing fees.
- An increase of \$1.8 million for an increase in income eligibility up to 300.0% of the federal poverty level (FPL) for the Medicaid for Employed People with Disabilities (MEPD) program.
- An increase of \$418,000 for a physical therapist provider rate adjustment.
- An increase of \$369,000 for Psychiatric Medical Institutions for Children (PMIC) tiered provider rates.
- An increase of \$277,000 for a community mental health centers provider rate adjustment.
- An increase of \$199,000 for a nurse practitioner rate adjustment.
- An increase of \$144,000 for a medical supplies provider rate adjustment.
- An increase of \$86,000 for biomarker testing coverage.

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- An increase of \$65,000 for an occupational therapist provider rate adjustment.
- An increase of \$33,000 for a psychologist rate adjustment.
- An increase of \$30,000 for a physician assistant provider rate adjustment.
- An increase of \$3,000 for a certified nurse midwife provider rate adjustment.
- A decrease of \$2.9 million for an appropriation transfer to Community Access and Eligibility beginning in FY 2025.
- A decrease of \$6.0 million to reflect revenue enhancements from the Hospital Directed Payment Program that allows the Legislature to reduce the Medicaid General Fund appropriation.
- A decrease of \$16.9 million for an appropriation transfer to Health Program Operations beginning in FY 2025.

Department of Health and Human Services — Health Program Operations: Appropriates a total of \$39.6 million from the General Fund. This is a net increase of \$1.2 million compared to estimated FY 2024.

Page 12, Line 26

Department of Health and Human Services — Child Protective Services: Appropriates a total of \$170.4 million. This is a net increase of \$8.3 million compared to estimated FY 2024.

Page 17, Line 32

Department of Health and Human Services — State Specialty Care: Appropriates a total of \$100.0 million from the General Fund. This is a net increase of \$35,000 compared to estimated FY 2024.

Page 20, Line 17

Department of Health and Human Services — Accountability, Compliance, and Program Integrity: Appropriates a total of \$21.2 million from the General Fund. This is an increase of \$94,000 compared to estimated FY 2024.

Page 21, Line 11

Allows the HHS to utilize General Fund moneys for up to 4,156.0 FTE positions. Requires the HHS to report to the General Assembly by December 15, 2024, the distribution of FTE positions across the organizational divisions of the HHS.

Page 21, Line 34

FUNDING FOR PROJECTS AND PROGRAMS

Region Incentive Fund (RIF): Appropriates \$3.0 million to the HHS to support the statewide 988 suicide and crisis line and to support the transition to the new Behavioral Health System, if 2024 Iowa Acts, [House File 2509](#) (Behavioral Health Service System Bill), or successor legislation is enacted.

Page 4, Line 8

Allocates \$369,000 of the funds appropriated for Medicaid to provide enhanced reimbursement for a PMIC as specified in 2024 Iowa Acts, [House File 2402](#) (Psychiatric Medical Institutions for Children, Medicaid Rates Bill), or successor legislation, if enacted.

Page 11, Line 25

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Allocates \$86,000 of the funds appropriated for Medicaid to provide biomarker testing as specified in 2024 Iowa Acts, [House File 2668](#) (Biomarker Testing, Health Insurance Bill), or successor legislation, if enacted. Page 11, Line 30

Enhances reimbursement rates for a PMIC specified in 2024 Iowa Acts, House File 2402 (Psychiatric Medical Institutions for Children, Medicaid Rates Bill), or successor legislation, if enacted. Page 16, Line 9

CHANGES TO PRIOR APPROPRIATIONS

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 be transferred to other appropriations in the FIP or to enhance agency accountability, program integrity, compliance, and efficiency until the close of FY 2024. Page 26, Line 23

Allows any unexpended funds appropriated in 2023 Iowa Acts, [Senate File 561](#) (FY 2024 Health and Human Services Appropriations Act), for FY 2024 from the General Fund for the State Office of Public Guardian to remain available for expenditure in FY 2025. Page 27, Line 7

Allows any unexpended funds appropriated in 2023 Iowa Acts, Senate File 561 for FY 2024 from the General Fund for audiological services and hearing aids for children to remain available for expenditure until the close of FY 2025. Page 27, Line 16

Amends 2023 Iowa Acts, Senate File 561 to increase the number of rural psychiatric residencies from six to eight. Page 27, Line 26

Allows any unexpended funds appropriated in 2023 Iowa Acts, Senate File 561 for FY 2024 from the General Fund for the Family Investment Program (FIP) to remain available or to be transferred to other appropriations in the Division or to enhance agency accountability, program integrity, compliance, and efficiency until the close of FY 2025. Page 28, Line 2

Allows any unexpended funds appropriated in 2023 Iowa Acts, Senate File 561 for FY 2024 from the General Fund for Child Care Assistance (CCA) to remain available for expenditure until the close of FY 2025. Page 28, Line 13

Allows any unexpended funds appropriated in 2023 Iowa Acts, Senate File 561 for FY 2024 from the General Fund for Child and Family Services to remain available for expenditure until the close of FY 2025. Page 28, Line 25

Allows any unexpended funds appropriated in 2023 Iowa Acts, Senate File 561 for FY 2024 from the Page 28, Line 33

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General Fund for Field Operations to remain available for expenditure until the close of FY 2025.

Allows any unexpended funds appropriated in 2023 Iowa Acts, Senate File 561 for FY 2024 from the General Fund for the More Options for Maternal Support (MOMS) Program to remain available for expenditure until the close of FY 2025.

Page 29, Line 7

Amends 2023 Iowa Acts, [HF 709](#) (Federal Block Grant Appropriations Act) to specify that no less than 8.4% of remaining moneys for each fiscal year will be allocated for administrative expenses of LiHEAP contractors and no more than 1.6% will be allocated to the HHS for administrative expenses related to LiHEAP.

Page 29, Line 20

Provides a \$3.0 million supplemental FY 2024 appropriation for Child and Family Services from the federal TANF Block Grant. The Bill requires up to \$3.0 million of the appropriation to be used for the kinship caregiver stipend program and renames the appropriation Child Protective Services.

Page 60, Line 3

Requires the HHS to establish a Legal Representation for Juvenile Cases Interim Study Committee for the 2024 Legislative Interim to investigate, study, and propose legislation relating to client-directed representation for children in juvenile court cases. The Committee shall submit a report to the General Assembly by January 10, 2025.

Page 60, Line 11

STUDIES AND INTENT

Requires federal funds received in FY 2025 because of the expenditure of State funds in a previous year to be used for child protective services. Allows any unexpended funds to remain available for expenditure through FY 2026.

Page 18, Line 10

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.

Page 18, Line 26

Requires the HHS to include a detailed description of the programs and expenditures by budget unit reflective of the redesigned organizational divisions of the HHS in the annual budget submitted to the Council on Health and Human Services.

Page 22, Line 9

Permits the HHS to transfer funds allocated in this Bill for purposes of continuing alignment efforts, maximizing federal support, and the implementation and administration of services. Requires the HHS to report any transfers made pursuant to this subsection to the General Assembly.

Page 22, Line 35

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- Allows any unexpended funds appropriated for the Family Development and Self-Sufficiency (FaDSS) Program for FY 2025 to remain available for FY 2026. Page 23, Line 29
- Allows any unexpended funds appropriated from the General Fund, the Quality Assurance Trust Fund, and the Hospital Health Care Access Trust Fund to the HHS in FY 2025 for the Medicaid Program and the amount more than the actual expenditures for FY 2025 to remain available for FY 2026. Page 24, Line 3
- Allows any unexpended funds appropriated from the General Fund to the HHS for State Specialty Care for FY 2025 to remain available for FY 2026. Page 24, Line 14
- Allows any unexpended funds appropriated from the General Fund to the HHS for the Iowa State Commission Grant Program to remain available for FY 2026. Page 24, Line 23
- Allows any funds appropriated from the General Fund to the HHS in FY 2025 for rural psychiatric residencies that remain at the end of FY 2025 are permitted to carry forward into FY 2026. Page 24, Line 32
- Allows any unexpended funds appropriated from the General Fund to the HHS for audiological services and hearing aids for children to remain available for FY 2026. Page 25, Line 7
- Allows any funds appropriated from the General Fund to the HHS in FY 2025 for adoption subsidy payments or post-adoption services that remain at the end of FY 2025 are permitted to carry forward into FY 2026. Page 25, Line 16
- Allows any funds appropriated from the General Fund to the HHS in FY 2025 to lower the required ratio of supervisors to social workers that remain at the end of FY 2025 are permitted to carry forward into FY 2026. Page 25, Line 25
- Allows any funds appropriated from the General Fund to the HHS in FY 2025 to increase foster care reimbursement rates that remain at the end of FY 2025 are permitted to carry forward into FY 2026. Page 25, Line 34
- Requires the HHS to report the expenditure of any moneys for which nonreversion authorization was provided for FY 2024 to the General Assembly on a quarterly basis beginning October 1, 2024. Page 30, Line 9
- Requires the HHS or the Mental Health and Disability Services (MHDS) Commission to adopt emergency administrative rules to comply with federal requirements or to implement the Bill. The rules are required to be 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). The rules shall not take effect before being reviewed by the ARRC. Page 30, Line 17

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- Directs any unexpended funds in the FIP account on June 30, 2024, to be appropriated to the HHS for Community Access and Eligibility. Page 42, Line 22
- Requires the HHS to conduct a study to explore options for a revised payment model for reimbursement of assisted living programs for Medicaid recipients. The HHS is required to report all options identified to the General Assembly by December 1, 2024. Page 45, Line 11
- Requires the HHS to annually establish and publish a maximum allowable charges schedule for nursing services provided by health care employment agency workers. Page 52, Line 26
- Modifies the current civil penalty structure and adds new civil penalties for health care employment agencies that fail to comply with the Iowa Code. Modifies rules for registration by managing entities. Specifies that any monetary penalties under this section be retained by the DIAL as repayment receipts as defined in Iowa Code section [8.2](#). Page 54, Line 6
- Requires the DIAL to submit an annual report to the General Assembly that includes information on health care employment agency registrations, registration fees collected, violations of Iowa Code chapter [135Q](#), monetary penalties collected, registration revocations and denials, the statewide maximum allowable charges schedule, and recommendations for changes to the Iowa Code chapter. Page 57, Line 5

SIGNIFICANT CODE CHANGES

- Removes an additional amount determined by the General Assembly from the allocated transfer from the Beer and Liquor Control Fund to the HHS for substance use disorder treatment and prevention programs. Page 31, Line 14
- Requires the HHS and the Department of Revenue to collaborate for enforcement of tobacco laws and to engage in tobacco control activities. Page 31, Line 33
- Requires the HHS to establish and enforce policies relating to the expenditure of State and federal funds by Area Agencies on Aging that require State and federal compliance. Page 32, Line 5
- Establishes a General Fund appropriation to the HHS, the amount of which will be sufficient to ensure that recipients of Medicaid living in care facilities in Iowa have access to the full amount of their Personal Needs Allowance. Page 32, Line 31
- Appropriates remaining revenues from Replacement Generation Tax to the HHS to supplement Medicaid appropriations. Page 33, Line 15

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- Appropriates money to the HHS from Replacement Generation Tax revenues to supplement Medicaid appropriations. Page 34, Line 13
- Requires the HHS to increase the Personal Needs Allowance for SSA by the same percentage and at the same time as federal Supplemental Security Income and Social Security Benefits. Page 35, Line 10
- Appropriates any remaining funds in the Medicaid Fraud Fund at the close of a fiscal year to the HHS to supplement the Medicaid Program. Page 36, Line 3
- Appropriates any remaining funds in the Health Care Trust Fund at the close of a fiscal year to the HHS to supplement the Medicaid Program to be used for Medicaid reimbursement and associated costs. Page 36, Line 35
- Allows any revenue received by a State mental health institute to be retained and expended by the mental health institute. Page 37, Line 34
- Permits Medicaid recipients residing in a State mental health institute to retain their Medicaid eligibility during their stay at the mental health institute. Page 38, Line 8
- Permits the HHS to bill for State Resource Center services utilizing a scope of services approach in a manner that does not shift costs between the Medicaid program, the MHDS regions, or other State Resource Center funding sources. Page 38, Line 17
- Appropriates to the HHS moneys deposited in the Juvenile Detention Home Fund for distribution. Page 38, Line 30
- Removes mention of the Family Investment Program account from Iowa Code section [239B.14](#) and instead credits funds to the HHS for Community Access and Eligibility for purposes of the Family Investment Program. Page 41, Line 31
- Allows the Director of the HHS to establish new positions for Child Support Services within the limitations of the amount appropriated for Child Support Services or moneys transferred for this purpose from the Community Access and Eligibility appropriation. Page 42, Line 10
- Directs support payments received by the Collection Services Center to be deposited in the Collection Services Center Refund Account, which is separate from the General Fund. Specifies that moneys in the Account are not subject to reversion and are required to be used according to Iowa Code section [252B.13A](#). Permits moneys earned in the Account to be credited to the Account. Page 42, Line 28

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Requires that quality assurance assessments be paid by nursing facilities on a monthly basis instead of a quarterly basis. Requires that quality assurance assessment forms be submitted within 30 days of the end of each month rather than each calendar quarter.

Page 43, Line 7

Defines "supported community living services" as services provided in a noninstitutional setting to persons 16 years of age or older with mental illness, an intellectual disability, brain injury, or developmental disability.

Page 43, Line 20

Requires the HHS to administer a Centers of Excellence Grant Program to encourage collaboration among regional health care providers in rural areas to transform health care delivery to provide quality and sustainable care.

Page 43, Line 29

Requires the HHS to collaborate with the Autism Support Program pursuant to Iowa Code chapter [225D](#) related to the Regional Autism Assistance Program. The functions of the Regional Autism Assistance Program must include regionalized and integrated care delivery and coordination and family navigation.

Page 44, Line 11

Requires the HHS to use appropriated funds for lodging expenses for cancer patients with income below 200.00% of the FPL who travel 30 miles or more to receive treatment at the University of Iowa Hospitals and Clinics (UIHC).

Page 44, Line 30

Decreases the standing limited appropriation from the General Fund to the Department of Veterans Affairs to be credited to the County Commissions of Veteran Affairs Fund from \$1.0 million to \$990,000.

Page 45, Line 22

Prohibits a health care employment agency from contracting with a health care entity if the health care employment agency has not registered with the DIAL. Prohibits a health care employment agency from using the statewide maximum allowable charges schedule as a basis for prohibiting or interfering with a wage increase for any agency worker.

Page 48, Line 4

Extends the duties of a health care practitioner under the Medical Cannabidiol Act to include the establishment of a physician-patient relationship through the use of telemedicine to comply with the requirements in 653 IAC [13.11\(7\)](#).

Page 57, Line 21

Allows a juvenile court to adjudicate a child in need of assistance when the child requires treatment to cure or alleviate a serious chemical dependency or mental or behavioral health disorder that compromises the child's safety or causes untoward aggressive behavior toward others in the household, and the child's parent, guardian, or custodian is unwilling or unable to provide such treatment successfully.

Page 57, Line 29

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Eliminates certain circumstances when a child may be adjudicated as a child in need of assistance. Page 58, Line 6

Removes the requirement that certain reimbursements to foster parents must be based on 65.0% of the United States Department of Agriculture estimate of the cost to raise a child in the calendar year immediately preceding the fiscal year and removes the additional stipend for children with special needs. Requires the HHS to review reimbursement payment rates paid to foster parents at least once every three years. Directs the HHS to adopt administrative rules to implement this section. Page 58, Line 8

States that Iowa Code section [234.39](#)(2) shall not apply when a child is placed with a relative or fictive kin who is not licensed under Iowa Code chapter [237](#) to provide child foster care. Page 58, Line 23

Requires the HHS to reimburse an adoption petitioner for the costs of the preplacement and postplacement investigations related to the adoption up to a maximum amount of \$2,000 per investigation. The HHS is prohibited from making such reimbursements until the person performing the preplacement background check approves the adoption petitioner's initial required background checks. Page 59, Line 23

EFFECTIVE DATE

Specifies that Division XIII of the Bill is effective upon enactment and applies retroactively to July 1, 2022. Page 26, Line 34

Specifies that Division XIV of the Bill is effective upon enactment and applies retroactively to July 1, 2023. Page 30, Line 3

Specifies that Division XVIII will take effect upon enactment. Page 57, Line 16

Specifies that Division XX of the Bill that provides for an FY 2024 supplemental appropriation is effective upon enactment and applies retroactively to July 1, 2023. Page 61, Line 2

House File 2698 provides for the following changes to the Code of Iowa.

Page #	Line #	Bill Section	Action	Code Section
31	14	43	Amend	123.17.5
31	33	44	Add	142A.5.9
32	5	45	New	231.35
32	31	46	Amend	249A.30A
33	15	47	Amend	437A.8.4.d
34	13	48	Amend	437A.15.3.f
35	10	49	New	249.9A
36	3	50	Amend	249A.50.3
36	35	51	Amend	453A.35A
37	34	52	New	218.97
38	8	53	New	249A.38A
38	17	54	New	218.97A
38	30	55	Amend	232.142
40	22	56	Amend	239B.11
41	31	57	Amend	239B.14.2
42	10	58	Amend	252B.27.1
42	28	60	Add	252B.13A.3
43	7	61	Amend	249L.3.2
43	20	62	Amend	225C.21.1
43	29	63	New	135.194
44	11	64	Amend	256.35
44	30	65	New	217.41D
45	22	67	Amend	35A.16.1.b
45	32	68	Amend	135Q.1
48	4	69	Amend	135Q.2
51	2	70	New	135Q.3
52	26	71	New	135Q.4
54	6	72	New	135Q.5
57	5	73	New	135Q.6
57	21	75	Add	124E.3.4
57	29	76	Amend	232.96A.6
58	6	77	Strike	232.96A.11,12,13
58	8	78	Amend	234.38
58	23	79	Amend	234.39.2
59	23	80	Amend	600.8.3
61	11	85	New	135C.35C
61	25	86	Add	135C.40.1.d

1 1 DIVISION I
 1 2 DEPARTMENT OF VETERANS AFFAIRS — FY 2024-2025

1 3 Section 1. DEPARTMENT OF VETERANS AFFAIRS. There is
 1 4 appropriated from the general fund of the state to the
 1 5 department of veterans affairs for the fiscal year beginning
 1 6 July 1, 2024, and ending June 30, 2025, the following amounts,
 1 7 or so much thereof as is necessary, to be used for the purposes
 1 8 designated:

1 9 1. DEPARTMENT OF VETERANS AFFAIRS ADMINISTRATION
 1 10 For salaries, support, maintenance, and miscellaneous
 1 11 purposes, and for not more than the following full-time
 1 12 equivalent positions:
 1 13 \$ 1,369,205
 1 14 FTEs 15.00

General Fund appropriation to the Department of Veterans Affairs.
 DETAIL: This is an increase of \$335,916 and an increase of 6.00 full-time equivalent (FTE) positions compared to estimated FY 2024.

1 15 2. STATE VETERANS CEMETERY
 1 16 For cemetery grounds services and miscellaneous purposes:
 1 17 \$ 292,000

General Fund appropriation to the State Veterans Cemetery.
 DETAIL: This is a new appropriation for FY 2025 for contracting groundskeepers to achieve national standards for veterans' cemeteries.

1 18 3. IOWA VETERANS HOME
 1 19 For salaries, support, maintenance, and miscellaneous
 1 20 purposes:
 1 21 \$ 8,145,736

General Fund appropriation to the Iowa Veterans Home (IVH).
 DETAIL: This is an increase of \$1,030,401 compared to estimated FY 2024 to be used at the discretion of the IVH to support administering care for Iowa Veterans.

1 22 a. The Iowa veterans home billings involving the department
 1 23 of health and human services shall be submitted to the
 1 24 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).

1 25 b. The Iowa veterans home expenditure report shall be
 1 26 submitted monthly to the general assembly.

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

1 27 4. HOME OWNERSHIP ASSISTANCE PROGRAM
 1 28 For transfer to the Iowa finance authority for the
 1 29 continuation of the home ownership assistance program for

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

1 30 persons who are or were eligible members of the armed forces of
 1 31 the United States, pursuant to section 16.54:
 1 32 \$ 2,200,000

DETAIL: This is no change compared to estimated FY 2024. Under the Program, 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.

1 33 DIVISION II
 1 34 AGING AND DISABILITY SERVICES — FY 2024-2025

1 35 Sec. 2. DEPARTMENT OF HEALTH AND HUMAN SERVICES — AGING

General Fund appropriation to the HHS — Aging and Disability Services for FY 2025.

2 1 AND DISABILITY SERVICES. There is appropriated from the
 2 2 general fund of the state to the department of health and human
 2 3 services for the fiscal year beginning July 1, 2024, and ending
 2 4 June 30, 2025, the following amount, or so much thereof as is
 2 5 necessary, to be used for the purposes designated:

DETAIL: Due to organizational changes within the HHS, appropriations from FY 2024 have been restructured. The new FY 2025 appropriation for Aging and Disability Services is comprised of moneys formerly appropriated to the following areas:

2 6 For aging programs for the department of health and human
 2 7 services and area agencies on aging to provide citizens of
 2 8 Iowa who are 60 years of age and older with case management;
 2 9 Iowa's aging and disabilities resource centers; for the
 2 10 return to community program; for the purposes of chapter 231E,
 2 11 to administer the prevention of elder abuse, neglect, and
 2 12 exploitation program pursuant to section 231.56A, in accordance
 2 13 with the requirements of the federal Older Americans Act of
 2 14 1965, 42 U.S.C. §3001 et seq., as amended; for the reporting
 2 15 and evaluation of cases of dependant adult abuse pursuant to
 2 16 chapter 235B; and for other services which may include but are
 2 17 not limited to adult day, respite care, chore, information
 2 18 and assistance, and material aid, for information and options
 2 19 counseling for persons with disabilities, and for salaries,
 2 20 support, administration, maintenance, and miscellaneous
 2 21 purposes:
 2 22 \$ 19,088,714

- Aging Programs
- General Administration
- Field Operations
- State Supplementary Assistance (SSA)
- Health Program Operations
- Family Support Subsidy
- Conner Decree Training

This restructured appropriation represents a net increase of \$155,157 compared to estimated FY 2024 due to increased operational needs.

2 23 1. Funds appropriated in this section may be used to
 2 24 supplement federal funds under federal regulations. To
 2 25 receive funds appropriated in this section, a local area
 2 26 agency on aging shall match the funds with moneys from other
 2 27 sources according to rules adopted by the department. Funds
 2 28 appropriated in this section may be used for services not
 2 29 specifically enumerated in this section only if approved by the
 2 30 department as part of an area agency on aging's area plan.

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

2 31 2. Of the funds appropriated in this section, \$949,282
 2 32 shall be used for the family support center component of the
 2 33 comprehensive family support program under chapter 225C,
 2 34 subchapter V.

Allocates \$949,282 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 an increase of \$17,746 compared to the estimated FY 2024 allocation. The allocation was previously located under the Family Support Subsidy appropriation.

2 35 3. Of the funds appropriated in this section, \$33,632 shall
 3 1 be used to build community capacity through the coordination
 3 2 and provision of training opportunities in accordance with the
 3 3 consent decree of Conner v.Branstad, No.4-86-CV-30871 (S.D.
 3 4 Iowa, July 14, 1994).

Allocates \$33,632 to the HHS for the Conner Decree training requirements.

DETAIL: This is no change compared to estimated FY 2024. The allocation was previously located under the Conner Decree appropriation. 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.

3 5 DIVISION III
 3 6 BEHAVIORAL HEALTH — FY 2024-2025

3 7 Sec. 3. DEPARTMENT OF HEALTH AND HUMAN SERVICES —
 3 8 BEHAVIORAL HEALTH. There is appropriated from the general fund
 3 9 of the state to the department of health and human services for
 3 10 the fiscal year beginning July 1, 2024, and ending June 30,
 3 11 2025, the following amount, or so much thereof as is necessary,
 3 12 to be used for the purposes designated:

3 13 For behavioral health prevention, treatment, and recovery
 3 14 efforts to reduce the prevalence of the use of, provide
 3 15 treatment for, and support recovery from tobacco and substance
 3 16 use and misuse pursuant to the applicable policy, purpose,
 3 17 and intent described in sections 125.1 and 142A.1, alcohol,
 3 18 problem gambling, and other addictive behaviors. Activities
 3 19 shall align with accepted best practice guidance standards for
 3 20 behavioral health including those published by the centers for
 3 21 disease control and prevention and the substance abuse and
 3 22 mental health services administration of the United States
 3 23 department of health and human services for health promotion;
 3 24 universal, selective, and indicated prevention; treatment; and
 3 25 recovery services and supports; and shall include a 24-hour
 3 26 helpline, public information resources, professional training,

General Fund appropriation to the HHS — Behavioral Health for FY 2025.

DETAIL: Due to organizational changes within the HHS, appropriations from FY 2024 have been restructured. The new FY 2025 appropriation for Behavioral Health is comprised of moneys formerly appropriated to the following areas:

- General Administration
- Addictive Disorders
- Healthy Children and Families

This restructured appropriation represents no change in funding compared to estimated FY 2024. 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.

3 27 youth prevention, program evaluation, and efforts at the state
 3 28 and local levels:
 3 29 \$ 24,400,114

3 30 Sec. 4. DEPARTMENT OF HEALTH AND HUMAN SERVICES — SPORTS
 3 31 WAGERING RECEIPTS FUND. There is appropriated from the sports
 3 32 wagering receipts fund created in section 8.57, subsection 6,
 3 33 to the department of health and human services for the fiscal
 3 34 year beginning July 1, 2024, and ending June 30, 2025, the
 3 35 following amount, or so much thereof as is necessary, to be
 4 1 used for behavioral health prevention, treatment, and recovery
 4 2 efforts to reduce the prevalence of the use of, provide
 4 3 treatment for, and support recovery from tobacco and substance
 4 4 use and misuse pursuant to the applicable policy, purpose, and
 4 5 intent described in sections 125.1 and 142A.1, alcohol, problem
 4 6 gambling, and other addictive behaviors:
 4 7 \$ 1,750,000

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

DETAIL: This is no change compared to estimated FY 2024.

4 8 Sec. 5. DEPARTMENT OF HEALTH AND HUMAN SERVICES — MENTAL
 4 9 HEALTH AND DISABILITY SERVICES REGIONAL SERVICE FUND —
 4 10 REGION INCENTIVE FUND. There is appropriated from the region
 4 11 incentive fund of the mental health and disability services
 4 12 regional service fund created in section 225C.7A, to the
 4 13 department of health and human services for the fiscal year
 4 14 beginning July 1, 2024, and ending June 30, 2025, the following
 4 15 amount, or so much thereof as is necessary, to be used to
 4 16 support the statewide 988 suicide and crisis line, and to
 4 17 support the transition to the new behavioral health system
 4 18 pursuant to 2024 Iowa Acts, House File 2509, or successor
 4 19 legislation, if enacted:
 4 20 \$ 3,000,000

Appropriates \$3,000,000 from the Region Incentive Fund (RIF) to the HHS to support the statewide 988 suicide and crisis line and to support the transition to the new Behavioral Health System, if 2024 Iowa Acts, [House File 2509](#) (Behavioral Health Service System Bill), or successor legislation is enacted.

4 21 DIVISION IV
 4 22 PUBLIC HEALTH — FY 2024-2025

4 23 Sec. 6. DEPARTMENT OF HEALTH AND HUMAN SERVICES — PUBLIC
 4 24 HEALTH. There is appropriated from the general fund of the
 4 25 state to the department of health and human services for the
 4 26 fiscal year beginning July 1, 2024, and ending June 30, 2025,
 4 27 the following amount, or so much thereof as is necessary, to be
 4 28 used for the purposes designated:
 4 29 For programs that support health promotion, protect the

General Fund appropriation to the HHS — Public Health for FY 2025.

DETAIL: Due to organizational changes within the HHS, appropriations from FY 2024 have been restructured. The new FY 2025 appropriation for Public Health is comprised of moneys formerly appropriated to the following areas:

4 30 health and safety of the public, conduct disease surveillance
 4 31 and investigation to reduce the incidence of morbidity and
 4 32 mortality, serve individuals with chronic conditions, and
 4 33 strengthen the health care delivery system to improve health
 4 34 outcomes for all Iowans:
 4 35 \$ 22,916,821

- Healthy Children and Families
- Chronic Conditions
- Community Capacity
- Essential Public Health Services
- Infectious Diseases
- Public Protection
- Iowa Registry for Congenital and Inherited Disorders
- Psychiatry Residency and Fellowship Program

This restructured appropriation represents no change in funding compared to estimated FY 2024. The Division of Public Health's responsibilities include promoting the health and safety of the public, conducting disease surveillance and investigation to reduce the incidence of morbidity and mortality, serving individuals with chronic conditions, and strengthening the health care delivery system.

5 1 1. Of the funds appropriated in this section, \$2,100,000
 5 2 shall be deposited in the medical residency training account
 5 3 created in section 135.175, subsection 5, paragraph "a", and is
 5 4 appropriated from the account to the department to be used for
 5 5 the purposes of the medical residency training state matching
 5 6 grants program as specified in section 135.176.

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

DETAIL: This is no change compared to the estimated FY 2024 allocation. The allocation was previously located under the Community Capacity appropriation. The Program provides matching grants to sponsors of accredited graduate medical education residency programs in this State to establish, expand, or support medical residency training programs.

5 7 2. Of the funds appropriated in this section, \$800,000
 5 8 shall be used for rural psychiatric residencies to annually
 5 9 fund eight psychiatric residents who will provide mental health
 5 10 services in underserved areas of the state.

Allocates \$800,000 for rural psychiatric residencies to support the annual creation and training of eight psychiatric residents to provide mental health services to underserved areas of the State.

DETAIL: This is no change compared to the estimated FY 2024 allocation. The allocation was previously located under the Community Capacity appropriation.

5 11 3. Of the funds appropriated in this section, \$425,000
 5 12 shall be used for the continuation of a centers of excellence
 5 13 program for the awarding of two grants to encourage innovation
 5 14 and collaboration among regional health care providers in a
 5 15 rural area based upon the results of a regional community
 5 16 needs assessment to transform health care delivery in order to
 5 17 provide quality, sustainable care that meets the needs of the
 5 18 local communities. An applicant for the grant shall specify

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

DETAIL: This is no change compared to the estimated FY 2024 allocation. The allocation was previously located under the Community Capacity appropriation. The Program funds grant proposals to demonstrate regional collaboration in accessing targeted medical needs of residents. The projects facilitate collaboration between rural

5 19 how the grant will be expended to accomplish the goals of the
 5 20 program and shall provide a detailed five-year sustainability
 5 21 plan prior to being awarded any grant. Following receipt
 5 22 of the grant, a recipient shall submit periodic reports as
 5 23 specified by the department to the governor and the general
 5 24 assembly regarding the recipient's expenditure of the grant and
 5 25 progress in accomplishing the program's goals.

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.

5 26 4. Of the funds appropriated in this section, \$560,000 shall
 5 27 be deposited in the state-funded family medicine obstetrics
 5 28 fellowship program fund to be used for the state-funded family
 5 29 medicine obstetrics fellowship program, in accordance with
 5 30 section 135.193.

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

DETAIL: This is no change compared to the estimated FY 2024 allocation. The allocation was previously located under the Community Capacity appropriation.

5 31 5. The department shall work with the board established
 5 32 in chapter 135D to develop plans for program enhancements
 5 33 in the Iowa health information network for the purpose of
 5 34 empowering Iowa patients to access and direct their health
 5 35 information utilizing the Iowa health information network.
 6 1 Program enhancements shall protect data privacy, facilitate the
 6 2 interchange of health data for the purpose of improving public
 6 3 health outcomes, and increase participation by health care
 6 4 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.

6 5 6. The university of Iowa hospitals and clinics under
 6 6 the control of the state board of regents shall not receive
 6 7 indirect costs from the funds appropriated in this section.
 6 8 The university of Iowa hospitals and clinics billings to the
 6 9 department shall be on at least a quarterly basis.

Prohibits the University of Iowa Hospitals and Clinics (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.

6 10 DIVISION V
 6 11 COMMUNITY ACCESS AND ELIGIBILITY — FY 2024-2025

6 12 Sec. 7. DEPARTMENT OF HEALTH AND HUMAN SERVICES — COMMUNITY
 6 13 ACCESS AND ELIGIBILITY. There is appropriated from the
 6 14 general fund of the state to the department of health and human
 6 15 services for the fiscal year beginning July 1, 2024, and ending
 6 16 June 30, 2025, the following amount, or so much thereof as is
 6 17 necessary, to be used for the purposes designated:
 6 18 To be used for salaries, support, maintenance, and

General Fund appropriation to the HHS — Community Access and Eligibility for FY 2025.

DETAIL: Due to organizational changes within the HHS, appropriations from FY 2024 have been restructured. The new FY 2025 appropriation for Community Access and Eligibility is comprised of moneys formerly appropriated to the following areas:

6 19 miscellaneous purposes and for family investment program (FIP)
 6 20 assistance in accordance with chapter 239B, and for other costs
 6 21 associated with providing needs-based benefits or assistance
 6 22 including but not limited to maternal and child health, oral
 6 23 health, obesity prevention, the promoting independence and
 6 24 self-sufficiency through employment, job opportunities and
 6 25 basic skills (PROMISE JOBS) program, supplemental nutrition
 6 26 assistance program (SNAP) employment and training, the FIP
 6 27 diversion program, family planning, rent reimbursement,
 6 28 and eligibility determinations for medical assistance, food
 6 29 assistance, and the children’s health insurance program:
 6 30 \$ 68,043,944

- Aging Programs
- Human Rights Administration
- General Administration
- Field Operations
- Family Investment Program (FIP)/PROMISE JOBS
- Medical Assistance
- Children's Health Insurance
- Volunteers
- Healthy Children and Families
- Chronic Conditions
- Community Capacity
- Public Protection

This restructured appropriation represents a net decrease of \$2,115,731 compared to estimated FY 2024. This includes:

- An increase of \$784,269 due to increased operational needs.
- A decrease of \$2,900,000 due to decreased enrollment in the FIP and PROMISE JOBS.

6 31 1. Of the child support collections assigned under FIP,
 6 32 the federal share of support collections shall be credited to
 6 33 the child support services appropriation made in this division
 6 34 of this Act. Of the remainder of the assigned child support
 6 35 collections received by child support services, a portion
 7 1 shall be credited to community access and eligibility, and
 7 2 the remaining funds may be used to increase recoveries, to
 7 3 sustain cash flow in the child support payments account, or for
 7 4 technology needs. If child support collections assigned under
 7 5 FIP are greater than estimated or are otherwise determined not
 7 6 to be required for maintenance of effort, the state share of
 7 7 either amount may be transferred to or retained in the child
 7 8 support payments account.

Requires the federal share of child support collections recovered by the State be credited to Child Support Services. Of the remainder of support collected, a portion is credited to community access and eligibility, and the HHS is permitted to use the remaining funds to increase recoveries, to sustain cash flow, or for technology needs for the Child Support Payments Account.

7 9 2. Of the funds appropriated in this section, \$3,075,000
 7 10 shall be used for continuation of the department’s initiative
 7 11 to provide for adequate developmental surveillance and
 7 12 screening during a child’s first five years. The funds shall
 7 13 be used first to fully fund the current participating counties
 7 14 to ensure that those counties are fully operational, with the
 7 15 remaining funds to be used for expanding participation to
 7 16 additional counties. The full implementation and expansion

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

DETAIL: This is no change compared to the estimated FY 2024 allocation. The allocation was previously located under the Healthy Children and Families appropriation. 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 First Five

7 17 shall include enhancing the scope of the initiative through
 7 18 collaboration with the child health specialty clinics to
 7 19 promote the use of developmental surveillance and screening to
 7 20 support healthy child development through early identification
 7 21 and response to both biomedical and social determinants of
 7 22 healthy development by providing practitioner consultation
 7 23 and continuous improvement through training and education,
 7 24 particularly for children with behavioral conditions and
 7 25 needs. The department shall also collaborate with the Medicaid
 7 26 program and the child health specialty clinics to assist in
 7 27 coordinating the activities of the first five initiative into
 7 28 the establishment of patient-centered medical homes developed
 7 29 to improve health quality and population health while reducing
 7 30 health care costs. To the maximum extent possible, funding
 7 31 allocated in this subsection shall be utilized as matching
 7 32 funds for Medicaid program reimbursement.

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.

7 33 3. Of the funds appropriated in this section, \$1,145,102
 7 34 is allocated to the Iowa commission on volunteer service for
 7 35 programs and grants.

Allocates \$1,145,102 to the Iowa Commission on Volunteer Service in the HHS for programs and grants.

DETAIL: This is a new allocation for FY 2025.

8 1 4. The university of Iowa hospitals and clinics under
 8 2 the control of the state board of regents shall not receive
 8 3 indirect costs from the funds appropriated in this section.
 8 4 The university of Iowa hospitals and clinics billings to the
 8 5 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.

8 6 CHILD SUPPORT SERVICES

8 7 Sec. 8. CHILD SUPPORT SERVICES. There is appropriated from
 8 8 the general fund of the state to the department of health and
 8 9 human services for the fiscal year beginning July 1, 2024, and
 8 10 ending June 30, 2025, the following amount, or so much thereof
 8 11 as is necessary, to be used for the purposes designated:
 8 12 For child support services, including salaries, support,
 8 13 maintenance, and miscellaneous purposes:
 8 14 \$ 15,434,282

General Fund appropriation to the HHS — Child Support Services for FY 2025.

DETAIL: Due to organizational changes within the HHS, appropriations from FY 2024 have been restructured. The new FY 2025 appropriation for Child Support Services is comprised of moneys formerly appropriated to Child Support Recoveries. This restructured appropriation represents no change in funding compared to estimated FY 2024.

8 15 1. Federal access and visitation grant moneys shall be used
 8 16 for services designed to increase compliance with the child

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

8 17 access provisions of court orders, including but not limited to
8 18 neutral visitation sites and mediation services.

8 19 2. The appropriation made to the department for child
8 20 support services may be used throughout the fiscal year in the
8 21 manner necessary for purposes of cash flow management, and for
8 22 cash flow management purposes the department may temporarily
8 23 draw more than the amount appropriated, provided the amount
8 24 appropriated is not exceeded at the close of the fiscal year.

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.

8 25 TEMPORARY ASSISTANCE FOR NEEDY FAMILIES BLOCK GRANT

8 26 Sec. 9. TEMPORARY ASSISTANCE FOR NEEDY FAMILIES BLOCK
8 27 GRANT. There is appropriated from the special fund created in
8 28 section 8.41 to the department of health and human services
8 29 for the fiscal year beginning July 1, 2024, and ending June
8 30 30, 2025, from moneys received under the federal temporary
8 31 assistance for needy families (TANF) block grant pursuant
8 32 to the federal Personal Responsibility and Work Opportunity
8 33 Reconciliation Act of 1996, Pub.L. No.104-193, and successor
8 34 legislation, the following amounts, or so much thereof as is
8 35 necessary, to be used for the purposes designated:

Appropriates a total of \$143,980,383 from the Temporary Assistance for Needy Families (TANF) Federal Block Grant Fund appropriation for FY 2025.

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.

9 1 1. For community access and eligibility, FIP, the PROMISE
9 2 JOBS program, implementing family investment agreements in
9 3 accordance with chapter 239B, and for continuation of the
9 4 program promoting awareness of the benefits of a healthy
9 5 marriage:
9 6 \$ 12,988,627

Appropriates funds from the TANF Block Grant for community access and eligibility, the FIP, the PROMISE JOBS program, implementing family investment agreements, and for continuation of the Program promoting awareness of the benefits of a healthy marriage.

DETAIL: Due to organizational changes within the TANF Block Grant, appropriations from FY 2024 have been restructured. The new FY 2025 appropriation for Community Access and Eligibility, the FIP, and the PROMISE JOBS Program is comprised of moneys formerly appropriated to the following areas under the TANF Block Grant:

- FIP Cash Grants/Recoupments/Postage
- FIP Family Self-Sufficiency Grants
- FIP/PROMISE JOBS
- FIP Technology
- FIP Food Assistance (Healthy Marriage)
- General Administration

• Field Operations

This restructured appropriation represents no change in funding compared to estimated FY 2024.

9 7 2. For community access and eligibility to provide
9 8 pregnancy prevention grants on the condition that family
9 9 planning services are funded:
9 10 \$ 1,913,203

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

DETAIL: Due to organizational changes within the TANF Block Grant, appropriations from FY 2024 have been restructured. The new FY 2025 appropriation for Community Access and Eligibility, the FIP, and the PROMISE JOBS Program is comprised of moneys formerly appropriated to the Pregnancy Prevention appropriation under the TANF Block Grant. This restructured appropriation represents no change in funding compared to estimated FY 2024.

9 11 Pregnancy prevention grants shall be awarded to programs
9 12 in existence on or before July 1, 2024, if the programs have
9 13 demonstrated positive outcomes. Grants shall be awarded to
9 14 pregnancy prevention programs which are developed after July
9 15 1, 2024, if the programs are based on existing models that
9 16 have demonstrated positive outcomes. Grants shall comply with
9 17 the requirements provided in 1997 Iowa Acts, chapter 208,
9 18 section 14, subsections 1 and 2, including the requirement that
9 19 grant programs must emphasize sexual abstinence. Priority in
9 20 the awarding of grants shall be given to programs that serve
9 21 areas of the state which demonstrate the highest percentage of
9 22 unplanned pregnancies of females of childbearing age within the
9 23 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.

9 24 3. For community access and eligibility to meet one of the
9 25 four core purposes of TANF as specified in 45 C.F.R. §260.20,
9 26 including by modernizing the program to promote economic
9 27 mobility and self-sufficiency, ensuring that families are able
9 28 to overcome benefit cliffs, encouraging healthy families, and
9 29 streamlining service delivery to reduce duplication:
9 30 \$ 5,000,000

Appropriates funds from the TANF Block Grant to promote economic mobility and self-sufficiency, encourage healthy families, and streamline service delivery.

DETAIL: This is a new appropriation under the TANF Block Grant for FY 2025.

9 31 4. For technology needs related to child support
9 32 modernization of the Iowa collections and reporting (ICAR)
9 33 system and for a closed loop referral system for the thrive

Appropriates funds from the TANF Block Grant for technology needs for the Iowa Collections and Reporting System and the Thrive Iowa Program.

<p>9 34 Iowa program: 9 35</p>	<p>\$ 5,000,000</p>	<p>DETAIL: This is a new appropriation under the TANF Block Grant for FY 2025.</p>
<p>10 1 5. For early intervention and supports for the family 10 2 development and self-sufficiency (FaDSS) grant program in 10 3 accordance with section 216A.107: 10 4</p>	<p>\$ 2,888,980</p>	<p>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 2024. The FaDSS Grant Program is a home-based supportive service that assists 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.</p>
<p>10 5 Of the funds allocated for the FaDSS grant program in this 10 6 subsection, not more than 5 percent of the funds shall be used 10 7 for administrative purposes.</p>		<p>Specifies that no more than 5.00% (\$144,449) of the funds allocated for the FaDSS Grant Program can be used for administrative purposes.</p>
<p>10 8 6. For early intervention and supports for child abuse 10 9 prevention grants: 10 10</p>	<p>\$ 125,000</p>	<p>Appropriates funds from the TANF Block Grant for child abuse prevention grants. DETAIL: This is no change compared to estimated FY 2024.</p>
<p>10 11 7. For accountability, compliance, program integrity, 10 12 technology needs, and other resources necessary to meet federal 10 13 and state reporting, tracking, and case management requirements 10 14 and other departmental needs: 10 15</p>	<p>\$ 3,533,647</p>	<p>Appropriates funds from the TANF Block Grant for administration and compliance for federal welfare reform reporting, tracking, and case management technology and resource needs. DETAIL: Due to organizational changes within the TANF Block Grant, appropriations from FY 2024 have been restructured. The new FY 2025 appropriation for Accountability, Compliance, Program Integrity, and Technology Needs is comprised of moneys formerly appropriated to the General Administration appropriation under the TANF Block Grant. This restructured appropriation represents no change in funding compared to estimated FY 2024.</p>
<p>10 16 8. For state child care assistance: 10 17</p>	<p>\$ 47,166,826</p>	<p>Appropriates funds from the TANF Block Grant to Child Care Assistance (CCA). DETAIL: This is no change compared to estimated FY 2024.</p>
<p>10 18 9. For child protective services:</p>		<p>Appropriates funds from the TANF Block Grant to Child Protective</p>

10 19 \$ 62,364,100

Services (formerly Child and Family Services).

DETAIL: Due to organizational changes within the TANF Block Grant, appropriations from FY 2024 have been restructured. The new FY 2025 appropriation for Child Protective Services is comprised of moneys formerly appropriated to the Field Operations and Child and Family Services appropriations under the TANF Block Grant. This restructured appropriation represents no change in funding compared to estimated FY 2024.

10 20 10. For child protective services for the kinship stipend
10 21 program:
10 22 \$ 3,000,000

Appropriates funds from the TANF Block Grant for the Kinship Stipend Program.

DETAIL: This is a new appropriation for FY 2025. The Program provides support for children in a kinship caregiver's home.

10 23 DIVISION VI
10 24 MEDICAL ASSISTANCE — STATE SUPPLEMENTARY ASSISTANCE —
10 25 AND WELL KIDS IN IOWA PROGRAM AND OTHER HEALTH-RELATED PROGRAMS
10 26 — FY 2024-2025

10 27 Sec. 10. MEDICAL ASSISTANCE, STATE SUPPLEMENTARY
10 28 ASSISTANCE, AND HEALTHY AND WELL KIDS IN IOWA PROGRAM. There
10 29 is appropriated from the general fund of the state to the
10 30 department of health and human services for the fiscal year
10 31 beginning July 1, 2024, and ending June 30, 2025, the following
10 32 amount, or so much thereof as is necessary, to be used for the
10 33 purposes designated:

General Fund appropriation to the HHS for the Medical Assistance (Medicaid), State Supplementary Assistance (SSA), and Healthy and Well Kids in Iowa (Hawki) Program for FY 2025.

DETAIL: This is a net increase of \$107,680,835 compared to estimated FY 2024. The changes include:

10 34 For medical assistance program reimbursement and associated
10 35 costs as specifically provided in the reimbursement
11 1 methodologies in effect on June 30, 2024, except as otherwise
11 2 expressly authorized by law, consistent with options under
11 3 federal law and regulations, and contingent upon receipt of
11 4 approval from the office of the governor of reimbursement
11 5 for each abortion performed under the program; for the state
11 6 supplementary assistance program; for the health insurance
11 7 premium payment program; and for maintenance of the healthy and
11 8 well kids in Iowa (Hawki) program pursuant to chapter 514I,
11 9 including supplemental dental services, for receipt of federal
11 10 financial participation under Tit.XXI of the federal Social
11 11 Security Act, which creates the children's health insurance

- An increase of \$41,322,970 to include the Children's Health Insurance Program (CHIP) in the Medicaid appropriation beginning in FY 2025. The CHIP amount is an increase of \$2,661,282 compared to estimated FY 2024 due to higher enrollment in the Hawki Program and is offset by appropriation transfers to Community Access and Eligibility and Health Program Operations beginning in FY 2025.
- An increase of \$40,920,314 to fund Medicaid at the Medicaid Forecasting Group's March 2024 estimate, which does not include an FY 2025 increase for Medicaid capitation rates.
- An increase of \$16,500,000 to the Home and Community-Based Services (HCBS) program to offset federal American Rescue Plan Act of 2021 (ARPA) funding that expired.
- An increase of \$14,600,000 to increase access to

11 12 program; and for other specified health-related programs:
 11 13 \$1,651,307,614

- community-based providers.
- An increase of \$5,000,000 for enhanced case management to coordinate care for vulnerable populations.
- An increase of \$4,479,762 to include SSA in the Medicaid appropriation beginning in FY 2025. The SSA amount is a decrease of \$2,869,240 compared to estimated FY 2024 due to lower enrollment and an appropriation transfer to Aging and Disability Services beginning in FY 2025.
- An increase of \$3,000,000 for a home health provider rate adjustment.
- An increase of \$2,251,436 for a mental health provider rate adjustment.
- An increase of \$2,000,000 for pharmacy dispensing fees.
- An increase of \$1,779,122 for an increase in income eligibility up to 300.0% of the federal poverty level (FPL) for the Medicaid for Employed People with Disabilities (MEPD) program.
- An increase of \$418,121 for a physical therapist provider rate adjustment.
- An increase of \$369,000 for Psychiatric Medical Institutions for Children (PMICs) tiered provider rates.
- An increase of \$276,947 for a community mental health centers provider rate adjustment.
- An increase of \$198,624 for a nurse practitioner rate adjustment.
- An increase of \$144,014 for a medical supplies provider rate adjustment.
- An increase of \$86,000 for biomarker testing coverage.
- An increase of \$64,692 for an occupational therapist provider rate adjustment.
- An increase of \$32,832 for a psychologist rate adjustment.
- An increase of \$29,691 for a physician assistant provider rate adjustment.
- An increase of \$3,122 for a certified nurse midwife provider rate adjustment.
- A decrease of \$2,940,726 for an appropriation transfer to Community Access and Eligibility beginning in FY 2025.
- A decrease of \$6,000,000 to reflect revenue enhancements from the Hospital Directed Payment Program that allows the Legislature to reduce the Medicaid General Fund appropriation.
- A decrease of \$16,855,086 for an appropriation transfer to Health Program Operations beginning in FY 2025.

11 14 1. Of the funds appropriated in this section,

Allocates \$1,605,504,882 for the Medicaid Program.

11 15 \$1,605,504,882 is allocated for medical assistance program
11 16 reimbursement and associated costs.

DETAIL: This is an increase of \$61,878,103 compared to estimated FY 2024. This allocation was previously located under the appropriation for Medical Assistance.

11 17 a. Of the funds allocated in this subsection, \$800,000 shall
11 18 be used for the renovation and construction of certain nursing
11 19 facilities, consistent with the provisions of chapter 249K.

Allocates \$800,000 of the funds appropriated for Medicaid to provide assistance to nursing homes for facility improvements.

DETAIL: This is no change compared to the estimated FY 2024 allocation. This allocation was previously located under the appropriation for General Administration. 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.

11 20 b. Of the funds allocated in this subsection, \$3,383,880
11 21 shall be used for program administration, outreach, and
11 22 enrollment activities of the state family planning services
11 23 program pursuant to section 217.41B, and of this amount, the
11 24 department may use \$200,000 for administrative expenses.

Allocates \$3,383,880 of the funds appropriated for Medicaid to administer the State Family Planning Services Program. Permits \$200,000 to be used for administrative expenses.

DETAIL: This is no change compared to the estimated FY 2024 allocation. This allocation was previously located under the appropriation for Medical Assistance.

11 25 c. Of the funds allocated in this subsection, \$369,000 shall
11 26 be used to provide enhanced reimbursement for a psychiatric
11 27 medical institution for children that meets the selection
11 28 criteria and for the purposes specified in 2024 Iowa Acts,
11 29 House File 2402, or successor legislation, if enacted.

Allocates \$369,000 of the funds appropriated for Medicaid to provide enhanced reimbursement for a PMIC as specified in 2024 Iowa Acts, [House File 2402](#) (Psychiatric Medical Institutions for Children, Medicaid Rates Bill), or successor legislation, if enacted.

DETAIL: This is a new allocation for FY 2025.

11 30 d. Of the funds allocated in this subsection, \$86,000 shall
11 31 be used to provide biomarker testing under the Medicaid program
11 32 as specified in 2024 Iowa Acts, House File 2668, or successor
11 33 legislation, if enacted.

Allocates \$86,000 of the funds appropriated for Medicaid to provide biomarker testing as specified in 2024 Iowa Acts, [House File 2668](#) (Biomarker Testing, Health Insurance Bill), or successor legislation, if enacted.

DETAIL: This is a new allocation for FY 2025.

11 34 11 35 12 1	e. Of the funds allocated in this subsection, \$2,000,000 shall be used for adjustment of the Medicaid pharmacy dispensing fee.	Allocates \$2,000,000 of the funds appropriated for Medicaid to adjust the Medicaid pharmacy dispensing fee. DETAIL: This is a new allocation for FY 2025.
12 2 12 3 12 4 12 5 12 6	f. Of the funds allocated in this subsection, \$1,779,122 shall be used to increase income eligibility for the Medicaid for employed people with disabilities program to 300 percent of the most recently revised official poverty guidelines published by the United States department of health and human services.	Allocates \$1,779,122 of the funds appropriated for Medicaid for an increase in income eligibility up to 300.0% of the FPL for the MEPD program. DETAIL: This is a new allocation for FY 2025.
12 7 12 8 12 9	g. Of the funds allocated in this subsection, \$2,251,436 shall be used to increase reimbursement rates under the Medicaid program for mental health providers.	Allocates \$2,251,436 of the funds appropriated for Medicaid to increase reimbursement rates for mental health providers. DETAIL: This is a new allocation for FY 2025.
12 10 12 11 12 12 12 13	2. Iowans support reducing the number of abortions performed in our state. Funds appropriated under this section shall not be used for abortions, unless otherwise authorized under this section.	Specifies conditions that permit the Medicaid Program to reimburse providers for abortion services.
12 14 12 15 12 16	3. The provisions of this section relating to abortions shall also apply to the Iowa health and wellness plan created pursuant to chapter 249N.	Specifies that the policy on abortion also applies to the Iowa Health and Wellness Plan.
12 17 12 18	4. Of the funds appropriated in this section, \$4,479,762 is allocated for the state supplementary assistance program.	Allocates \$4,479,762 of the funds appropriated for Medicaid for the SSA Program. DETAIL: This is a new allocation for FY 2025.
12 19 12 20 12 21 12 22 12 23 12 24	5. Of the funds appropriated in this section, \$41,322,970 is allocated for maintenance of the Hawki program pursuant to chapter 514I, including supplemental dental services, for receipt of federal financial participation under Tit.XXI of the federal Social Security Act, which creates the children's health insurance program.	Allocates \$41,322,970 of the funds appropriated for Medicaid for the CHIP, also known as the Hawki Program. DETAIL: This is an increase of \$2,661,282 compared to the estimated FY 2024 allocation due to a projected increase in enrollment through FY 2025. This allocation was previously located under the appropriation for CHIP.
12 25	HEALTH PROGRAM OPERATIONS	
12 26	Sec. 11. HEALTH PROGRAM OPERATIONS. There is appropriated	General Fund appropriation to the HHS — Health Program Operations

12 27 from the general fund of the state to the department of health
 12 28 and human services for the fiscal year beginning July 1,
 12 29 2024, and ending June 30, 2025, the following amount, or so
 12 30 much thereof as is necessary, to be used for the purposes
 12 31 designated:
 12 32 For health program operations:
 12 33 \$ 39,597,231

for FY 2025.

DETAIL: Due to organizational changes within the HHS, appropriations from FY 2024 have been restructured. The new FY 2025 appropriation for Health Program Operations is comprised of moneys formerly appropriated to the following areas:

- General Administration
- Field Operations
- FIP/PROMISE JOBS
- Medical Assistance
- Children's Health Insurance
- Health Program Operations
- Public Protection

This restructured appropriation represents a net increase of \$1,185,661 compared to estimated FY 2024 for a federal services data hub connection, a 10.00% procurement factor for six major contracts, and to replace pharmaceutical settlement funds for Health Program Operations.

12 34 1. The department of inspections, appeals, and licensing
 12 35 shall provide all state matching funds for survey and
 13 1 certification activities performed by the department of
 13 2 inspections, appeals, and licensing. The department of health
 13 3 and human services is solely responsible for distributing the
 13 4 federal matching funds for such activities.

Requires the Department of Inspections, Appeals, and Licensing (DIAL) to provide the State matching funds for survey and certification activities and requires the HHS to distribute the federal matching funds.

13 5 2. Of the funds appropriated in this section, a sufficient
 13 6 amount shall be used for the administration of the health
 13 7 insurance premium payment program, including salaries, support,
 13 8 maintenance, and miscellaneous purposes.

Specifies that a sufficient amount must be used for the administration of the Health Insurance Premium Payment Program.

13 9 3. Of the funds appropriated in this section, \$750,000 shall
 13 10 be used for the state poison control center. Pursuant to the
 13 11 directive under 2014 Iowa Acts, chapter 1140, section 102, the
 13 12 federal matching funds available to the state poison control
 13 13 center from the department under the federal Children's Health
 13 14 Insurance Program Reauthorization Act of 2009 allotment shall
 13 15 be subject to the federal administrative cap rule of 10 percent
 13 16 applicable to funding provided under Tit.XXI of the federal
 13 17 Social Security Act and included within the department's

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

DETAIL: This is no change compared to the estimated FY 2024 allocation. This allocation was previously located under the appropriation for Public Protection. The Center is allowed to transfer as much funding as needed for the purpose of receiving matching federal funds.

13 18 calculations of the cap.

13 19 4. Unless otherwise provided, annual increases for services
13 20 provided through contracts funded under this section shall
13 21 not exceed the amount by which the consumer price index for
13 22 all urban consumers increased during the most recently ended
13 23 calendar year.

Specifies that annual increases for services provided through contracts must not exceed the increase in the Consumer Price Index for All Urban Consumers for the most recently ended calendar year.

13 24 HEALTH CARE ACCOUNTS AND FUNDS

13 25 Sec. 12. PHARMACEUTICAL SETTLEMENT ACCOUNT — DEPARTMENT
13 26 OF HEALTH AND HUMAN SERVICES. There is appropriated from the
13 27 pharmaceutical settlement account created in section 249A.33 to
13 28 the department of health and human services for the fiscal year
13 29 beginning July 1, 2024, and ending June 30, 2025, the following
13 30 amount, or so much thereof as is necessary, to be used for the
13 31 purposes designated:

Pharmaceutical Settlement Account appropriation to the HHS to supplement Health Program Operations under the Medicaid Program.

DETAIL: This is no change compared to estimated FY 2024.

13 32 Notwithstanding any provision of law to the contrary, to
13 33 supplement the appropriation made in this Act for health
13 34 program operations under the medical assistance program for the
13 35 same fiscal year:

14 1 \$ 234,193

14 2 Sec. 13. QUALITY ASSURANCE TRUST FUND — DEPARTMENT OF
14 3 HEALTH AND HUMAN SERVICES. Notwithstanding any provision to
14 4 the contrary and subject to the availability of funds, there is
14 5 appropriated from the quality assurance trust fund created in
14 6 section 249L.4 to the department of health and human services
14 7 for the fiscal year beginning July 1, 2024, and ending June 30,
14 8 2025, the following amount, or so much thereof as is necessary,
14 9 for the purposes designated:

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

DETAIL: This is no change compared to estimated FY 2024, 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).

14 10 To supplement the appropriation made in this Act from the
14 11 general fund of the state to the department of health and human
14 12 services for medical assistance for the same fiscal year:

14 13 \$ 111,216,205

14 14 Sec. 14. HOSPITAL HEALTH CARE ACCESS TRUST FUND —
14 15 DEPARTMENT OF HEALTH AND HUMAN SERVICES. Notwithstanding any
14 16 provision to the contrary and subject to the availability of
14 17 funds, there is appropriated from the hospital health care
14 18 access trust fund created in section 249M.4 to the department
14 19 of health and human services for the fiscal year beginning July

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

DETAIL: This is no change compared to estimated FY 2024.

14 20 1, 2024, and ending June 30, 2025, the following amount, or so
 14 21 much thereof as is necessary, for the purposes designated:
 14 22 To supplement the appropriation made in this Act from the
 14 23 general fund of the state to the department of health and human
 14 24 services for medical assistance for the same fiscal year:
 14 25 \$ 33,920,554

14 26 REIMBURSEMENT RATES

14 27 Sec. 15. REIMBURSEMENT RATES.

14 28 1. Reimbursement for medical assistance, state
 14 29 supplementary assistance, and social service providers and
 14 30 services reimbursed under the purview of the department of
 14 31 health and human services shall remain at the reimbursement
 14 32 rate or shall be determined pursuant to the reimbursement
 14 33 methodology in effect on June 30, 2024, with the exception of
 14 34 the following:

- 14 35 a. If reimbursement is otherwise negotiated by contract or
- 15 1 pursuant to an updated fee schedule.
- 15 2 b. As otherwise provided in this section.

15 3 2. a. Notwithstanding any provision of law to the contrary,
 15 4 for the fiscal year beginning July 1, 2024, and ending June
 15 5 30, 2025, the department of health and human services shall
 15 6 reimburse case-mix nursing facility rates at the amounts in
 15 7 effect on June 30, 2024.

15 8 b. The department of health and human services shall
 15 9 calculate each nursing facility's case-mix index for the period
 15 10 beginning July 1, 2023, using weighting based on the current
 15 11 patient driven payment model (PDPM) schedule. Rosters shall be
 15 12 made to show a separate calculation to determine the average
 15 13 case-mix index for a nursing-facility-wide case mix index, and
 15 14 a case-mix index for the residents of a nursing facility who
 15 15 are Medicaid recipients using all minimum data set reports by
 15 16 the nursing facility for the previous semi-annual period using
 15 17 a day weighted calculation.

15 18 3. For the fiscal year beginning July 1, 2024, Medicaid
 15 19 provider rates shall be adjusted to 85 percent of the benchmark
 15 20 rates based on the department's 2023 Medicaid rate review for
 15 21 all of the following Medicaid providers:

- 15 22 a. Home health agencies.

Requires that reimbursement for Medical Assistance, SSA, and social service providers and services must remain at the reimbursement rate or be determined pursuant to the reimbursement methodology, unless otherwise negotiated by contract or provided in this Section.

Requires the HHS to reimburse case-mix nursing facility reimbursement rates for FY 2025 at the rates in effect in FY 2024. The HHS is required to calculate each nursing facility's case-mix index for FY 2024 using weighting based on the current patient driven payment model (PDPM) schedule.

Requires the FY 2025 provider rates for home health agencies, medical supply providers, physician assistants, physical therapists, occupational therapists, and certified nurse midwives to be adjusted to 85.00% of the benchmark rates based on the HHS 2023 Medicaid rate review.

15 23	b. Medical supply providers.	
15 24	c. Physician assistants.	
15 25	d. Physical therapists.	
15 26	e. Occupational therapists.	
15 27	f. Certified nurse midwives.	
15 28	4. For the fiscal year beginning July 1, 2024, Medicaid	Requires that Medicaid provider rates for FY 2025 are adjusted to 85.00% of the benchmark rates based on the HHS 2024 Medicaid rate review for psychologists and nurse practitioners.
15 29	provider rates shall be adjusted to 85 percent of the benchmark	
15 30	rates based on the department's 2024 Medicaid rate review for	
15 31	all of the following Medicaid providers:	
15 32	a. Psychologists.	
15 33	b. Nurse practitioners.	
15 34	5. For the fiscal year beginning July 1, 2024, reimbursement	Requires reimbursement rates for HCBS providers to be increased to the extent possible within the State funding, including the \$14,600,000 provided for this purpose.
15 35	rates for home and community-based services providers shall be	
16 1	increased compared to the rates in effect on June 30, 2024, to	
16 2	the extent possible within the state funding, including the	
16 3	\$14,600,000 provided for this purpose.	
16 4	6. For the fiscal year beginning July 1, 2024, reimbursement	Requires reimbursement rates for community mental health centers to be increased to the extent possible within the State funding, including the \$276,947 provided for this purpose.
16 5	rates for community mental health centers shall be increased	
16 6	compared to the rates in effect on June 30, 2024, to the extent	
16 7	possible within the state funding, including the \$276,947	
16 8	provided for this purpose.	
16 9	7. For the fiscal year beginning July 1, 2024, enhanced	Enhances reimbursement rates for a PMIC specified in 2024 Iowa Acts, House File 2402 (Psychiatric Medical Institutions for Children, Medicaid Rates Bill), or successor legislation, if enacted.
16 10	reimbursement shall be provided for a psychiatric medical	
16 11	institution for children that meets the selection criteria	DETAIL: The Fiscal Note for HF 2402 detailed approximately \$369,000 in State costs in FY 2025 to implement enhanced reimbursement rates for a PMIC.
16 12	specified in 2024 Iowa Acts, House File 2402, or successor	
16 13	legislation, if enacted.	
16 14	8. For the fiscal year beginning July 1, 2024, the pharmacy	
16 15	dispensing fee shall be adjusted within the additional	Requires the pharmacy dispensing fee to be adjusted within the \$2,000,000 allocated for this purpose.
16 16	\$2,000,000 appropriated for this purpose.	
16 17	9. For the fiscal year beginning July 1, 2024, the	Requires the reimbursement rates for mental health providers to be increased within the additional \$2,251,436 allocated for this purpose.
16 18	reimbursement rates for mental health providers shall be	
16 19	increased within the additional \$2,251,436 appropriated for	
16 20	this purpose.	

16 21 DIVISION VII
 16 22 FAMILY WELL-BEING AND PROTECTION — FY 2024-2025

16 23 STATE CHILD CARE ASSISTANCE

16 24 Sec. 16. STATE CHILD CARE ASSISTANCE. There is appropriated
 16 25 from the general fund of the state to the department of health
 16 26 and human services for the fiscal year beginning July 1,
 16 27 2024, and ending June 30, 2025, the following amount, or so
 16 28 much thereof as is necessary, to be used for the purposes
 16 29 designated:
 16 30 For state child care assistance in accordance with section
 16 31 237A.13:
 16 32 \$ 34,966,931

General Fund appropriation to the HHS for CCA.

DETAIL: Due to organizational changes within the HHS, appropriations from FY 2024 have been restructured. The new FY 2025 appropriation for State CCA is comprised of moneys formerly appropriated to CCA. This restructured appropriation represents no change compared to estimated FY 2024.

16 33 A portion of the state match for the federal child care and
 16 34 development block grant shall be provided as necessary to meet
 16 35 federal matching funds requirements through the state general
 17 1 fund appropriation made for child development grants and other
 17 2 programs for at-risk children in section 279.51.

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

17 3 EARLY INTERVENTION AND SUPPORTS

17 4 Sec. 17. EARLY INTERVENTION AND SUPPORTS. There is
 17 5 appropriated from the general fund of the state to the
 17 6 department of health and human services for the fiscal year
 17 7 beginning July 1, 2024, and ending June 30, 2025, the following
 17 8 amount, or so much thereof as is necessary, to be used for the
 17 9 purposes designated:
 17 10 For promoting the optimum health status for children
 17 11 and adolescents from birth through 21 years of age, and for
 17 12 families:
 17 13 \$ 35,277,739

General Fund appropriation to the HHS — Early Intervention and Supports for FY 2025.

DETAIL: Due to organizational changes within the HHS, appropriations from FY 2024 have been restructured. The new FY 2025 appropriation for Early Intervention and Supports is comprised of moneys formerly appropriated to the following areas:

- Human Rights Administration
- Community Advocacy and Services
- FIP/PROMISE JOBS
- CCA
- Healthy Children and Families
- Child Abuse Prevention

This restructured appropriation represents no change in funding compared to estimated FY 2024.

17 14 1. Of the funds appropriated in this section, not more

Limits the General Fund amount used to fund the Healthy

17 15 than \$734,000 shall be used for the healthy opportunities for
 17 16 parents to experience success (HOPES)-healthy families Iowa
 17 17 (HFI) program established pursuant to section 135.106.

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 2024 allocation. This allocation was previously located under the appropriation for Healthy Children and Families. 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.

17 18 2. Of the funds appropriated in this section, \$4,313,854 is
 17 19 allocated for the FaDSS grant program. Of the funds allocated
 17 20 for the FaDSS grant program in this subsection, not more than 5
 17 21 percent of the funds shall be used for administration of the
 17 22 grant program.

Allocates \$4,313,854 for the FaDSS Grant Program. Requires that a maximum of 5.00% (\$215,963) of the allocation be spent on administration of the Program.

DETAIL: This is no change compared to estimated FY 2024. This allocation was previously located under the moneys spent from the FIP Account.

17 23 3. Of the funds appropriated in this section, \$29,256,799
 17 24 shall be used for the purposes of the early childhood Iowa fund
 17 25 created in section 256I.11.

Allocates \$29,256,799 for the Early Childhood Iowa (ECI) Fund.

DETAIL: This is no change compared to estimated FY 2024. This allocation was previously located under the appropriation for CCA. The funds are distributed to local ECI Area Boards in addition to the following four allocations:

- Funding for technical assistance through the ECI Office within the Department of Management (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

17 26 4. Of the funds appropriated in this section, \$1,000,000
 17 27 shall be used for the purposes of program administration and
 17 28 provision of pregnancy support services through the more
 17 29 options for maternal support program in accordance with section
 17 30 217.41C.

Allocates \$1,000,000 to be used for administration and pregnancy support services through the More Options for Maternal Support (MOMS) Program.

DETAIL: This is no change compared to estimated FY 2024. This allocation was previously located under the appropriation for General Administration.

17 31 CHILD PROTECTIVE SERVICES

17 32 Sec. 18. CHILD PROTECTIVE SERVICES. There is appropriated
 17 33 from the general fund of the state to the department of health
 17 34 and human services for the fiscal year beginning July 1,
 17 35 2024, and ending June 30, 2025, the following amount, or so
 18 1 much thereof as is necessary, to be used for the purposes
 18 2 designated:
 18 3 For child, family, and adoption services, and for salaries,
 18 4 support, maintenance, and miscellaneous purposes:
 18 5 \$ 170,374,778

General Fund appropriation to the HHS — Child Protective Services for FY 2025.

DETAIL: Due to organizational changes within the HHS, appropriations from FY 2024 have been restructured. The new FY 2025 appropriation for Child Protective Services is comprised of moneys formerly appropriated to the following areas:

- General Administration
- Field Operations
- Adoption Subsidy
- Child and Family Services

This restructured appropriation represents a net increase of \$8,330,387 compared to estimated FY 2024.

18 6 1. Of the funds appropriated in this section, \$1,717,000
 18 7 is allocated specifically for expenditure for fiscal year
 18 8 2024-2025 through the decategorization services funding pools
 18 9 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 2024 allocation. This allocation was previously located under the appropriation for Child and Family Services.

18 10 2. Federal funds received by the state during the fiscal
 18 11 year beginning July 1, 2024, as the result of the expenditure
 18 12 of state funds appropriated during a previous state fiscal
 18 13 year for a service or activity funded under this section, are
 18 14 appropriated to the department to be used as additional funding
 18 15 for services and purposes provided for under this section.
 18 16 Notwithstanding section 8.33, moneys received in accordance
 18 17 with this subsection that remain unencumbered or unobligated at
 18 18 the close of the fiscal year shall not revert to any fund but
 18 19 shall remain available for the purposes designated until the
 18 20 close of the succeeding fiscal year.

Requires federal funds received in FY 2025 because of the expenditure of State funds in a previous year to be used for child protective services. Allows any unexpended funds to remain available for expenditure through FY 2026.

18 21 3. a. Of the funds appropriated in this section, \$748,000
 18 22 is allocated for the payment of the expenses of court-ordered
 18 23 services provided to children who are under the supervision
 18 24 of the department, which expenses are a charge upon the state

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 2024

18 25 pursuant to section 232.141, subsection 4.	allocation. This allocation was previously located under the appropriation for Child and Family Services.
18 26 b. Notwithstanding chapter 232 or any other provision of 18 27 law to the contrary, a district or juvenile court shall not 18 28 order any service which is a charge upon the state pursuant 18 29 to section 232.141 if the court-ordered services distribution 18 30 amount is insufficient to pay for the service.	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.
18 31 4. Of the funds appropriated in this section, \$1,658,000 18 32 shall be used for the child protection center grant program for 18 33 child protection centers located in Iowa in accordance with 18 34 section 135.118. The grant amounts under the program shall be 18 35 equalized so that each center receives a uniform base amount of 19 1 \$245,000, and so that the remaining funds are awarded through 19 2 a funding formula based upon the volume of children served. 19 3 To increase access to child protection center services for 19 4 children in rural areas, the funding formula for the awarding 19 5 of the remaining funds shall provide for the awarding of an 19 6 enhanced amount to eligible grantees to develop and maintain 19 7 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 2024 allocation. This allocation was previously located under the appropriation for Child and Family Services.
19 8 5. Of the funds appropriated in this section, \$4,359,500 is 19 9 allocated for the preparation for adult living program pursuant 19 10 to section 234.46.	Allocates \$4,359,500 to the Preparation for Adult Living (PAL) Program. DETAIL: This is an increase of \$334,500 compared to the estimated FY 2024 allocation. This allocation was previously located under the appropriation for Child and Family Services.
19 11 6. Of the funds appropriated in this section, a portion may 19 12 be used for family-centered services for purposes of complying 19 13 with the federal Family First Prevention Services Act of 2018, 19 14 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 .
19 15 7. a. Of the funds appropriated in this section, a 19 16 sufficient amount is allocated for adoption subsidy payments 19 17 and related costs.	Specifies that a sufficient amount is allocated to the Adoption Subsidy Program. DETAIL: This allocation was previously an appropriation of \$40,883,507 for the Adoption Subsidy Program in FY 2024.
19 18 b. Any funds allocated in this subsection remaining after	CODE: Directs the HHS to use the funds appropriated to the Adoption

19 19 the allocation under paragraph “a” are designated and allocated
 19 20 as state savings resulting from implementation of the federal
 19 21 Fostering Connections to Success and Increasing Adoptions Act
 19 22 of 2008, Pub.L. No.110-351, and successor legislation, as
 19 23 determined in accordance with 42 U.S.C. §673(a)(8), and shall
 19 24 be used for post-adoption services and for other purposes
 19 25 allowed under these federal laws, Tit.IV-B or Tit.IV-E of the
 19 26 federal Social Security Act.

Subsidy Program for adoption subsidy payments and post-adoption 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.

19 27 c. Of the funds appropriated in this section, \$296,463
 19 28 shall be used to increase the adoption subsidy paid to a person
 19 29 pursuant to section 600.17 who adopts a child after July 1,
 19 30 2024, by ten percent over the rates in effect on June 30, 2024.

Allocates \$296,463 to increase the adoption subsidy by 10.00% over the rates in effect on June 30, 2024.

DETAIL: This is a new allocation for FY 2025.

19 31 8. Of the funds appropriated in this section, \$193,000 shall
 19 32 be used to expand the availability of supervised apartment
 19 33 living arrangements.

Allocates \$193,000 to expand the availability of supervised apartment living arrangements.

DETAIL: This is a new allocation for FY 2025.

19 34 9. Of the funds appropriated in this section, \$617,530 shall
 19 35 be used to increase the foster care reimbursement rates paid
 20 1 pursuant to section 234.38, by ten percent over the rates in
 20 2 effect on June 30, 2024.

Allocates \$617,530 to increase foster care reimbursement rates by 10.00% over the rates in effect June 30, 2024.

DETAIL: This is a new allocation for FY 2025.

20 3 10. Of the funds appropriated in this section, \$2,000,000
 20 4 shall be used to pay the cost of the preplacement investigation
 20 5 and the postplacement investigations related to adoptions, as
 20 6 specified pursuant to section 600.8, as amended in this Act.

Allocates \$2,000,000 to pay the cost of preplacement and postplacement adoption investigations as specified in Iowa Code section [600.8](#).

DETAIL: This is a new allocation for FY 2025.

20 7 11. Of the funds appropriated in this section, \$2,623,748
 20 8 shall be used to lower the required ratio of supervisors to
 20 9 social workers from one supervisor for every six and one-half
 20 10 social workers to one supervisor for every five social workers.

Allocates \$2,623,748 to lower the required ratio of supervisors to social workers from one supervisor for every six and one-half social workers to one supervisor for every five social workers.

DETAIL: This is a new allocation for FY 2025.

20 11 12. If a separate funding source is identified that reduces
 20 12 the need for state funds within an allocation under this
 20 13 section, the allocated state funds may be redistributed to
 20 14 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 2025.

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.

20 15 DIVISION VIII
20 16 STATE SPECIALTY CARE — FY 2024-2025

20 17 Sec. 19. STATE SPECIALTY CARE. There is appropriated from
20 18 the general fund of the state to the department of health and
20 19 human services for the fiscal year beginning July 1, 2024, and
20 20 ending June 30, 2025, the following amount, or so much thereof
20 21 as is necessary, to be used for the purposes designated:
20 22 For salaries, support, maintenance, and miscellaneous
20 23 purposes at institutions under the jurisdiction of the
20 24 department of health and human services:
20 25 \$ 100,006,128

General Fund appropriation to the HHS — State Specialty Care for FY 2025.

DETAIL: Due to organizational changes within the HHS, appropriations from FY 2024 have been restructured. The new FY 2025 appropriation for State Specialty Care is comprised of moneys formerly appropriated to the following areas:

- Department-Wide Duties
- Eldora Training School
- Civil Commitment Unit for Sexual Offenders (CCUSO)
- Cherokee Mental Health Institute (MHI)
- Independence MHI
- Glenwood Resource Center
- Woodward Resource Center

This restructured appropriation represents a net increase of \$35,259 compared to estimated FY 2024 due to funding increases for Department-Wide Duties, the Eldora Training School, the CCUSO, and the MHIs as well as a funding decrease for Glenwood Resource Center.

20 26 1. The department shall utilize the funds appropriated in
20 27 this section as necessary to maximize bed capacity and to most
20 28 effectively meet the needs of the individuals served.

Specifies that funds must be used as necessary to maximize bed capacity and meet the needs of the individuals served.

20 29 2. Of the amount appropriated in this section, the following
20 30 amounts are allocated to each institution as follows:

20 31 a. For the state mental health institute at Cherokee:
20 32 \$ 19,439,086

Allocates \$19,439,086 for the MHI at Cherokee.

DETAIL: This allocation is an increase of \$3,515,834 compared to estimated FY 2024 to annualize staffing increases, annualize one-time moneys, and for operational needs.

20 33 b. For the state mental health institute at Independence:

Allocates \$23,916,279 for the MHI at Independence.

20 34 \$ 23,916,279

DETAIL: This allocation is an increase of \$4,104,809 compared to estimated FY 2024 to annualize staffing increases, annualize one-time moneys, and for operational needs.

20 35 c. For the civil commitment unit for sexual offenders at
21 1 Cherokee:
21 2 \$ 17,755,397

Allocates \$17,755,397 for the CCUSO at Cherokee.

DETAIL: This allocation is an increase of \$2,890,060 compared to estimated FY 2024 to annualize staffing increases, annualize one-time moneys, and for operational needs.

21 3 d. For the state resource center at Woodward:
21 4 \$ 14,018,717

Allocates \$14,018,717 for the State Resource Center at Woodward.

DETAIL: This allocation is an increase of \$629,140 compared to estimated FY 2024 for increased operational needs.

21 5 e. For the state resource center at Glenwood:
21 6 \$ 5,255,132

Allocates \$5,255,132 for the State Resource Center at Glenwood.

DETAIL: This allocation is a decrease of \$11,000,000 compared to estimated FY 2024 due to the planned facility closure in FY 2024.

21 7 f. For the state training school at Eldora:
21 8 \$ 19,621,517

Allocates \$19,621,517 for the State Training School at Eldora.

DETAIL: This allocation is an increase of \$2,053,006 compared to estimated FY 2024 to annualize one-time moneys and for operational needs.

21 9 DIVISION IX
21 10 ADMINISTRATION AND COMPLIANCE — FY 2024-2025

21 11 Sec. 20. ACCOUNTABILITY, COMPLIANCE, AND PROGRAM
21 12 INTEGRITY. There is appropriated from the general fund of the
21 13 state to the department of health and human services for the
21 14 fiscal year beginning July 1, 2024, and ending June 30, 2025,
21 15 the following amount, or so much thereof as is necessary, to be
21 16 used for the purposes designated:
21 17 For accountability, compliance, and program integrity,
21 18 including salaries, support, maintenance, and miscellaneous
21 19 purposes:
21 20 \$ 21,194,894

General Fund appropriation to the HHS — Accountability, Compliance, and Program Integrity for FY 2025.

DETAIL: Due to organizational changes within the HHS, appropriations from FY 2024 have been restructured. The new FY 2025 appropriation for Accountability, Compliance, and Program Integrity is comprised of moneys formerly appropriated to the following areas:

- Aging Programs
- Office of Long-Term Care Ombudsman

- Human Rights Administration
- Criminal and Juvenile Justice
- Single Grant Program
- General Administration
- Child Support Recoveries
- Community Capacity
- Resource Management

This restructured appropriation represents a net increase of \$93,902 compared to estimated FY 2024. The changes include:

- An increase of \$397,000 due to operations needs for Department-Wide Duties.
- An increase of \$858,606 due to Title IV-E penetration rate adjustments for General Administration.
- A decrease of \$1,161,704 due to the transfer of the Criminal and Juvenile Justice Planning Division to the Department of Management.

21 21 1. Of the funds appropriated in this section, \$200,000 shall
21 22 be transferred to and deposited in the Iowa ABLE savings plan
21 23 trust administrative fund created in section 12I.4, to be used
21 24 for implementation and administration activities of the Iowa
21 25 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 2024 transfer. This allocation was previously located under the appropriation for General Administration.

21 26 2. Of the funds appropriated in this section, \$2,602,312
21 27 shall be used for foster care review and the court appointed
21 28 special advocate program, including for salaries, support,
21 29 maintenance, and miscellaneous purposes.

Allocates \$2,602,312 for foster care review and the Court Appointed Special Advocate (CASA) Program.

DETAIL: This is no change compared to the estimated FY 2024 allocation. In prior years, this allocation was directed to the Child Advocacy Board. This allocation was previously located under the appropriation for General Administration. The State's Local Foster Care Review Boards and the CASA Program work to recruit, train, and support community volunteers through the State to represent the interests of abused and neglected children.

21 30 3. Of the funds appropriated in this section, \$1,148,959
21 31 shall be used for the office of long-term care ombudsman
21 32 for salaries, support, administration, maintenance, and
21 33 miscellaneous purposes.

Allocates \$1,148,959 to the Office of Long-Term Care Ombudsman.

DETAIL: This allocation is no change compared to estimated FY 2024.

21 34 4. For the fiscal year beginning July 1, 2024, and ending
 21 35 June 30, 2025, the department of health and human services
 22 1 may utilize the funds appropriated from the general fund of
 22 2 the state to the department under this Act for up to 4,156.00
 22 3 full-time equivalent positions. The department shall report to
 22 4 the general assembly by December 15, 2024, the distribution of
 22 5 the approved number of full-time equivalent positions across
 22 6 the organizational divisions of the department.

Allows the HHS to utilize General Fund moneys for up to 4,156.00 FTE positions. Requires the HHS to report to the General Assembly by December 15, 2024, the distribution of FTE positions across the organizational divisions of the HHS.

22 7 DIVISION X
 22 8 ANNUAL DEPARTMENTAL BUDGET REPORT

22 9 Sec. 21. ANNUAL BUDGET REPORT. The department of health and
 22 10 human services shall include in the annual budget submitted to
 22 11 the council on health and human services pursuant to section
 22 12 217.3 a detailed description of the programs and expenditures
 22 13 by budget unit reflective of the redesigned organizational
 22 14 divisions of the department.

Requires the HHS to include a detailed description of the programs and expenditures by budget unit reflective of the redesigned organizational divisions of the HHS in the annual budget submitted to the Council on Health and Human Services.

22 15 DIVISION XI
 22 16 MEDICAL ASSISTANCE HOME AND COMMUNITY-BASED SERVICES WAIVER
 22 17 FOR INDIVIDUALS WITH AN INTELLECTUAL DISABILITY — ADDITIONAL
 22 18 WAIVER SLOTS — FY 2025-2026

22 19 Sec. 22. MEDICAL ASSISTANCE — HOME AND COMMUNITY-BASED
 22 20 SERVICES WAIVER FOR INDIVIDUALS WITH AN INTELLECTUAL
 22 21 DISABILITY — ADDITIONAL WAIVER SLOTS — APPROPRIATION — FY
 22 22 2025-2026. There is appropriated from the general fund of
 22 23 the state to the department of health and human services for
 22 24 the fiscal year beginning July 1, 2025, and ending June 30,
 22 25 2026, the following amount, or so much thereof as is necessary,
 22 26 to be used for the medical assistance program to provide for
 22 27 additional home and community-based services waiver slots for
 22 28 individuals with an intellectual disability:
 22 29 \$ 1,950,000

General Fund appropriation to the HHS — Medical Assistance HCBS Waiver for Individuals with an Intellectual Disability for FY 2026.

DETAIL: This is a new appropriation for FY 2026.

22 30 DIVISION XII
 22 31 DEPARTMENT OF HEALTH AND HUMAN SERVICES TRANSFERS, CASHFLOW,
 22 32 AND NONREVERSIONS

22 33 Sec. 23. DEPARTMENT OF HEALTH AND HUMAN SERVICES TRANSFERS
 22 34 AND CASHFLOW.

<p>22 35 1. The department of health and human services may transfer 23 1 funds appropriated in this Act to support continuing alignment 23 2 efforts, to maximize federal support in accordance with the 23 3 department's federal costs allocation plan, and for resources 23 4 necessary to implement and administer the services for which 23 5 funds are provided. The department shall report any transfers 23 6 made pursuant to this subsection to the general assembly.</p>	<p>Permits the HHS to transfer funds allocated in this Bill for purposes of continuing alignment efforts, maximizing federal support, and the implementation and administration of services. Requires the HHS to report any transfers made pursuant to this subsection to the General Assembly.</p>
<p>23 7 2. If the savings to the appropriations made for the 23 8 Medicaid program from ongoing cost management efforts exceed 23 9 the associated costs for the fiscal year, the department may 23 10 transfer any savings generated for the fiscal year due to cost 23 11 management efforts to the appropriations made in this Act for 23 12 health program operations or for accountability, compliance, 23 13 and program integrity to defray the costs associated with 23 14 implementation of the cost management efforts.</p>	<p>Specifies that if savings to the Medicaid Program for cost management efforts during FY 2025 exceed costs, the HHS may transfer any savings to the appropriations in this Bill to Health Program Operations or to defray the costs associated with implementation of cost management efforts.</p>
<p>23 15 3. The department may transfer funds appropriated for 23 16 child protective services to pay the nonfederal share costs of 23 17 services reimbursed under the medical assistance program, state 23 18 child care assistance program, or the family investment program 23 19 which are provided to children who would otherwise receive 23 20 services paid under the appropriation for child protective 23 21 services.</p>	<p>Permits the HHS to transfer funds appropriated Child Protective Services to pay the nonfederal share of services reimbursed under Medicaid, the State CCA Program, or the FIP for children who would otherwise receive services paid under the appropriation for Child Protective Services.</p>
<p>23 22 4. The department may transfer funds from the temporary 23 23 assistance for needy families block grant to the federal social 23 24 services block grant appropriation, and to the child care and 23 25 development block grant appropriation, in accordance with 23 26 federal law.</p>	<p>Permits the HHS to transfer funds from the TANF Block Grant to the Federal Social Services Block Grant appropriation and the Child Care and Development Block Grant appropriation in accordance with federal law.</p>
<p>23 27 Sec. 24. DEPARTMENT OF HEALTH AND HUMAN SERVICES 23 28 NONREVERSIONS.</p>	
<p>23 29 1. Notwithstanding section 8.33, moneys appropriated from 23 30 the general fund of the state and the temporary assistance for 23 31 needy families block grant to the department of health and 23 32 human services for the fiscal year beginning July 1, 2024, 23 33 and ending June 30, 2025, for the purposes of the FaDSS grant 23 34 program that remain unencumbered or unobligated at the close of 23 35 the fiscal year shall not revert, but shall remain available 24 1 for expenditure for the purposes designated until the close of</p>	<p>CODE: Allows any unexpended funds appropriated for the FaDSS Grant Program for FY 2025 to remain available for FY 2026.</p>

24 2 the succeeding fiscal year.

24 3 2. Notwithstanding section 8.33, of the moneys appropriated
 24 4 from the general fund of the state, the quality assurance trust
 24 5 fund, and the hospital health care access trust fund to the
 24 6 department of health and human services for the fiscal year
 24 7 beginning July 1, 2024, and ending June 30, 2025, for the
 24 8 purposes of the medical assistance program, the amount that is
 24 9 in excess of actual expenditures for the medical assistance
 24 10 program that remains unencumbered or unobligated at the close
 24 11 of the fiscal year shall not revert, but shall remain available
 24 12 for expenditure for the medical assistance program until the
 24 13 close of the succeeding fiscal year.

CODE: Allows any unexpended funds appropriated from the General Fund, the Quality Assurance Trust Fund, and the Hospital Health Care Access Trust Fund to the HHS in FY 2025 for the Medicaid Program and the amount that is in excess of the actual expenditures for FY 2025 to remain available for FY 2026.

24 14 3. Notwithstanding section 8.33, and notwithstanding the
 24 15 nonreversion amount limitation specified in section 222.92,
 24 16 moneys appropriated from the general fund of the state to the
 24 17 department of health and human services for the fiscal year
 24 18 beginning July 1, 2024, and ending June 30, 2025, for the
 24 19 purposes of state specialty care that remain unencumbered or
 24 20 unobligated at the close of the fiscal year shall not revert,
 24 21 but shall remain available for expenditure for the purposes
 24 22 designated for subsequent fiscal years.

CODE: Allows any unexpended funds appropriated from the General Fund to the HHS for State Specialty Care for FY 2025 to remain available for subsequent fiscal years.

24 23 4. Notwithstanding section 8.33, moneys appropriated from
 24 24 the general fund of the state to the department of health and
 24 25 human services for the fiscal year beginning July 1, 2024,
 24 26 and ending June 30, 2025, for the commission on volunteer
 24 27 service for purposes of the Iowa state commission grant program
 24 28 that remain unencumbered or unobligated at the close of the
 24 29 fiscal year shall not revert, but shall remain available for
 24 30 expenditure for the purposes designated for subsequent fiscal
 24 31 years.

CODE: Allows any unexpended funds appropriated from the General Fund to the HHS for the Iowa State Commission Grant Program to remain available for subsequent fiscal years.

24 32 5. Notwithstanding section 8.33, moneys appropriated from
 24 33 the general fund of the state to the department of health and
 24 34 human services for the fiscal year beginning July 1, 2024,
 24 35 and ending June 30, 2025, and allocated for rural psychiatric
 25 1 residencies to annually fund eight psychiatric residents who
 25 2 will provide mental health services to underserved areas of the
 25 3 state that remain unencumbered or unobligated at the close of
 25 4 the fiscal year shall not revert, but shall remain available

CODE: Specifies that any funds appropriated from the General Fund to the HHS in FY 2025 for rural psychiatric residencies that remain at the end of FY 2025 are permitted to remain available for FY 2026.

25 5 for expenditure for the purposes designated until the close of
25 6 the succeeding fiscal year.

25 7 6. Notwithstanding section 8.33, moneys appropriated from
25 8 the general fund of the state to the department of health and
25 9 human services for the fiscal year beginning July 1, 2024, and
25 10 ending June 30, 2025, and allocated to provide audiological
25 11 services and hearing aids for children that remain unencumbered
25 12 or unobligated at the close of the fiscal year shall not
25 13 revert, but shall remain available for expenditure for the
25 14 purposes designated until the close of the succeeding fiscal
25 15 year.

CODE: Allows any unexpended funds appropriated from the General Fund to the HHS for audiological services and hearing aids for children to remain available for FY 2026.

25 16 7. Notwithstanding section 8.33, moneys appropriated from
25 17 the general fund of the state to the department of health and
25 18 human services for the fiscal year beginning July 1, 2024,
25 19 and ending June 30, 2025, and allocated for adoption subsidy
25 20 payments and related costs or for post-adoption services
25 21 and related allowable purposes that remain unencumbered or
25 22 unobligated at the close of the fiscal year shall not revert,
25 23 but shall remain available for expenditure for the purposes
25 24 designated until the close of the succeeding fiscal year.

CODE: Specifies that any funds appropriated from the General Fund to the HHS in FY 2025 for adoption subsidy payments or post-adoption services that remain at the end of FY 2025 are permitted to remain available for FY 2026.

25 25 8. Notwithstanding section 8.33, moneys appropriated from
25 26 the general fund of the state to the department of health and
25 27 human services for the fiscal year beginning July 1, 2024,
25 28 and ending June 30, 2025, and allocated to lower the required
25 29 ratio of supervisors to social workers as specified in this
25 30 Act, that remain unencumbered or unobligated at the close of
25 31 the fiscal year shall not revert but shall remain available for
25 32 expenditure for the purpose designated until the close of the
25 33 succeeding fiscal year.

CODE: Allows any funds appropriated from the General Fund to the HHS in FY 2025 to lower the required ratio of supervisors to social workers that remain at the end of FY 2025 are permitted to carry forward into FY 2026.

25 34 9. Notwithstanding section 8.33, moneys appropriated from
25 35 the general fund of the state to the department of health and
26 1 human services for the fiscal year beginning July 1, 2024, and
26 2 ending June 30, 2025, and allocated to increase the foster
26 3 care reimbursement rates paid pursuant to section 234.38 as
26 4 specified in this Act, that remain unencumbered or unobligated
26 5 at the close of the fiscal year shall not revert but shall
26 6 remain available for expenditure for the purpose designated
26 7 until the close of the succeeding fiscal year.

CODE: Allows any funds appropriated from the General Fund to the HHS in FY 2025 to increase foster care reimbursement rates that remain at the end of FY 2025 are permitted to carry forward into FY 2026.

26 8 DIVISION XIII
 26 9 HEALTH AND HUMAN SERVICES — PRIOR APPROPRIATIONS AND OTHER
 26 10 PROVISIONS — FY 2022-2023

26 11 RURAL PSYCHIATRIC RESIDENCIES

26 12 Sec. 25. 2022 Iowa Acts, chapter 1131, section 3, subsection
 26 13 4, paragraph j, is amended to read as follows:
 26 14 j. Of the funds appropriated in this subsection, \$800,000
 26 15 shall be used for rural psychiatric residencies to support the
 26 16 annual creation and training of ~~six~~ eight psychiatric residents
 26 17 who will provide mental health services in underserved areas of
 26 18 the state. Notwithstanding section 8.33, moneys that remain
 26 19 unencumbered or unobligated at the close of the fiscal year
 26 20 shall not revert but shall remain available for expenditure for
 26 21 the purposes designated for subsequent fiscal years.

CODE: Amends 2022 Iowa Acts, [HF 2578](#) (FY 2023 Health and Human Services Appropriations Act) to increase the number of rural psychiatric residencies from six to eight.

26 22 FAMILY INVESTMENT PROGRAM

26 23 Sec. 26. 2022 Iowa Acts, chapter 1131, section 9, subsection
 26 24 7, as enacted by 2023 Iowa Acts, chapter 112, section 41, is
 26 25 amended to read as follows:
 26 26 7. Notwithstanding section 8.33, moneys appropriated in
 26 27 this section that remain unencumbered or unobligated at the
 26 28 close of the fiscal year shall not revert but shall remain
 26 29 available for the purposes designated, or may be transferred to
 26 30 other appropriations in this division of this Act or used as
 26 31 necessary to enhance agency accountability, program integrity,
 26 32 compliance, and efficiency, until the close of the succeeding
 26 33 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 be transferred to other appropriations in the FIP or to enhance agency accountability, program integrity, compliance, and efficiency until the close of FY 2024.

26 34 Sec. 27. EFFECTIVE DATE. This division of this Act, being
 26 35 deemed of immediate importance, takes effect upon enactment.

Specifies that Division XIII of the Bill is effective upon enactment.

27 1 Sec. 28. RETROACTIVE APPLICABILITY. This division of this
 27 2 Act applies retroactively to July 1, 2022.

Specifies that Division XIII of the Bill applies retroactively to July 1, 2022.

27 3 DIVISION XIV
 27 4 HEALTH AND HUMAN SERVICES — PRIOR APPROPRIATIONS AND OTHER
 27 5 PROVISIONS — FY 2023-2024

27 6 OFFICE OF PUBLIC GUARDIAN

27 7 Sec. 29. 2023 Iowa Acts, chapter 112, section 3, is amended
 27 8 by adding the following new subsection:
 27 9 NEW SUBSECTION 7. Notwithstanding section 8.33,
 27 10 moneys appropriated in this section for the state office of
 27 11 public guardian established under chapter 231E that remain
 27 12 unencumbered or unobligated at the close of the fiscal year
 27 13 shall not revert but shall remain available for the purposes
 27 14 designated until the close of the succeeding fiscal year.

CODE: Allows any unexpended funds appropriated in 2023 Iowa Acts, [Senate File 561](#) (FY 2024 Health and Human Services Appropriations Act), for FY 2024 from the General Fund for the State Office of Public Guardian to remain available for expenditure in FY 2025.

27 15 AUDIOLOGICAL SERVICES

27 16 Sec. 30. 2023 Iowa Acts, chapter 112, section 5, subsection
 27 17 2, paragraph e, is amended to read as follows:
 27 18 e. Of the funds appropriated in this subsection, \$156,000
 27 19 shall be used to provide audiological services and hearing aids
 27 20 for children. Notwithstanding section 8.33, moneys allocated
 27 21 in this paragraph that remain unencumbered or unobligated at
 27 22 the close of the fiscal year shall not revert but shall remain
 27 23 available for the purposes designated until the close of the
 27 24 succeeding fiscal year.

CODE: Allows any unexpended funds appropriated in 2023 Iowa Acts, Senate File 561 for FY 2024 from the General Fund for audiological services and hearing aids for children to remain available for expenditure until the close of FY 2025.

27 25 RURAL PSYCHIATRIC RESIDENCIES

27 26 Sec. 31. 2023 Iowa Acts, chapter 112, section 5, subsection
 27 27 4, paragraph j, is amended to read as follows:
 27 28 j. Of the funds appropriated in this subsection, \$800,000
 27 29 shall be used for rural psychiatric residencies to annually
 27 30 fund ~~six~~ eight psychiatric residents who will provide
 27 31 mental health services in underserved areas of the state.
 27 32 Notwithstanding section 8.33, moneys that remain unencumbered
 27 33 or unobligated at the close of the fiscal year shall not revert
 27 34 but shall remain available for expenditure for the purposes
 27 35 designated for subsequent fiscal years.

CODE: Amends 2023 Iowa Acts, Senate File 561 to increase the number of rural psychiatric residencies from six to eight.

28 1 FAMILY INVESTMENT PROGRAM

28 2 Sec. 32. 2023 Iowa Acts, chapter 112, section 9, is amended
 28 3 by adding the following new subsection:
 28 4 NEW SUBSECTION 7. Notwithstanding section 8.33, moneys
 28 5 appropriated in this section that remain unencumbered or

CODE: Allows any unexpended funds appropriated in 2023 Iowa Acts, Senate File 561 for FY 2024 from the General Fund for the FIP to remain available or to be transferred to other appropriations in the Division or to enhance agency accountability, program integrity, compliance, and efficiency until the close of FY 2025.

28 6 unobligated at the close of the fiscal year shall not revert
 28 7 but shall remain available for the purposes designated, or may
 28 8 be transferred to other appropriations in this division of this
 28 9 Act or used as necessary to enhance agency accountability,
 28 10 program integrity, compliance, and efficiency, until the close
 28 11 of the succeeding fiscal year.

28 12 CHILD CARE ASSISTANCE

28 13 Sec. 33. 2023 Iowa Acts, chapter 112, section 17, subsection
 28 14 8, is amended to read as follows:

28 15 8. Notwithstanding section 8.33, moneys ~~advanced for~~
 28 16 ~~purposes of the programs developed by early childhood Iowa~~
 28 17 ~~areas, advanced for purposes of wraparound child care, or~~
 28 18 ~~received from the federal appropriations made for the purposes~~
 28 19 ~~of appropriated in this section that remain unencumbered or~~
 28 20 unobligated at the close of the fiscal year shall not revert
 28 21 to any fund but shall remain available for expenditure for the
 28 22 purposes designated until the close of the succeeding fiscal
 28 23 year.

CODE: Allows any unexpended funds appropriated in 2023 Iowa Acts, Senate File 561 for FY 2024 from the General Fund for CCA to remain available for expenditure until the close of FY 2025.

28 24 CHILD AND FAMILY SERVICES

28 25 Sec. 34. 2023 Iowa Acts, chapter 112, section 19, is amended
 28 26 by adding the following new subsection:

28 27 NEW SUBSECTION 23. Notwithstanding section 8.33, moneys
 28 28 appropriated in this section that remain unencumbered or
 28 29 unobligated at the close of the fiscal year shall not revert
 28 30 but shall remain available for the purposes designated until
 28 31 the close of the succeeding fiscal year.

CODE: Allows any unexpended funds appropriated in 2023 Iowa Acts, Senate File 561 for FY 2024 from the General Fund for Child and Family Services to remain available for expenditure until the close of FY 2025.

28 32 FIELD OPERATIONS

28 33 Sec. 35. 2023 Iowa Acts, chapter 112, section 26, is amended
 28 34 by adding the following new subsection:

28 35 NEW SUBSECTION 4. Notwithstanding section 8.33, moneys
 29 1 appropriated in this section that remain unencumbered or
 29 2 unobligated at the close of the fiscal year shall not revert
 29 3 but shall remain available for the purposes designated until
 29 4 the close of the succeeding fiscal year.

CODE: Allows any unexpended funds appropriated in 2023 Iowa Acts, Senate File 561 for FY 2024 from the General Fund for Field Operations to remain available for expenditure until the close of FY 2025.

29 5 GENERAL ADMINISTRATION — MORE OPTIONS FOR MATERNAL SUPPORT

PG LN	GA:90 HF2698	Explanation
29 6	PROGRAM	
29 7	Sec. 36. 2023 Iowa Acts, chapter 112, section 27, subsection	CODE: Allows any unexpended funds appropriated in 2023 Iowa Acts,
29 8	8, is amended to read as follows:	Senate File 561 for FY 2024 from the General Fund for the MOMS
29 9	8. Of the funds appropriated under this section, \$1,000,000	Program to remain available for expenditure until the close of FY 2025.
29 10	shall be used for the purposes of program administration and	
29 11	provision of pregnancy support services through the more	
29 12	options for maternal support program in accordance with section	
29 13	217.41C. <u>Notwithstanding section 8.33, moneys allocated in</u>	
29 14	<u>this subsection that remain unencumbered or unobligated at the</u>	
29 15	<u>close of the fiscal year shall not revert but shall remain</u>	
29 16	<u>available for the purposes designated until the close of the</u>	
29 17	<u>succeeding fiscal year.</u>	
29 18	LOW-INCOME HOME ENERGY ASSISTANCE PROGRAM ADMINISTRATIVE	
29 19	ALLOCATION — FEDERAL BLOCK GRANT	
29 20	Sec. 37. 2023 Iowa Acts, chapter 161, section 10, subsection	CODE: Amends 2023 Iowa Acts, House File 709 (Federal Block Grant
29 21	3, is amended to read as follows:	Appropriations Act) to specify that no less than 8.40% of remaining
29 22	3. After subtracting the allocation in subsection 2, up to	moneys for each fiscal year will be allocated for administrative
29 23	to <u>no less than 8.4 percent of the remaining moneys for each</u>	expenses of Low-Income Home Energy Assistance Program (LiHEAP)
29 24	<u>federal fiscal year are allocated for administrative expenses</u>	contractors and no more than 1.60% will be allocated to the HHS for
29 25	<u>of low-income home energy assistance program contractors and</u>	administrative expenses related to LiHEAP.
29 26	<u>up to 1.6 percent of the remaining moneys for each fiscal year</u>	
29 27	<u>are allocated for the administrative expenses of the department</u>	
29 28	<u>of health and human services under the low-income home energy</u>	
29 29	<u>assistance program of which \$377,000 is allocated each federal</u>	
29 30	<u>fiscal year for administrative expenses of the department of</u>	
29 31	<u>health and human services. The costs of auditing the use and</u>	
29 32	<u>administration of the portion of the appropriation in this</u>	
29 33	<u>section that is retained by the state shall be paid from the</u>	
29 34	<u>amount allocated in this subsection each federal fiscal year to</u>	
29 35	<u>the department of health and human services. The auditor of</u>	
30 1	<u>state shall bill the department of health and human services</u>	
30 2	<u>for the audit costs.</u>	
30 3	Sec. 38. EFFECTIVE DATE. This division of this Act, being	Specifies that Division XIV of the Bill is effective upon enactment.
30 4	deemed of immediate importance, takes effect upon enactment.	
30 5	Sec. 39. RETROACTIVE APPLICABILITY. This division of this	Specifies that Division XIV of the Bill applies retroactively to July 1,
30 6	Act applies retroactively to July 1, 2023.	2023.

30 7 DIVISION XV
30 8 REPORT ON NONREVERSION OF FUNDS

30 9 Sec. 40. REPORT ON NONREVERSION OF FUNDS. The department
30 10 of health and human services shall report the expenditure of
30 11 any moneys for which nonreversion authorization was provided
30 12 for the fiscal year beginning July 1, 2023, and ending June 30,
30 13 2024, to the general assembly on a quarterly basis beginning
30 14 October 1, 2024.

Requires the HHS to report the expenditure of any moneys for which nonreversion authorization was provided for FY 2024 to the General Assembly on a quarterly basis beginning October 1, 2024.

30 15 DIVISION XVI
30 16 EMERGENCY RULES AND REPORTS

30 17 Sec. 41. EMERGENCY RULES.
30 18 1. If necessary to comply with federal requirements
30 19 including time frames, or if specifically authorized by a
30 20 provision of this Act, the department of health and human
30 21 services or the mental health and disability services
30 22 commission shall adopt administrative rules under section
30 23 17A.4, subsection 3, and section 17A.5, subsection 2, paragraph
30 24 “b”, to implement the applicable provisions of this Act. The
30 25 rules shall be effective immediately upon filing unless a
30 26 later date is specified in the rules. Any rules adopted in
30 27 accordance with this section shall also be published as a
30 28 notice of intended action as provided in section 17A.4.

Requires the HHS or the Mental Health and Disability Services (MHDS) Commission to adopt emergency administrative rules to comply with federal requirements or to implement the Bill. The rules are required to be 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). The rules shall not take effect before being reviewed by the ARRC.

30 29 2. If during a fiscal year, the department of health and
30 30 human services is adopting rules in accordance with this
30 31 section or as otherwise directed or authorized by state
30 32 law, and the rules will result in an expenditure increase
30 33 beyond the amount anticipated in the budget process or if the
30 34 expenditure was not addressed in the budget process for the
30 35 fiscal year, the department shall notify the general assembly
31 1 and the department of management concerning the rules and the
31 2 expenditure increase. The notification shall be provided at
31 3 least thirty calendar days prior to the date notice of the
31 4 rules is submitted to the administrative rules coordinator and
31 5 the administrative code editor.

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

31 6 Sec. 42. REPORTS. Unless otherwise provided, any reports or
31 7 other information required to be compiled and submitted under
31 8 this Act during the fiscal year beginning July 1, 2024, shall

Requires any reports or information required to be submitted under the Bill for FY 2025 to be submitted on or before the dates specified for submission.

31 9 be submitted on or before the date specified for submission of
31 10 the reports or information.

31 11 DIVISION XVII
31 12 CODIFIED PROVISIONS

31 13 SUBSTANCE USE DISORDER — BEER AND LIQUOR CONTROL FUND

31 14 Sec. 43. Section 123.17, subsection 5, Code 2024, is amended
31 15 to read as follows:

31 16 5. After any transfer provided for in subsection 3 is
31 17 made, the department shall transfer into a special revenue
31 18 account in the general fund of the state, a sum of money at
31 19 least equal to seven percent of the gross amount of sales made
31 20 by the department from the beer and liquor control fund on a
31 21 monthly basis but not less than nine million dollars annually.
31 22 ~~Of the amounts transferred, two million dollars, plus an~~
31 23 ~~additional amount determined by the general assembly,~~ shall be
31 24 appropriated to the department of health and human services for
31 25 use by the staff who administer the comprehensive substance use
31 26 disorder program under chapter 125 for substance use disorder
31 27 treatment and prevention programs. Any amounts received in
31 28 excess of the amounts appropriated to the department of health
31 29 and human services for use by the staff who administer the
31 30 comprehensive substance use disorder program under chapter 125
31 31 shall be considered part of the general fund balance.

CODE: Removes an additional amount determined by the General Assembly from the allocated transfer from the Beer and Liquor Control Fund to the HHS for substance use disorder treatment and prevention programs.

31 32 TOBACCO USE PREVENTION AND CONTROL

31 33 Sec. 44. Section 142A.5, Code 2024, is amended by adding the
31 34 following new subsection:

31 35 NEW SUBSECTION 9. Collaborate with the department of
32 1 revenue for enforcement of tobacco laws, regulations, and
32 2 ordinances and to engage in tobacco control activities approved
32 3 by the departments.

CODE: Requires the HHS and the Department of Revenue to collaborate for enforcement of tobacco laws and to engage in tobacco control activities.

32 4 AREA AGENCIES ON AGING

32 5 Sec. 45. NEW SECTION 231.35 PROCEDURES RELATED TO
32 6 EXPENDITURE OF STATE AND FEDERAL FUNDS.

32 7 1. The department shall establish and enforce procedures
32 8 relating to expenditure of state and federal funds by area

CODE: Requires the HHS to establish and enforce policies relating to the expenditure of State and federal funds by AAAs that require State and federal compliance.

32 9 agencies on aging that require compliance with both state and
 32 10 federal laws, rules, and regulations, including but not limited
 32 11 to all of the following:

- 32 12 a. Requiring that expenditures are incurred only for goods
 32 13 or services received or performed prior to the end of the
 32 14 fiscal period designated for use of the funds.
- 32 15 b. Prohibiting prepayment for goods or services not received
 32 16 or performed prior to the end of the fiscal period designated
 32 17 for use of the funds.
- 32 18 c. Prohibiting prepayment for goods or services not defined
 32 19 specifically by good or service, time period, or recipient.
- 32 20 d. Prohibiting the establishment of accounts from which
 32 21 future goods or services which are not defined specifically by
 32 22 good or service, time period, or recipient, may be purchased.

32 23 2. The procedures shall provide that if any funds are
 32 24 expended in a manner that is not in compliance with the
 32 25 procedures and applicable federal and state laws, rules, and
 32 26 regulations, and are subsequently subject to repayment, the
 32 27 area agency on aging expending such funds in contravention of
 32 28 such procedures, laws, rules and regulations, not the state,
 32 29 shall be liable for such repayment.

32 30 PERSONAL NEEDS ALLOWANCE FOR FACILITIES UNDER MEDICAID

32 31 Sec. 46. Section 249A.30A, Code 2024, is amended to read as
 32 32 follows:

32 33 249A.30A MEDICAL ASSISTANCE — PERSONAL NEEDS ALLOWANCE.

32 34 1. The personal needs allowance under the medical
 32 35 assistance program, which may be retained by a person who is a
 33 1 resident of a nursing facility, an intermediate care facility
 33 2 for persons with an intellectual disability, or an intermediate
 33 3 care facility for persons with mental illness, as defined in
 33 4 section 135C.1, or a person who is a resident of a psychiatric
 33 5 medical institution for children as defined in section 135H.1,
 33 6 shall be fifty dollars per month.

33 7 2. A resident who has income of less than fifty dollars
 33 8 per month shall receive a supplement from the state in the
 33 9 amount necessary to receive a personal needs allowance of fifty
 33 10 dollars per month; ~~if funding is specifically appropriated for~~
 33 11 ~~this purpose.~~ The general assembly shall annually appropriate
 33 12 a sufficient amount from the general fund of the state to the
 33 13 department of health and human services for this purpose.

CODE: Requires the General Assembly to appropriate a sufficient amount of funds from the General Fund to the HHS to ensure that recipients of Medicaid living in care facilities in Iowa have access to the full amount of their Personal Needs Allowance.

33 14 REPLACEMENT GENERATION TAX REVENUES

33 15 Sec. 47. Section 437A.8, subsection 4, paragraph d, Code
 33 16 2024, is amended to read as follows:

33 17 d. Notwithstanding paragraph “a”, a taxpayer who owns
 33 18 or leases a new electric power generating plant and who has
 33 19 no other operating property in the state of Iowa except for
 33 20 operating property directly serving the new electric power
 33 21 generating plant as described in section 437A.16 shall pay
 33 22 the replacement generation tax associated with the allocation
 33 23 of the local amount to the county treasurer of the county in
 33 24 which the local amount is located and shall remit the remaining
 33 25 replacement generation tax, if any, to the director according
 33 26 to paragraph “a” for remittance of the tax to county treasurers.
 33 27 The director shall notify each taxpayer on or before August 31
 33 28 following a tax year of its remaining replacement generation
 33 29 tax to be remitted to the director. All remaining replacement
 33 30 generation tax revenues received by the director shall be
 33 31 ~~deposited in the property tax relief fund created in section~~
 33 32 ~~426B.1, and shall be distributed as provided in section 426B.2~~
 33 33 appropriated annually to the department of health and human
 33 34 services to supplement any appropriation made for medical
 33 35 assistance.

34 1 If a taxpayer has paid an amount of replacement tax,
 34 2 penalty, or interest which was ~~deposited into the property~~
 34 3 ~~tax relief fund appropriated to the department of health and~~
 34 4 ~~human services under this paragraph and which was not due, all~~
 34 5 ~~of the provisions of section 437A.14, subsection 1, paragraph~~
 34 6 ~~“b”, shall apply with regard to any claim for refund or credit~~
 34 7 ~~filed by the taxpayer. The director shall have sole discretion~~
 34 8 ~~as to whether the erroneous payment will be refunded to the~~
 34 9 ~~taxpayer or credited against any replacement tax due, or to~~
 34 10 ~~become due, from the taxpayer that would be subject to deposit~~
 34 11 ~~in the property tax relief fund appropriated to the department~~
 34 12 ~~of health and human services under this paragraph.~~

34 13 Sec. 48. Section 437A.15, subsection 3, paragraph f, Code
 34 14 2024, is amended to read as follows:

34 15 f. Notwithstanding the provisions of this section, if
 34 16 a taxpayer is a municipal utility or a municipal owner of
 34 17 an electric power facility financed under the provisions

CODE: Appropriates remaining revenues from the Replacement
 Generation Tax to the HHS to supplement Medicaid appropriations.
 Funding is currently deposited in the Property Tax Relief Fund. In FY
 2022, the Property Tax Relief Fund had a carryforward of \$12,954.

CODE: Appropriates all remaining Replacement Generation Tax
 revenues, following the allocations provided in Iowa Code section
[437A.15](#)(3)(f), to the HHS to supplement Medicaid appropriations.

34 18 of chapter 28F or 476A, the assessed value, other than the
 34 19 local amount, of a new electric power generating plant shall
 34 20 be allocated to each taxing district in which the municipal
 34 21 utility or municipal owner is serving customers and has
 34 22 electric meters in operation in the ratio that the number of
 34 23 operating electric meters of the municipal utility or municipal
 34 24 owner located in the taxing district bears to the total number
 34 25 of operating electric meters of the municipal utility or
 34 26 municipal owner in the state as of January 1 of the tax year.
 34 27 If the municipal utility or municipal owner of an electric
 34 28 power facility financed under the provisions of chapter 28F
 34 29 or 476A has a new electric power generating plant but the
 34 30 municipal utility or municipal owner has no operating electric
 34 31 meters in this state, the municipal utility or municipal owner
 34 32 shall pay the replacement generation tax associated with the
 34 33 new electric power generating plant allocation of the local
 34 34 amount to the county treasurer of the county in which the local
 34 35 amount is located and shall remit the remaining replacement
 35 1 generation tax, if any, to the director at the times contained
 35 2 in section 437A.8, subsection 4, for remittance of the tax to
 35 3 the county treasurers. All remaining replacement generation
 35 4 tax revenues received by the director shall be deposited in
 35 5 the property tax relief fund created in section 426B.1, and
 35 6 shall be distributed as provided in section 426B.2 appropriated
 35 7 annually to the department of health and human services to
 35 8 supplement any appropriation made for medical assistance.

35 9 PERSONAL NEEDS ALLOWANCE FOR STATE SUPPLEMENTARY ASSISTANCE

35 10 Sec. 49.NEW SECTION 249.9A PERSONAL NEEDS ALLOWANCE.

35 11 1. The department shall increase the personal needs
 35 12 allowance for residents of residential care facilities by the
 35 13 same percentage and at the same time as federal supplemental
 35 14 security income and federal social security benefits are
 35 15 increased due to a recognized increase in the cost of living.

35 16 2. If during a fiscal year, the department projects that
 35 17 state supplementary assistance expenditures for a calendar year
 35 18 will not meet the federal pass-through requirement specified
 35 19 in Tit.XVI of the federal Social Security Act, section 1618,
 35 20 as codified in 42 U.S.C. §1382g, the department may take
 35 21 actions including but not limited to increasing the personal

CODE: Requires the HHS to increase the Personal Needs Allowance for SSA by the same percentage and at the same time as federal Supplemental Security Income and Social Security Benefits.

Permits the HHS to take actions to ensure federal requirements are met if the HHS projects that SSA expenditures for a calendar year will not meet federal pass-through requirements.

35 22 needs allowance for residential care facility residents
 35 23 and making programmatic adjustments or upward adjustments
 35 24 of the residential care facility or in-home health-related
 35 25 care reimbursement rates to ensure compliance with federal
 35 26 requirements. In addition, the department may make other
 35 27 programmatic and rate adjustments necessary to remain within
 35 28 the funds appropriated for a fiscal year while ensuring
 35 29 compliance with federal requirements.

35 30 3. The department may adopt emergency rules under section
 35 31 17A.4, subsection 3, and section 17A.5, subsection 2, paragraph
 35 32 “b”, to implement the provisions of this section and the rules
 35 33 shall be effective immediately upon filing unless a later date
 35 34 is specified in the rules. Any rules adopted in accordance
 35 35 with this section shall also be published as a notice of
 36 1 intended action as provided in section 17A.4.

Permits the HHS to adopt emergency administrative rules to implement the provisions of the Bill, and requires any rules adopted to be published as a Notice of Intended Action as provided in Iowa Code sections [17A.4](#) and [17A.5](#).

36 2 MEDICAID FRAUD FUND AND HEALTH CARE TRUST FUND

36 3 Sec. 50. Section 249A.50, subsection 3, Code 2024, is
 36 4 amended to read as follows:

36 5 3. a. A Medicaid fraud fund is created in the state
 36 6 treasury under the authority of the department of inspections,
 36 7 appeals, and licensing. Moneys from penalties, investigative
 36 8 costs recouped by the Medicaid fraud control unit, and other
 36 9 amounts received as a result of prosecutions involving
 36 10 the department of inspections, appeals, and licensing
 36 11 investigations and audits to ensure compliance with the medical
 36 12 assistance program that are not credited to the program shall
 36 13 be credited to the fund.

36 14 b. Notwithstanding section 8.33, moneys credited to the
 36 15 fund from any other account or fund shall not revert to the
 36 16 other account or fund. Moneys in the fund shall only be used as
 36 17 provided in appropriations from the fund and shall be used in
 36 18 accordance with applicable laws, regulations, and the policies
 36 19 of the office of inspector general of the United States
 36 20 department of health and human services.

36 21 c. Any funds remaining in the Medicaid fraud fund at the
 36 22 close of a fiscal year are appropriated to the department of
 36 23 health and human services to supplement any medical assistance
 36 24 program appropriation for the same fiscal year to be used
 36 25 for medical assistance reimbursement and associated costs,

CODE: Appropriates any remaining funds in the Medicaid Fraud Fund at the close of a fiscal year to the HHS to supplement the Medicaid Program. Prior to this, the remaining funds remained in the Medicaid Fraud Fund.

DETAIL: It is estimated that there will be \$150,000 available in FY 2025. This is no change compared to the FY 2024 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.

36 26 including program administration and costs associated with
 36 27 program implementation.
 36 28 c. d. For the purposes of this subsection, “investigative
 36 29 costs” means the reasonable value of a Medicaid fraud control
 36 30 unit investigator’s, auditor’s or employee’s time, any moneys
 36 31 expended by the Medicaid fraud control unit, and the reasonable
 36 32 fair market value of resources used or expended by the Medicaid
 36 33 fraud control unit in a case resulting in a criminal conviction
 36 34 of a provider under this chapter or chapter 714 or 715A.

36 35 Sec. 51. Section 453A.35A, Code 2024, is amended to read as
 37 1 follows:
 37 2 453A.35A HEALTH CARE TRUST FUND — APPROPRIATION TO MEDICAID
 37 3 PROGRAM .
 37 4 1. A health care trust fund is created in the office of
 37 5 the treasurer of state. The fund consists of the revenues
 37 6 generated from the tax on cigarettes pursuant to section
 37 7 453A.6, subsection 1, and from the tax on tobacco products
 37 8 as specified in section 453A.43, subsections 1, 2, 3, and 4,
 37 9 that are credited to the health care trust fund, annually,
 37 10 pursuant to section 453A.35. Moneys in the fund shall be
 37 11 separate from the general fund of the state and shall not be
 37 12 considered part of the general fund of the state. However, the
 37 13 fund shall be considered a special account for the purposes
 37 14 of section 8.53 relating to generally accepted accounting
 37 15 principles. Moneys in the fund shall be used only as specified
 37 16 in this section and shall be appropriated only for the uses
 37 17 specified. Moneys in the fund are not subject to section 8.33
 37 18 and shall not be transferred, used, obligated, appropriated,
 37 19 or otherwise encumbered, except as provided in this section.
 37 20 Notwithstanding section 12C.7, subsection 2, interest or
 37 21 earnings on moneys deposited in the fund shall be credited to
 37 22 the fund.
 37 23 2. Moneys in the fund shall be used only for purposes
 37 24 related to health care, substance use disorder treatment and
 37 25 prevention, and tobacco use prevention, cessation, and control.
 37 26 3. Any funds remaining in the health care trust fund at the
 37 27 close of a fiscal year are appropriated to the department of
 37 28 health and human services to supplement any medical assistance
 37 29 program appropriation for the same fiscal year to be used
 37 30 for medical assistance reimbursement and associated costs,
 37 31 including program administration and costs associated with

CODE: Appropriates any remaining funds in the Health Care Trust Fund at the close of a fiscal year to the HHS to supplement the Medicaid program to be used for Medicaid reimbursement and associated costs.

37 32 program implementation.

37 33 MENTAL HEALTH INSTITUTES — RETAINING OF REVENUE

37 34 Sec. 52.NEW SECTION 218.97 RETAINING OF REVENUE BY MENTAL
37 35 HEALTH INSTITUTES.

CODE: Allows any revenue received by a State MHI to be retained and expended by the MHI.

38 1 Notwithstanding sections 218.78 and 249A.11, any revenue
38 2 received from the state mental health institute at Cherokee or
38 3 the state mental health institute at Independence pursuant to
38 4 42 C.F.R. §438.6(e) may be retained and expended by the mental
38 5 health institute.

38 6 RESIDENTS OF MENTAL HEALTH INSTITUTES — RETAINING MEDICAID
38 7 ELIGIBILITY

38 8 Sec. 53.NEW SECTION 249A.38A RESIDENTS OF MENTAL HEALTH
38 9 INSTITUTES — RETAINING OF MEDICAID ELIGIBILITY.

CODE: Permits Medicaid recipients residing in a State MHI to retain their Medicaid eligibility during their stay at the MHI.

38 10 Notwithstanding any provision of law to the contrary,
38 11 a Medicaid recipient residing at the state mental health
38 12 institute at Cherokee or the state mental health institute
38 13 at Independence shall retain Medicaid eligibility during the
38 14 period of the Medicaid recipient's stay for which federal
38 15 financial participation is available.

38 16 STATE RESOURCE CENTERS — SCOPE OF SERVICES

38 17 Sec. 54.NEW SECTION 218.97A STATE RESOURCE CENTERS —
38 18 SCOPE OF SERVICES APPROACH — TIME-LIMITED ASSESSMENT AND
38 19 SERVICES.

CODE: Permits the HHS to bill for State Resource Center services utilizing a scope of services approach in a manner that does not shift costs between the Medicaid program, the MHDS regions, or other State Resource Center funding sources.

38 20 1. The department may continue to bill for state resource
38 21 center services utilizing a scope of services approach used for
38 22 private providers of intermediate care facilities for persons
38 23 with an intellectual disability services, in a manner which
38 24 does not shift costs between the medical assistance program,
38 25 mental health and disability services regions, or other sources
38 26 of funding for the state resource centers.

38 27 2. The state resource centers may expand the time-limited
38 28 assessment and respite services during a fiscal year.

38 29 JUVENILE DETENTION HOME FUND — APPROPRIATION

38 30 Sec. 55. Section 232.142, Code 2024, is amended to read as

CODE: Appropriates moneys deposited in the Juvenile Detention

38 31 follows:
 38 32 232.142 MAINTENANCE AND COST OF JUVENILE HOMES — FUND —
 38 33 APPROPRIATION OF MONEYS IN FUND .
 38 34 1. County boards of supervisors which singly or in
 38 35 conjunction with one or more other counties provide and
 39 1 maintain juvenile detention and juvenile shelter care homes are
 39 2 subject to this section.
 39 3 2. For the purpose of providing and maintaining a county
 39 4 or multicounty home, the board of supervisors of any county
 39 5 may issue general county purpose bonds in accordance with
 39 6 sections 331.441 through 331.449. Expenses for providing and
 39 7 maintaining a multicounty home shall be paid by the counties
 39 8 participating in a manner to be determined by the boards of
 39 9 supervisors.
 39 10 3. A county or multicounty juvenile detention home approved
 39 11 pursuant to this section shall receive financial aid from the
 39 12 state in a manner approved by the director. Aid paid by the
 39 13 state shall be at least ten percent and not more than fifty
 39 14 percent of the total cost of the establishment, improvements,
 39 15 operation, and maintenance of the home.
 39 16 4. The director shall adopt minimal rules and standards for
 39 17 the establishment, maintenance, and operation of such homes as
 39 18 shall be necessary to effect the purposes of this chapter. The
 39 19 rules shall apply the requirements of section 237.8, concerning
 39 20 employment and evaluation of persons with direct responsibility
 39 21 for a child or with access to a child when the child is
 39 22 alone and persons residing in a child foster care facility,
 39 23 to persons employed by, residing in, or volunteering for a
 39 24 home approved under this section. The director shall, upon
 39 25 request, give guidance and consultation in the establishment
 39 26 and administration of the homes and programs for the homes.
 39 27 5. The director shall approve annually all such homes
 39 28 established and maintained under the provisions of this
 39 29 chapter. A home shall not be approved unless it complies with
 39 30 minimal rules and standards adopted by the director and has
 39 31 been inspected by the department of inspections, appeals, and
 39 32 licensing. The statewide number of beds in the homes approved
 39 33 by the director shall not exceed two hundred seventy-two beds
 39 34 beginning July 1, 2017.
 39 35 6. a. A juvenile detention home fund is created in the
 40 1 state treasury under the authority of the department. The

Home Fund to the HHS for distribution.

DETAIL: The amount of distribution will be equal to a percentage of the costs associated with county and multicounty juvenile detention homes in the prior fiscal year. Moneys appropriated for distribution will be allocated among eligible detention homes.

40 2 fund shall consist of moneys deposited in the fund pursuant to
 40 3 section 602.8108. The moneys in the fund shall be used for
 40 4 the costs of the establishment, improvement, operation, and
 40 5 maintenance of county or multicounty juvenile detention homes
 40 6 in accordance with ~~annual appropriations made by the general~~
 40 7 ~~assembly from the fund for these purposes~~ this subsection.
 40 8 b. (1) Moneys deposited in the juvenile detention home
 40 9 fund during a fiscal year are appropriated to the department
 40 10 for the same fiscal year for distribution of an amount equal to
 40 11 a percentage of the costs of the establishment, improvement,
 40 12 operation, and maintenance of county or multicounty juvenile
 40 13 detention homes in the prior fiscal year. Such percentage
 40 14 shall be determined by the department based on the amount
 40 15 available for distribution from the fund.
 40 16 (2) Moneys appropriated for distribution in accordance with
 40 17 this subsection shall be allocated among eligible detention
 40 18 homes, prorated on the basis of an eligible detention home's
 40 19 proportion of the costs of all eligible detention homes in the
 40 20 prior fiscal year.

40 21 FAMILY INVESTMENT PROGRAM ACCOUNT ELIMINATION
 40 22 Sec. 56. Section 239B.11, Code 2024, is amended to read as
 40 23 follows:

40 24 239B.11 FAMILY INVESTMENT PROGRAM ~~ACCOUNT~~ ~~—~~ ~~DIVERSION~~
 40 25 ~~PROGRAM SUBACCOUNT~~ ~~—~~ ~~DIVERSION PROGRAM.~~
 40 26 ~~1. An account is established in the state treasury to~~
 40 27 ~~be known as the family investment program account under~~
 40 28 ~~control of the department to which shall be credited all funds~~
 40 29 ~~appropriated by the state for the payment of assistance and~~
 40 30 ~~JOBS program expenditures. All other moneys received at any~~
 40 31 ~~time for these purposes, including child support revenues,~~
 40 32 ~~shall be deposited into the account as provided by law. All~~
 40 33 ~~assistance and JOBS program expenditures under this chapter~~
 40 34 ~~shall be paid from the account.~~
 40 35 ~~2. a. A diversion program subaccount is created within~~
 41 1 ~~the family investment program account. The subaccount may be~~
 41 2 ~~used to provide incentives to divert a family's participation~~
 41 3 ~~in the family investment program if the family meets the~~
 41 4 ~~department's income eligibility requirements for the diversion~~
 41 5 ~~program. Incentives may be provided in the form of payment or~~
 41 6 ~~services to help a family to obtain or retain employment. The~~

Creates a diversion program under the FIP to provide incentives to divert a family's participation in or transition from the FIP by helping a participant obtain or retain employment. The HHS is required to adopt income eligibility requirements and additional eligibility criteria. Mention of the FIP Account and Diversion Program Subaccount under the FIP Account is removed.

41 7 diversion program subaccount may also be used for payments to
 41 8 participants as necessary to cover the expenses of removing
 41 9 barriers to employment and to assist in stabilizing employment.
 41 10 In addition, the diversion program subaccount may be used for
 41 11 funding of services and payments for persons whose family
 41 12 investment program eligibility has ended, in order to help the
 41 13 persons to stabilize or improve their employment status.
 41 14 ~~b.~~ A diversion program is created under the family
 41 15 investment program. The program shall provide incentives
 41 16 to divert a family's participation in or transition of
 41 17 a family from the family investment program by helping a
 41 18 participant obtain or retain employment, by removing barriers
 41 19 to employment, by stabilizing a participant's employment, or
 41 20 by improving a participant's employment status. The program
 41 21 shall be implemented statewide in a manner that preserves local
 41 22 flexibility in program design. The department shall assess and
 41 23 screen individuals who would most likely benefit from diversion
 41 24 program assistance. The department ~~may~~ shall adopt income
 41 25 eligibility requirements and additional eligibility criteria
 41 26 for the diversion program as necessary for compliance with
 41 27 federal law and for screening those families ~~who would be~~ most
 41 28 likely to become eligible for the family investment program if
 41 29 diversion program incentives ~~would~~ were ~~be~~ provided to the
 41 30 families.

41 31 Sec. 57. Section 239B.14, subsection 2, Code 2024, is
 41 32 amended to read as follows:
 41 33 2. An individual who commits a fraudulent practice under
 41 34 this section is personally liable for the amount of assistance
 41 35 or other benefits fraudulently obtained. The amount of the
 42 1 assistance or other benefits may be recovered from the offender
 42 2 or the offender's estate in an action brought or by claim
 42 3 filed in the name of the state and the recovered funds shall
 42 4 be deposited in the family investment program account credited
 42 5 to the appropriation to the department for community access
 42 6 and eligibility to be used for the purposes of the family
 42 7 investment program. The action or claim filed in the name of
 42 8 the state shall not be considered an election of remedies to
 42 9 the exclusion of other remedies.

42 10 Sec. 58. Section 252B.27, subsection 1, Code 2024, is
 42 11 amended to read as follows:

CODE: Redirects recovered funds from fraudulent practices to be credited to the Community Access and Eligibility appropriation for purposes of the FIP instead of being deposited in the Family Investment Program Account.

CODE: Allows the Director of the HHS to establish new positions for Child Support Services within the limitations of the amount

42 12 1. The director, within the limitations of the amount
 42 13 appropriated for child support services, or moneys transferred
 42 14 for this purpose from the ~~family investment program account~~
 42 15 ~~created in section 239B.11~~ appropriation to the department for
 42 16 community access and eligibility, may establish new positions
 42 17 and add employees to child support services if the director
 42 18 determines that both the current and additional employees
 42 19 together can reasonably be expected to maintain or increase net
 42 20 state revenue at or beyond the budgeted level for the fiscal
 42 21 year.

appropriated for Child Support Services or moneys transferred for this purpose from the Community Access and Eligibility appropriation.

42 22 Sec. 59. TRANSITION PROVISION. All unencumbered and
 42 23 unobligated moneys remaining on June 30, 2024, in the family
 42 24 investment program account created in section 239B.11, are
 42 25 appropriated to the department of health and human services for
 42 26 community access and eligibility.

Directs any unexpended funds in the FIP account on June 30, 2024, to be appropriated to the HHS for Community Access and Eligibility.

42 27 CHILD SUPPORT COLLECTION SERVICES CENTER REFUND ACCOUNT

42 28 Sec. 60. Section 252B.13A, Code 2024, is amended by adding
 42 29 the following new subsection:
 42 30 NEW SUBSECTION 3. Support payments received by the
 42 31 collection services center shall be deposited in the collection
 42 32 services center refund account. The account shall be separate
 42 33 from the general fund of the state and shall not be considered
 42 34 part of the general fund of the state. The moneys deposited
 42 35 in the account are not subject to section 8.33 and shall not
 43 1 be transferred, used, obligated, appropriated, or otherwise
 43 2 encumbered except as provided for the purposes of this chapter.
 43 3 Notwithstanding section 12C.7, subsection 2, interest or
 43 4 earnings on moneys deposited in the account shall be credited
 43 5 to the account.

CODE: Directs support payments received by the Collection Services Center to be deposited in the Collection Services Center Refund Account, which is separate from the General Fund. Specifies that moneys in the Account are not subject to reversion and are required to be used according to Iowa Code section [252B.13A](#). Permits moneys earned in the Account to be credited to the Account.

43 6 QUALITY ASSURANCE ASSESSMENT — PAYMENT PERIOD BASIS

43 7 Sec. 61. Section 249L.3, subsection 2, Code 2024, is amended
 43 8 to read as follows:
 43 9 2. The quality assurance assessment shall be paid by each
 43 10 nursing facility to the department on a ~~quarterly~~ monthly basis
 43 11 after the nursing facility's medical assistance payment rates
 43 12 are adjusted to include funds appropriated from the quality
 43 13 assurance trust fund for that purpose. The department shall

CODE: Requires that quality assurance assessments be paid by nursing facilities on a monthly basis instead of a quarterly basis. Requires that quality assurance assessment forms be submitted within 30 days of the end of each month rather than each calendar quarter.

43 14 prepare and distribute a form upon which nursing facilities
 43 15 shall calculate and report the quality assurance assessment.
 43 16 A nursing facility shall submit the completed form with the
 43 17 assessment amount no later than thirty days following the end
 43 18 of each ~~calendar quarter~~ month.

43 19 SUPPORTED COMMUNITY LIVING SERVICES

43 20 Sec. 62. Section 225C.21, subsection 1, Code 2024, is
 43 21 amended to read as follows:

43 22 1. As used in this section, “supported community living
 43 23 services” means services provided in a noninstitutional
 43 24 setting to ~~adult~~ persons sixteen years of age and older with
 43 25 mental illness, an intellectual disability, brain injury, or
 43 26 developmental disabilities to meet the persons’ daily living
 43 27 needs.

CODE: Defines "supported community living services" as services provided in a noninstitutional setting to persons 16 years of age or older with mental illness, an intellectual disability, brain injury, or developmental disability.

43 28 CENTERS OF EXCELLENCE GRANT PROGRAM

43 29 Sec. 63. NEW SECTION 135.194 CENTERS OF EXCELLENCE GRANT
 43 30 PROGRAM.

43 31 1. The department shall administer a centers of excellence
 43 32 grant program to encourage innovation and collaboration among
 43 33 regional health care providers in rural areas, based upon the
 43 34 results of a regional community needs assessment, in order
 43 35 to transform health care delivery that provides quality,
 44 1 sustainable care in meeting the needs of the local community.

44 2 2. An applicant for a grant shall specify how the grant will
 44 3 be expended to accomplish the goals of the program and shall
 44 4 provide a detailed five-year sustainability plan prior to being
 44 5 awarded the grant.

44 6 3. Following receipt of a grant, a recipient shall submit
 44 7 periodic reports as specified by the department to the governor
 44 8 and the general assembly regarding the recipient’s expenditure
 44 9 of the grant and progress in accomplishing the program’s goals.

CODE: Requires the HHS to administer a Centers of Excellence Grant Program to encourage collaboration among regional health care providers in rural areas to transform health care delivery to provide quality and sustainable care.

44 10 REGIONAL AUTISM ASSISTANCE PROGRAM

44 11 Sec. 64. Section 256.35, Code 2024, is amended to read as
 44 12 follows:

44 13 256.35 REGIONAL AUTISM ASSISTANCE PROGRAM.

44 14 The department shall establish a regional autism assistance

CODE: Requires the HHS to collaborate with the Autism Support Program pursuant to Iowa Code chapter [225D](#) on the Regional Autism

44 15 program, to be administered by the child health specialty
 44 16 clinics of the university of Iowa hospitals and clinics. The
 44 17 program shall ~~be designed to coordinate~~ collaborate with the
 44 18 autism support program created in chapter 225D to enhance
 44 19 interagency collaboration in coordinating educational, medical,
 44 20 and other human services for persons with autism, their
 44 21 parents, and providers of services to persons with autism. The
 44 22 ~~function~~ functions of the program shall include but ~~is~~ are
 44 23 not limited to regionalized and integrated care delivery and
 44 24 coordination, family navigation, the coordination of diagnostic
 44 25 and assessment services, the maintaining of a research base,
 44 26 coordination of in-service training, providing provision of
 44 27 technical assistance, and providing provision of consultation.

Assistance Program. The functions of the Regional Autism Assistance Program must include regionalized and integrated care delivery and coordination and family navigation.

44 28 LODGING EXPENSES UNIVERSITY OF IOWA HOSPITALS AND CLINICS ———
 44 29 CANCER PATIENTS

44 30 Sec. 65. NEW SECTION 217.41D LODGING FOR CANCER PATIENTS
 44 31 ——— UNIVERSITY OF IOWA HOSPITALS AND CLINICS.
 44 32 The department shall use funding appropriated to the
 44 33 department for lodging expenses associated with care provided
 44 34 at the university of Iowa hospitals and clinics for patients
 44 35 with cancer in accordance with this section. The funding shall
 45 1 be used for patients whose travel distance is thirty miles
 45 2 or more and whose income is at or below two hundred percent
 45 3 of the federal poverty level as defined by the most recently
 45 4 revised poverty income guidelines published by the United
 45 5 States department of health and human services. The department
 45 6 shall establish the maximum number of overnight stays and the
 45 7 maximum rate reimbursed for overnight lodging, which may be
 45 8 based on the state employee rate established by the department
 45 9 of administrative services.

CODE: Requires the HHS to use appropriated funds for lodging expenses for cancer patients with income below 200.00% of the FPL who travel 30 miles or more to receive treatment at the UIHC.

45 10 ASSISTED LIVING PROGRAM ——— REVISED PAYMENT MODEL STUDY

45 11 Sec. 66. ASSISTED LIVING PROGRAM ——— REVISED PAYMENT
 45 12 MODEL STUDY. The department of health and human services,
 45 13 in consultation with Medicaid provider associations and
 45 14 stakeholders, shall explore options for a revised payment model
 45 15 for reimbursement of assisted living programs that provide
 45 16 services to Medicaid recipients. The study shall include
 45 17 consideration of all sources of funding utilized by residents

Requires the HHS, in consultation with Medicaid provider associations and stakeholders, to conduct a study to explore options for a revised payment model for reimbursement of assisted living programs for Medicaid recipients. Requires the study to include consideration of all sources of funding utilized by residents of assisted living programs. The HHS is required to report all options identified to the General Assembly by December 1, 2024.

45 18 of assisted living programs. The department of health and
 45 19 human services shall report all options identified to the
 45 20 general assembly by December 1, 2024.

45 21 COUNTY COMMISSIONS OF VETERAN AFFAIRS — APPROPRIATION

45 22 Sec. 67. Section 35A.16, subsection 1, paragraph b, Code
 45 23 2024, is amended to read as follows:

45 24 b. There is appropriated from the general fund of the state
 45 25 to the department, for the fiscal year beginning July 1, 2009,
 45 26 and for each subsequent fiscal year, the sum of ~~one million~~
 45 27 nine hundred ninety thousand dollars to be credited to the
 45 28 county commissions of veteran affairs fund.

CODE: Decreases the standing limited appropriation from the General Fund to the Department of Veterans Affairs to be credited to the County Commissions of Veteran Affairs Fund from \$1,000,000 to \$990,000.

DETAIL: This is no change compared to estimated FY 2024.

45 29 DIVISION XVIII
 45 30 HEALTH CARE EMPLOYMENT AGENCIES AND HEALTH CARE TECHNOLOGY
 45 31 PLATFORMS

45 32 Sec. 68. Section 135Q.1, Code 2024, is amended to read as
 45 33 follows:

45 34 135Q.1 DEFINITIONS.

45 35 As used in this chapter, unless the context otherwise
 46 1 requires:

46 2 1. "Affiliate" means an entity that directly or indirectly
 46 3 is controlled with or by, or is under the common control with,
 46 4 a health care entity. For the purposes of this subsection,
 46 5 "control" means the same as defined in section 423.3, subsection
 46 6 92, paragraph "e".

46 7 ~~1.~~ 2. "Department" means the department of inspections,
 46 8 appeals, and licensing.

46 9 ~~2.~~ 3. a. "Health care employment agency" or "agency"
 46 10 means an agency that contracts with a health care entity
 46 11 in this state to provide agency workers for temporary or
 46 12 temporary-to-hire employee placements.

46 13 b. "Health care employment agency" does not include a health
 46 14 care entity or an affiliate of a health care entity when acting
 46 15 as a health care employment agency for the sole purpose of
 46 16 providing agency workers to the health care entity itself or to
 46 17 an affiliate of the health care entity.

46 18 ~~3.~~ 4. "Health care employment agency worker" or "agency
 46 19 worker" means an individual who contracts with or is employed by
 46 20 a health care employment agency to provide nursing services to

CODE: Defines terms related to Iowa Code chapter [135Q](#).

46 21 health care entity consumers.

46 22 ~~4.~~ 5. "Health care entity" means a facility, agency, or
46 23 program licensed or certified by the department or by the
46 24 centers for Medicare and Medicaid services of the United States
46 25 department of health and human services.

46 26 6. "Health care technology platform" or "platform" includes
46 27 an individual, a trust, a partnership, a corporation, a limited
46 28 liability partnership or company, or any other business entity
46 29 that develops and operates, offers, or maintains a system or
46 30 technology that provides an internet-based or application-based
46 31 marketplace through which an independent nursing services
46 32 professional bids on open shifts posted by a health care entity
46 33 to provide nursing services for the health care entity.

46 34 7. "Independent nursing services professional" means a person
46 35 engaged as an independent contractor through a health care
47 1 technology platform to provide nursing services for a health
47 2 care entity. An independent nursing services professional
47 3 shall be considered an independent contractor provided the
47 4 independent nursing services professional in the independent
47 5 nursing services professional's sole discretion bids on open
47 6 shifts and chooses where, when, and how often to work.

47 7 8. "Individual agency worker category" includes registered
47 8 nurses, licensed practical nurses, certified nurse aides,
47 9 certified medication aides, home health aides, medication
47 10 managers, and noncertified or nonlicensed staff providing
47 11 personal care as defined in section 231C.2 who are health care
47 12 employment agency workers.

47 13 ~~5.~~ 9. "Managing entity" means a business entity,
47 14 owner, ownership group, chief executive officer, program
47 15 administrator, director, or other decision maker whose
47 16 responsibilities include directing the management or policies
47 17 of a health care employment agency or a health care technology
47 18 platform. "Managing entity" includes an individual who,
47 19 directly or indirectly, holds a beneficial interest in a
47 20 corporation, partnership, or other business entity that
47 21 constitutes a managing entity.

47 22 ~~6.~~ 10. "Nursing services" means those services which may be
47 23 provided only by or under the supervision of a nurse. "Nursing
47 24 services" includes services performed by a registered nurse, a
47 25 licensed practical nurse, a certified nurse aide, a certified
47 26 medication aide, a home health aide, a medication manager, or

47 27 by noncertified or nonlicensed staff providing personal care
 47 28 as defined in section 231C.2. "Nursing services" does not
 47 29 include the practice of nursing by an advanced registered nurse
 47 30 practitioner or an advanced practice registered nurse licensed
 47 31 under chapter 152 or 152E.
 47 32 11. "Nursing services professionals" includes registered
 47 33 nurses, licensed practical nurses, certified nurse aides,
 47 34 certified medication aides, home health aides, medication
 47 35 managers, and noncertified or nonlicensed staff providing
 48 1 personal care as defined in section 231C.2, who are not
 48 2 health care employment agency workers but instead are employed
 48 3 directly by or contract directly with a health care entity.

48 4 Sec. 69. Section 135Q.2, Code 2024, is amended to read as
 48 5 follows:
 48 6 135Q.2 HEALTH CARE EMPLOYMENT AGENCY REQUIREMENTS ———
 48 7 REGISTRATION ——— LIABILITY ——— ~~PENALTIES~~ .
 48 8 1. a. A health care employment agency operating in the
 48 9 state shall register annually with the department. Each
 48 10 separate location of a health care employment agency shall
 48 11 register annually with and pay an annual registration fee of
 48 12 five hundred dollars to the department. The department shall
 48 13 issue each location a separate certification of registration
 48 14 upon approval of registration and payment of the fee. The
 48 15 annual registration fees shall be retained by the department as
 48 16 repayment receipts as defined in section 8.2.
 48 17 b. A health care employment agency that fails to register
 48 18 with the department as required under this subsection shall be
 48 19 prohibited from contracting with any health care entity in this
 48 20 state.

48 21 2. A health care employment agency shall do all of the
 48 22 following:
 48 23 a. Ensure that agency workers comply with all applicable
 48 24 requirements relating to the health requirements and
 48 25 qualifications of personnel in health care entity settings.
 48 26 b. Document that each agency worker meets the minimum
 48 27 licensing, certification, training, and health requirements
 48 28 and the continuing education standards for the agency worker's
 48 29 position in the health care entity setting.
 48 30 c. Maintain records for each agency worker and report,
 48 31 file, or otherwise provide any required documentation to

CODE: Prohibits a health care employment agency from contracting with a health care entity if the health care employment agency has not registered with the DIAL.

CODE: Specifies that a health care employment agency must maintain records for each agency worker and report, file, or otherwise provide any required documentation to external parties which would otherwise be the responsibility of the health care entity if the agency worker was directly employed by the health care agency.

48 32 external parties or regulators which would otherwise be the
 48 33 responsibility of the health care entity if the agency worker
 48 34 was directly employed by the health care entity.
 48 35 d. Maintain professional and general liability insurance
 49 1 coverage with minimum per occurrence coverage of one million
 49 2 dollars and aggregate coverage of three million dollars to
 49 3 insure against loss, damage, or expense incident to a claim
 49 4 arising out of the death or injury of any person as the result
 49 5 of negligence or malpractice in the provision of services by
 49 6 the agency or an agency worker.

49 7 3. a. A health care employment agency shall not do any of
 49 8 the following:
 49 9 (1) Restrict in any manner the employment opportunities
 49 10 of an agency worker by including a noncompete clause in any
 49 11 contract with an agency worker or health care entity.
 49 12 (2) In any contract with an agency worker or health care
 49 13 entity, require payment of liquidated damages, employment fees,
 49 14 or other compensation if the agency worker is subsequently
 49 15 hired as a permanent employee of the health care entity.
 49 16 (3) Use the establishment of, or the required applicability
 49 17 of, the statewide maximum allowable charges schedule under
 49 18 section 135Q.4 as a basis for prohibiting or otherwise
 49 19 interfering with a wage increase for any agency worker.
 49 20 b. This subsection shall not apply to a contract between
 49 21 a health care employment agency and an agency worker or a
 49 22 health care entity if the contract meets all of the following
 49 23 criteria:
 49 24 (1) The contract is entered into for the purpose of placing
 49 25 an agency worker the health care employment agency assisted in
 49 26 obtaining authorization to work in the United States.
 49 27 (2) The contract contains an initial duration term of
 49 28 not less than twenty-four months and a total duration term,
 49 29 including any renewals or extensions, of not more than
 49 30 thirty-six months.
 49 31 (3) The contract requires the agency worker to work for
 49 32 a single health care entity for the entire duration of the
 49 33 contract.
 49 34 c. Any contract that violates this subsection shall be
 49 35 unenforceable in court.

CODE: Prohibits a health care employment agency from using the statewide maximum allowable charges schedule as a basis for prohibiting or interfering with a wage increase for any agency worker.

50 1 4. A health care employment agency shall submit a report to

CODE: Requires a health care employment agency to report to the

50 2 the department on a quarterly basis for each health care entity
 50 3 participating in Medicare or Medicaid with whom the agency
 50 4 contracts that includes all of the following by provider type:
 50 5 a. A detailed list of the average amount charged to the
 50 6 health care entity for each individual agency worker category.
 50 7 b. A detailed list of the average amount paid by the agency
 50 8 to agency workers in each individual agency worker category.
 50 9 ~~5. a. A health care employment agency that violates~~
 50 10 ~~subsection 1 or subsection 2 is subject to denial or revocation~~
 50 11 ~~of registration for a period of one year and a monetary penalty~~
 50 12 ~~of five hundred dollars for a first offense and five thousand~~
 50 13 ~~dollars for each offense thereafter.~~
 50 14 ~~b. A health care employment agency that violates subsection~~
 50 15 ~~3 or that knowingly provides an agency worker who has an~~
 50 16 ~~illegally or fraudulently obtained or issued diploma,~~
 50 17 ~~registration, license, certification, or background check to~~
 50 18 ~~a health care entity is subject to immediate revocation of~~
 50 19 ~~registration. The department shall notify the agency thirty~~
 50 20 ~~days in advance of the date of such revocation.~~
 50 21 ~~c. (1) The managing entity of an agency for which~~
 50 22 ~~registration has been denied or revoked under this subsection~~
 50 23 ~~shall not be eligible to apply for or be granted registration~~
 50 24 ~~for another agency during the two-year period following the~~
 50 25 ~~date of the denial or revocation.~~
 50 26 ~~(2) The department shall not approve a new registration~~
 50 27 ~~or renew an existing registration for any agency for which~~
 50 28 ~~the managing entity is also the managing entity of an agency~~
 50 29 ~~for which registration has been denied or revoked during the~~
 50 30 ~~two-year period in which registration of the violating agency~~
 50 31 ~~is denied or revoked.~~

50 32 ~~6. 5.~~ The department shall establish a system for members
 50 33 of the public to report complaints against an agency or
 50 34 agency worker. The department shall investigate any complaint
 50 35 received and shall report the department's findings to the
 51 1 complaining party and the agency involved.

51 2 Sec. 70.NEW SECTION 135Q.3 HEALTH CARE TECHNOLOGY
 51 3 PLATFORM REQUIREMENTS — REGISTRATION — LIABILITY.

51 4 1. a. A health care technology platform operating in
 51 5 the state shall register annually with the department and

HHS on a quarterly basis for each health care entity participating in
 Medicaid and Medicare with whom the HHS contracts. The report will
 include the following:

- A detailed list of the average amount charged to the health care entity for each individual agency worker category.
- A detailed list of the average amount paid by the agency to agency workers in each individual agency worker category.

CODE: Requires the HHS to establish a system for members of the public to report complaints against an agency or worker. Requires the HHS to investigate any complaint received and to report the findings to the complaining party and the agency involved.

CODE: Requires health care technology platforms to register annually with the DIAL and pay an annual registration fee of \$500, which is

51 6 pay an annual registration fee of five hundred dollars to
 51 7 the department. The department shall issue each health
 51 8 care technology platform a certificate of registration upon
 51 9 approval of registration and payment of the fee. The annual
 51 10 registration fees shall be retained by the department as
 51 11 repayment receipts as defined in section 8.2.

51 12 b. A health care technology platform that fails to register
 51 13 with the department as required under this subsection shall be
 51 14 prohibited from contracting with any health care entity in this
 51 15 state.

51 16 c. A health care technology platform that allows independent
 51 17 nursing services professionals to utilize the platform to bid
 51 18 on open shifts is an authorized agency for purposes of access
 51 19 to the single contact repository. A health care technology
 51 20 platform shall rerun background checks for an independent
 51 21 nursing services professional following two consecutive years
 51 22 of inactivity on the platform by the independent nursing
 51 23 services professional.

51 24 2. A health care technology platform shall verify that
 51 25 an independent nursing services professional utilizing the
 51 26 platform does all of the following:

51 27 a. Supplies documentation demonstrating that the independent
 51 28 nursing services professional meets all applicable state
 51 29 requirements and qualifications of personnel in a health care
 51 30 entity setting.

51 31 b. Meets all applicable minimum state licensing and
 51 32 certification requirements.

51 33 c. Maintains professional liability insurance coverage with
 51 34 the minimum per occurrence coverage of one million dollars and
 51 35 aggregate coverage of three million dollars to insure against
 52 1 loss, damage, or expense incident to a claim arising out of
 52 2 the death or injury of any person as the result of negligence
 52 3 or malpractice in the provision of services by the independent
 52 4 nursing services professional.

52 5 3. a. A health care technology platform shall not do any
 52 6 of the following:

52 7 (1) Restrict in any manner the employment opportunities of
 52 8 an independent nursing services professional by including a
 52 9 noncompete clause in any contract with an independent nursing
 52 10 services professional or health care entity.

retained by the DIAL. Prohibits a platform from contracting with any health care entity in the State if the platform fails to register with the DIAL. Specifies that a platform is an authorized agency for purposes of access to the single contact repository if the platform allows independent nursing services professionals to utilize the platform to bid on shifts. Requires platforms to rerun background checks for an independent nursing services professional following two consecutive years of inactivity on the platform.

CODE: Requires health care technology platforms to verify that an independent nursing services professional utilizing the platform does the following:

- Supplies documentation demonstrating that the independent nursing services professional meets all applicable State requirements and qualifications of personnel in a health care entity setting.
- Meets all applicable minimum State licensing and certification requirements.
- Maintains professional liability insurance coverage with the minimum per occurrence coverage of \$1,000,000 and aggregate coverage of \$3,000,000.

CODE: Prohibits a health care technology platform from the following:

- Restricting the employment opportunities of an independent nursing services professional by including a noncompete clause in any contract with an independent nursing services professional or health care entity.

52 11 (2) In any contract with an independent nursing services
 52 12 professional or health care entity, require payment of
 52 13 liquidated damages, employment fees, or other compensation if
 52 14 the independent nursing services professional is subsequently
 52 15 hired as a permanent employee or is engaged directly as a
 52 16 contractor of the health care entity.
 52 17 b. Any contract that violates this subsection shall be
 52 18 unenforceable in court.

- Requiring payment of liquidated damages, employment fees, or other compensation in any contract with an independent nursing services professional or health care entity if the independent nursing services professional is subsequently hired as a permanent employee or is engaged directly as a contractor of the health care entity.

52 19 4. The department shall establish a system for members
 52 20 of the public to report complaints against a health care
 52 21 technology platform or an independent nursing services
 52 22 professional. The department shall investigate any complaint
 52 23 received and shall report the department's findings to the
 52 24 complaining party and the health care technology platform
 52 25 involved.

CODE: Requires the DIAL to establish a system for the public to report complaints against a health care technology platform or an independent nursing services professional. Requires the DIAL to investigate complaints and report findings to the complaining party and the health care technology platform involved.

52 26 Sec. 71.NEW SECTION 135Q.4 STATEWIDE MAXIMUM ALLOWABLE
 52 27 CHARGES SCHEDULE — ESTABLISHMENT AND ANNUAL REVISION —
 52 28 ~~REQUIRED~~ ON AND COMPLIANCE — RULES.

CODE: Requires the HHS to annually establish and publish a maximum allowable charges schedule for nursing services provided by health care employment agency workers.

52 29 1. The department of health and human services shall
 52 30 annually establish and publish by September 30, a statewide
 52 31 maximum allowable charges schedule that shall be applicable
 52 32 January 1 of the immediately following calendar year to nursing
 52 33 services provided by a health care employment agency worker.
 52 34 The department of health and human services shall utilize the
 52 35 most recently preceding nursing facility cost report schedule
 53 1 H to calculate the statewide maximum allowable charges. The
 53 2 department of health and human services, in collaboration
 53 3 with stakeholders, shall develop a process to periodically
 53 4 obtain wage information from provider types other than nursing
 53 5 facilities.

53 6 2. The amounts established in the statewide maximum
 53 7 allowable charges schedule shall meet all of the following
 53 8 requirements:
 53 9 a. The amounts shall be no greater than one hundred fifty
 53 10 percent of the statewide average wage paid in the most recently
 53 11 preceding cost report year by a specific type of health care
 53 12 entity to a specific type of nursing services professional, and

CODE: The amounts established in the charges schedule must be no greater than 150.00% of the statewide average wage paid in the most recently preceding cost report year by a specific type of health care entity.

FISCAL IMPACT: Implementing the statewide maximum allowable charges schedule is estimated to cost a total of \$331,000 in FY 2025 and \$322,000 in FY 2026. The State share is estimated to be

<p>53 13 within the applicable core-based statistical area of the state. 53 14 b. The amounts shall be inclusive of the hourly rate, 53 15 administrative fees, contract fees, transportation or travel 53 16 stipends, per diems, and any other costs a health care 53 17 employment agency is authorized to include in the charge to a 53 18 health care entity for nursing services provided by an agency 53 19 worker within an individual agency worker category.</p>	<p>\$200,000 in FY 2025 and \$195,000 in FY 2026. The cost breakdown for the State is as follows:</p> <ul style="list-style-type: none"> • \$67,000 in FY 2025 and \$65,000 in FY 2026 for 1.00 Administrative Assistant 2 FTE position for the DIAL. • \$49,000 per year for 1.00 Executive Officer 3 FTE position for the HHS. • \$40,000 per year for 1.00 Management Analyst 3 FTE position for the HHS. • \$39,000 per year for 1.00 Statistical Research Analyst 3 FTE position for the HHS. • \$5,000 in FY 2025 and \$2,000 in FY 2026 for support costs for the HHS FTE positions.
<p>53 20 3. Each separate location of a health care employment agency 53 21 registered under section 135Q.2 shall utilize and comply with 53 22 the statewide maximum allowable charges schedule established 53 23 under this section.</p>	<p>CODE: Requires each separate location of a health care employment agency to utilize and comply with the statewide maximum allowable charges schedule.</p>
<p>53 24 4. The statewide maximum allowable charges schedule 53 25 established under this section shall not apply to any of the 53 26 following: 53 27 a. A contract between a health care employment agency and 53 28 an agency worker or a health care entity if the contract meets 53 29 all of the following criteria: 53 30 (1) The contract is entered into for the purpose of placing 53 31 a specific agency worker with a health care entity. 53 32 (2) The contract contains an initial duration term of not 53 33 less than twelve consecutive weeks. 53 34 (3) The contract requires the agency worker to work for 53 35 a single health care entity for the entire duration of the 54 1 contract. 54 2 b. A health care technology platform.</p>	<p>CODE: Specifies that the statewide maximum allowable charges schedule does not apply to the following:</p> <ul style="list-style-type: none"> • A contract between a health care employment agency and an agency worker or a health care entity if certain criteria is met. • A health care technology platform.
<p>54 3 5. The department of health and human services, in 54 4 cooperation with the department, shall adopt rules pursuant to 54 5 chapter 17A to administer this section.</p>	<p>CODE: Requires the HHS, in cooperation with the DIAL, to adopt administrative rules to administer the section.</p>
<p>54 6 Sec. 72.NEW SECTION 135Q.5 PENALTIES — ENFORCEMENT. 54 7 1. a. A health care employment agency that violates 54 8 section 135Q.2, subsection 1 or 4, is subject to an initial 54 9 monetary penalty of five thousand dollars and shall be provided</p>	<p>CODE: Modifies the current civil penalty structure and adds new civil penalties for health care employment agencies that fail to comply with the Iowa Code. Modifies rules for registration by managing entities.</p>

54 10 notification by the department and given a thirty-day grace
54 11 period in which to comply.

54 12 b. A health care employment agency that fails to comply
54 13 following the notification and within the thirty-day grace
54 14 period under paragraph “a”, shall be subject to a monetary
54 15 penalty of twenty-five thousand dollars.

54 16 c. If a health care employment agency fails to comply
54 17 with paragraph “b”, the health care employment agency shall
54 18 be subject to an additional monetary penalty of twenty-five
54 19 thousand dollars, revocation of registration, and denial of
54 20 subsequent registration for up to three years.

54 21 2. a. A health care employment agency that violates section
54 22 135Q.2, subsection 2, or that knowingly provides an agency
54 23 worker who has an illegally or fraudulently obtained or issued
54 24 diploma, registration, license, certification, or background
54 25 check to a health care entity is subject to a monetary penalty
54 26 of five thousand dollars for each violation.

54 27 b. If a health care employment agency commits a second or
54 28 subsequent violation of section 135Q.2, subsection 2, within
54 29 any three-year period, the health care employment agency shall
54 30 be subject to immediate revocation of registration. The
54 31 department shall notify the agency thirty days in advance of
54 32 the date of such revocation.

54 33 3. A health care employment agency that violates section
54 34 135Q.2, subsection 3, is subject to a monetary penalty of
54 35 twenty-five thousand dollars for the first violation. If
55 1 a health care employment agency violates section 135Q.2,
55 2 subsection 3, a second or subsequent time, the health care
55 3 employment agency shall be subject to immediate revocation of
55 4 registration, and shall not be eligible to apply for or be
55 5 granted registration for the three-year period immediately
55 6 following the date of revocation.

55 7 4. a. (1) A health care technology platform that violates
55 8 section 135Q.3, subsection 1, is subject to an initial
55 9 monetary penalty of five thousand dollars and shall be provided
55 10 notification by the department and given a thirty-day grace
55 11 period in which to comply.

55 12 (2) A health care technology platform that fails to comply
55 13 with the notification and within the thirty-day grace period
55 14 under subparagraph (1) shall be subject to a monetary penalty
55 15 of twenty-five thousand dollars.

Specifies that any monetary penalties under this section be retained
by the DIAL as repayment receipts as defined in Iowa Code section
[8.2](#).

55 16 (3) If a health care technology platform fails to comply
55 17 with subparagraph (2), the health care technology platform
55 18 shall be subject to an additional monetary penalty of
55 19 twenty-five thousand dollars, revocation of registration, and
55 20 denial of subsequent registration for up to three years.

55 21 b. (1) A health care technology platform that violates
55 22 section 135Q.3, subsection 2, or that knowingly allows
55 23 an independent nursing services professional who has an
55 24 illegally obtained or issued diploma, registration, license,
55 25 certification, or background check to utilize the platform to
55 26 bid on a shift for a health care entity is subject to a monetary
55 27 penalty of five thousand dollars for each violation.

55 28 (2) If a health care technology platform commits a second or
55 29 subsequent violation of section 135Q.3, subsection 2, within
55 30 any three-year period, the health care technology platform
55 31 shall be subject to immediate revocation of registration. The
55 32 department shall notify the health care technology platform
55 33 thirty days in advance of the date of such revocation.

55 34 c. (1) A health care technology platform that violates
55 35 section 135Q.3, subsection 3, is subject to a monetary penalty
56 1 of twenty-five thousand dollars for the first violation.

56 2 (2) If a health care technology platform violates section
56 3 135Q.3, subsection 3, a second or subsequent time, the health
56 4 care technology platform shall be subject to immediate
56 5 revocation of registration, and shall not be eligible to apply
56 6 for or be granted registration for the three-year period
56 7 immediately following the date of revocation.

56 8 5. A health care employment agency that violates section
56 9 135Q.4 shall be subject to a monetary penalty of five thousand
56 10 dollars for the first violation, and a monetary penalty of
56 11 twenty-five thousand dollars for each subsequent violation.

56 12 6. a. The managing entity of an agency for which
56 13 registration has been denied or revoked under this section
56 14 shall not be eligible to apply for or be granted registration
56 15 for another agency during the three-year period following the
56 16 date of the denial or revocation.

56 17 b. The department shall not approve a new registration
56 18 or renew an existing registration for any agency for which
56 19 the managing entity is also the managing entity of an agency
56 20 for which registration has been denied or revoked during the
56 21 three-year period in which registration of the violating agency

56 22 is denied or revoked.
 56 23 7. a. The managing entity of a health care technology
 56 24 platform for which registration has been denied or revoked
 56 25 under this section shall not be eligible to apply for or
 56 26 be granted registration for another health care technology
 56 27 platform during the two-year period following the date of the
 56 28 denial or revocation.
 56 29 b. The department shall not approve a new registration or
 56 30 renew an existing registration for any health care technology
 56 31 platform for which the managing entity is also the managing
 56 32 entity of a health care technology platform for which
 56 33 registration has been denied or revoked during the two-year
 56 34 period in which registration of the violating health care
 56 35 technology platform is denied or revoked.
 57 1 8. Any monetary penalties collected under this section
 57 2 shall be retained by the department as repayment receipts as
 57 3 defined in section 8.2.
 57 4 9. The attorney general shall enforce this chapter.

57 5 Sec. 73. NEW SECTION 135Q.6 DEPARTMENT ANNUAL REPORT.
 57 6 The department shall submit an annual report to the general
 57 7 assembly by January 15, for the immediately preceding fiscal
 57 8 year, that includes a summary of the number of registrations
 57 9 issued and the amount of registration fees collected, the
 57 10 violations of this chapter, the amount of monetary penalties
 57 11 collected, the number of health care employment agencies,
 57 12 health care technology platforms, and managing entities for
 57 13 whom a registration was revoked or denied, the statewide
 57 14 maximum allowable charges schedule, and any recommendations for
 57 15 changes to the chapter.

57 16 Sec. 74. EFFECTIVE DATE. This division of this Act, being
 57 17 deemed of immediate importance, takes effect upon enactment.

57 18 DIVISION XIX
 57 19 MEDICAL CANNABIDIOL REGISTRATION CARD — TELEMEDICINE —
 57 20 PRACTITIONER REQUIREMENTS

57 21 Sec. 75. Section 124E.3, Code 2024, is amended by adding the
 57 22 following new subsection:
 57 23 NEW SUBSECTION 4. A health care practitioner that
 57 24 establishes or maintains a relationship with a patient through

CODE: Requires the DIAL to submit an annual report to the General Assembly that includes information on health care employment agency registrations, registration fees collected, violations of Iowa Code chapter [135Q](#), monetary penalties collected, registration revocations and denials, the statewide maximum allowable charges schedule, and recommendations for changes to the Iowa Code chapter.

Specifies that Division XVIII will take effect upon enactment.

CODE: Extends the duties of a health care practitioner under the Medical Cannabidiol Act to include the establishment of a physician-patient relationship through the use of telemedicine to comply with the requirements in 653 IAC [13.11](#)(7).

57 25 the use of telemedicine shall comply with the requirements of
57 26 653 IAC 13.11(7).

57 27 DIVISION XX
57 28 FOSTER CARE PROCESSES, SERVICES, AND SUPPORTS

57 29 Sec. 76. Section 232.96A, subsection 6, Code 2024, is
57 30 amended to read as follows:
57 31 6. The child is in need of treatment to cure or alleviate a
57 32 serious chemical dependency or mental illness or disorder, or
57 33 emotional damage as evidenced by severe anxiety, depression,
57 34 withdrawal, or behavioral health disorder that compromises
57 35 the child's safety or causes untoward aggressive behavior
58 1 toward the child's self or others in the household, and the
58 2 child's parent, guardian, or custodian is unwilling to provide
58 3 such treatment or the parent's, guardian's, or custodian's
58 4 efforts to secure needed treatment have been exhausted and
58 5 unsuccessful.

58 6 Sec. 77. Section 232.96A, subsections 11, 12, and 13, Code
58 7 2024, are amended by striking the subsections.

58 8 Sec. 78. Section 234.38, Code 2024, is amended to read as
58 9 follows:
58 10 234.38 FOSTER CARE REIMBURSEMENT RATES.
58 11 The department shall make reimbursement payments directly
58 12 to foster parents for services provided to children pursuant
58 13 to section 234.6, subsection 1, paragraph "e", subparagraph
58 14 (2), or section 234.35. ~~In any fiscal year, the reimbursement~~
58 15 ~~rate shall be based upon sixty-five percent of the United~~
58 16 ~~States department of agriculture estimate of the cost to raise~~
58 17 ~~a child in the calendar year immediately preceding the fiscal~~
58 18 ~~year. The department may pay an additional stipend for a child~~
58 19 ~~with special needs. The department shall review reimbursement~~
58 20 payment rates paid to foster parents under this section no less
58 21 than once every three years. The department shall adopt rules
58 22 to implement this section.

58 23 Sec. 79. Section 234.39, subsection 2, Code 2024, is amended
58 24 to read as follows:
58 25 2. a. A person entitled to periodic support payments
58 26 pursuant to an order or judgment entered in any action for

CODE: Allows a juvenile court to adjudicate a child in need of assistance when the child requires treatment to cure or alleviate a serious chemical dependency or mental or behavioral health disorder that compromises the child's safety or causes untoward aggressive behavior toward others in the household, and the child's parent, guardian, or custodian is unwilling or unable to provide such treatment successfully.

CODE: Eliminates certain circumstances when a child may be adjudicated as a child in need of assistance.

CODE: Removes the requirement that certain reimbursements to foster parents must be based on 65.00% of the United States Department of Agriculture estimate of the cost to raise a child in the calendar year immediately preceding the fiscal year and removes the additional stipend for children with special needs. Requires the HHS to review reimbursement payment rates paid to foster parents at least once every three years. Directs the HHS to adopt administrative rules to implement this section.

CODE: States that Iowa Code section [234.39\(2\)](#) shall not apply when a child is placed with a relative or fictive kin who is not licensed under Iowa Code chapter [237](#) to provide child foster care.

58 27 support, who also is or has a child receiving foster care
 58 28 services, is deemed to have assigned to the department
 58 29 current and accruing support payments attributable to the
 58 30 child effective as of the date the child enters foster care
 58 31 placement, to the extent of expenditure of foster care funds.
 58 32 The department shall notify the clerk of the district court
 58 33 when a child entitled to support payments is receiving foster
 58 34 care services pursuant to chapter 234. Upon notification
 58 35 by the department that a child entitled to periodic support
 59 1 payments is receiving foster care services, the clerk of
 59 2 the district court shall make a notation of the automatic
 59 3 assignment in the judgment docket and lien index. The notation
 59 4 constitutes constructive notice of assignment. The clerk of
 59 5 court shall furnish the department with copies of all orders
 59 6 and decrees awarding support when the child is receiving
 59 7 foster care services. At the time the child ceases to receive
 59 8 foster care services, the assignment of support shall be
 59 9 automatically terminated. Unpaid support accrued under the
 59 10 assignment of support rights during the time that the child was
 59 11 in foster care remains due to the department up to the amount
 59 12 of unreimbursed foster care funds expended. The department
 59 13 shall notify the clerk of court of the automatic termination
 59 14 of the assignment. Unless otherwise specified in the support
 59 15 order, an equal and proportionate share of any child support
 59 16 awarded shall be presumed to be payable on behalf of each child
 59 17 subject to the order or judgment for purposes of an assignment
 59 18 under this section.
 59 19 b. This subsection shall not apply when a child is placed
 59 20 with a relative or fictive kin as those terms are defined in
 59 21 section 232.2, who is not licensed under chapter 237 to provide
 59 22 child foster care.

59 23 Sec. 80. Section 600.8, subsection 3, Code 2024, is amended
 59 24 to read as follows:
 59 25 3. a. The department, an agency, or a certified adoption
 59 26 investigator shall conduct all investigations and reports
 59 27 required under subsection 2.
 59 28 b. The department shall pay the costs of the preplacement
 59 29 investigation and the postplacement investigation under
 59 30 subsection 2, up to a maximum of two thousand dollars for the
 59 31 preplacement investigation and up to a maximum of two thousand
 59 32 dollars for the postplacement investigation.

CODE: Requires the HHS to reimburse an adoption petitioner for the costs of the preplacement and postplacement investigations related to the adoption up to a maximum amount of \$2,000 per investigation. The HHS is prohibited from making such reimbursements until the person performing the preplacement background check approves the adoption petitioner's initial required background checks.

DETAIL: The HHS currently reimburses the costs of preplacement and postplacement investigations for public adoptions, but not private adoptions. The HHS estimates that, in Iowa, there are approximately

59 33 c. The department shall not pay the costs of the
 59 34 preplacement investigation or the postplacement investigation
 59 35 as required under paragraph “b” until a prospective adoption
 60 1 petitioner has been approved under subsection 1, paragraph “a”,
 60 2 subparagraph (3), by the person making the investigation.

725 private adoptions per year and 86 preplacement investigations that do not end in adoption.

FISCAL IMPACT: Preplacement and postplacement investigation reimbursements for private adoptions are estimated to cost the State \$3,072,000 per year.

60 3 Sec. 81. 2023 Iowa Acts, chapter 112, section 7, subsection
 60 4 7, is amended to read as follows:
 60 5 7. For child and family protective services:
 60 6 \$ 32,380,654
 60 7 35,380,654
 60 8 Of the funds appropriated in this subsection, up to
 60 9 \$3,000,000 shall be used for the kinship caregiver stipend
 60 10 program.

Provides a \$3,000,000 FY 2024 supplemental appropriation for Child and Family Services from the federal TANF Block Grant. The Bill also renames the appropriation Child Protective Services and requires up to \$3,000,000 of the appropriation to be used for the kinship caregiver stipend program.

60 11 Sec. 82. DEPARTMENT OF HEALTH AND HUMAN SERVICES — LEGAL
 60 12 REPRESENTATION FOR JUVENILE CASES INTERIM STUDY COMMITTEE.

Requires the HHS to establish a Legal Representation for Juvenile Cases Interim Study Committee for the 2024 Legislative Interim to investigate, study, and propose legislation relating to client-directed representation for children in juvenile court cases. The Committee shall submit a report to the General Assembly by January 10, 2025.

60 13 1. The department of health and human services shall
 60 14 establish a legal representation for juvenile cases interim
 60 15 study committee for the 2024 interim to investigate, study, and
 60 16 propose legislation relating to client-directed representation
 60 17 for children in juvenile court cases.

DETAIL: According to the HHS, costs associated with the Committee can be absorbed by existing staff and funds.

60 18 2. The committee shall consist of the following voting
 60 19 members:

- 60 20 a. Two members of the house of representatives, one
- 60 21 of whom shall be appointed by the speaker of the house of
- 60 22 representatives and one of whom shall be appointed by the
- 60 23 minority leader of the house of representatives.
- 60 24 b. Two members of the senate, one of whom shall be appointed
- 60 25 by the majority leader of the senate and one of whom shall be
- 60 26 appointed by the minority leader of the senate.

60 27 3. The committee shall also following ex officio, nonvoting
 60 28 members:

- 60 29 a. The state public defender.
- 60 30 b. A person who works for an organization providing advocacy
- 60 31 for kids, appointed by the governor.
- 60 32 c. A juvenile court judge, appointed by the judicial branch.
- 60 33 d. A county attorney working in juvenile courts, appointed
- 60 34 by the Iowa county attorneys association.

60 35 4. The committee shall submit a report to the general

61 1 assembly by January 10, 2025.

61 2 Sec. 83. EFFECTIVE DATE. The section of this division
61 3 of this Act amending 2023 Iowa Acts, chapter 112, section 7,
61 4 subsection 7, being deemed of immediate importance, takes
61 5 effect upon enactment.

Specifies that Division XX of the Bill that provides a \$3,000,000 FY 2024 supplemental appropriation is effective upon enactment.

61 6 Sec. 84. RETROACTIVE APPLICABILITY. The section of this
61 7 division of this Act amending 2023 Iowa Acts, chapter 112,
61 8 section 7, is retroactively applicable to July 1, 2023.

Specifies that Division XX of the Bill that provides a \$3,000,000 FY 2024 supplemental appropriation applies retroactively to July 1, 2023.

61 9 DIVISION XXI
61 10 NURSING FACILITY OVERSIGHT

61 11 Sec. 85. NEW SECTION 135C.35C NURSING FACILITIES — JOINT
61 12 TRAINING SESSIONS.

61 13 The department shall semiannually provide joint training
61 14 sessions for inspectors and nursing facilities to review at
61 15 least three of the ten most frequently issued federal citations
61 16 in the state during the immediately preceding calendar year.
61 17 The department shall develop a protocol to identify regional
61 18 citation patterns relating to complaints, standards, and
61 19 outcomes in the nursing facility inspection process. The
61 20 department shall include the state long-term care ombudsman,
61 21 or the state long-term care ombudsman's designee, and
61 22 representatives of each nursing facility provider association
61 23 in the state in the planning process for the joint training
61 24 sessions.

CODE: Requires the DIAL to semiannually provide joint training sessions for inspectors and nursing facilities to review at least 3 of the 10 most frequently issued federal citations in the State during the immediately preceding calendar year. Requires the DIAL to develop a protocol to identify regional citation patterns relating to complaints, standards, and outcomes in the nursing facility inspection process. Requires the DIAL to include the State Long-Term Care Ombudsman, or designee, and representatives of each nursing facility provider association in the State in the planning process for the joint training sessions.

61 25 Sec. 86. Section 135C.40, subsection 1, Code 2024, is
61 26 amended by adding the following new paragraph:
61 27 NEW PARAGRAPH d. (1) The department shall establish and
61 28 maintain a process to review each citation issued for immediate
61 29 jeopardy or substandard quality of care prior to issuance of
61 30 final findings under section 135C.40A. Representatives of the
61 31 nursing facility issued such a citation may participate in
61 32 the review to provide context and evidence for the department
61 33 to consider in determining if a final finding of immediate
61 34 jeopardy or substandard quality of care should be issued. The
61 35 review shall ensure consistent and accurate application of
62 1 federal and state inspection protocols and defined regulatory
62 2 standards.

CODE: Requires the DIAL to establish and maintain a process to review each citation for immediate jeopardy or substandard quality of care prior to issuance of final findings of an investigation or inspection. Allows representatives of nursing facilities that have been issued a citation to participate in the review.

62 3 (2) For the purposes of this paragraph:
62 4 (a) "Immediate jeopardy" means a situation in which the
62 5 provider's noncompliance with one or more requirements of
62 6 participation has caused, or is likely to cause, serious
62 7 injury, harm, impairment, or death to a resident.
62 8 (b) "Likely" means probable and reasonably to be expected,
62 9 and suggests a greater degree of probability than a mere risk,
62 10 potential, or possibility that a particular event will cause
62 11 serious injury, harm, impairment, or death to a resident.
62 12 (c) "Substandard quality of care" means the same as defined
62 13 in 42 C.F.R.§488.301.

Health and Human Services

General Fund

	Actual FY 2023 (1)	Estimated FY 2024 (2)	House Approp FY 2025 (3)	Hse Appr FY25 vs Est FY 2024 (4)	Page and Line # (5)
<u>Aging, Iowa Department on</u>					
Aging					
Aging Programs	\$ 11,304,082	\$ 0	\$ 0	\$ 0	
Office of LTC Ombudsman	1,149,821	0	0	0	
Total Aging, Iowa Department on	\$ 12,453,903	\$ 0	\$ 0	\$ 0	
<u>Public Health, Department of</u>					
Public Health					
Addictive Disorders	\$ 23,659,379	\$ 0	\$ 0	\$ 0	
Healthy Children and Families	5,816,681	0	0	0	
Chronic Conditions	4,258,373	0	0	0	
Community Capacity	6,519,306	0	0	0	
Essential Public Health Services	7,662,464	0	0	0	
Infectious Diseases	1,796,206	0	0	0	
Public Protection	4,466,601	0	0	0	
Resource Management	933,871	0	0	0	
Congenital & Inherited Disorders Registry	202,081	0	0	0	
Total Public Health, Department of	\$ 55,314,962	\$ 0	\$ 0	\$ 0	
<u>Veterans Affairs, Department of</u>					
Veterans Affairs, Dept. of					
General Administration	\$ 1,229,763	\$ 1,033,289	\$ 1,369,205	\$ 335,916	PG 1 LN 9
Cemetery Grounds Service	0	0	292,000	292,000	PG 1 LN 15
Home Ownership Assistance Program	2,000,000	2,200,000	2,200,000	0	PG 1 LN 27
Veterans County Grants	990,000	990,000	990,000	0	STANDING
Veterans Affairs, Dept. of	\$ 4,219,763	\$ 4,223,289	\$ 4,851,205	\$ 627,916	
Veterans Affairs, Dept. of					
Iowa Veterans Home	\$ 7,131,552	\$ 7,115,335	\$ 8,145,736	\$ 1,030,401	PG 1 LN 18
Total Veterans Affairs, Department of	\$ 11,351,315	\$ 11,338,624	\$ 12,996,941	\$ 1,658,317	
<u>Health and Human Services, Department of</u>					
HHS - Aging					
Aging Programs	\$ 0	\$ 11,799,361	\$ 0	\$ -11,799,361	
Office of LTC Ombudsman	0	1,148,959	0	-1,148,959	
Aging and Disability Services	0	0	19,088,714	19,088,714	PG 1 LN 35
HHS - Aging	\$ 0	\$ 12,948,320	\$ 19,088,714	\$ 6,140,394	
HHS - Assistance Payment					

Health and Human Services

General Fund

	Actual FY 2023 (1)	Estimated FY 2024 (2)	House Approp FY 2025 (3)	Hse Appr FY25 vs Est FY 2024 (4)	Page and Line # (5)
Family Investment Program/PROMISE JOBS	\$ 41,003,978	\$ 41,003,575	\$ 0	\$ -41,003,575	
Medical Assistance	1,510,127,388	1,543,626,779	1,651,307,614	107,680,835	PG 10 LN 27
Health Program Operations	17,446,343	17,446,067	0	-17,446,067	
State Supplementary Assistance	7,349,002	7,349,002	0	-7,349,002	
State Children's Health Insurance	38,661,688	38,661,688	0	-38,661,688	
Child Care Assistance	40,816,931	64,223,730	0	-64,223,730	
Child and Family Services	93,571,677	79,027,794	0	-79,027,794	
Adoption Subsidy	40,596,007	40,883,507	0	-40,883,507	
Family Support Subsidy	949,282	949,282	0	-949,282	
Conner Training	33,632	33,632	0	-33,632	
Volunteers	84,686	84,686	0	-84,686	
Child Abuse Prevention	202,081	232,570	232,570	0	STANDING
HHS - Assistance Payment	\$ 1,790,842,695	\$ 1,833,522,312	\$ 1,651,540,184	\$ -181,982,128	
HHS - Eldora State Training School					
Eldora Training School	\$ 17,606,871	\$ 17,568,511	\$ 0	\$ -17,568,511	
HHS - Cherokee Mental Health Institution					
Cherokee MHI	\$ 15,613,624	\$ 15,923,252	\$ 0	\$ -15,923,252	
HHS - Independence Mental Health Institution					
Independence MHI	\$ 19,688,928	\$ 19,811,470	\$ 0	\$ -19,811,470	
HHS - Glenwood Resource Center					
Glenwood Resource Center	\$ 16,288,739	\$ 16,255,132	\$ 0	\$ -16,255,132	
HHS - Woodward Resource Center					
Woodward Resource Center	\$ 13,409,294	\$ 13,389,577	\$ 0	\$ -13,389,577	
HHS - Civil Commitment Unit / Sexual Offenders					
Civil Commitment Unit for Sexual Offenders	\$ 13,891,276	\$ 14,865,337	\$ 0	\$ -14,865,337	
HHS - Community Services					
Child Support Services	\$ 15,942,885	\$ 15,914,329	\$ 0	\$ -15,914,329	
Field Operations	65,894,438	72,056,945	0	-72,056,945	
HHS - Community Services	\$ 81,837,323	\$ 87,971,274	\$ 0	\$ -87,971,274	
HHS - Human Services					
General Administration	\$ 15,842,189	\$ 18,913,662	\$ 0	\$ -18,913,662	
HHS Facilities	4,172,123	2,157,590	0	-2,157,590	
Commission of Inquiry	0	1,394	1,394	0	STANDING
Nonresident Mental Illness Commitment	12,530	142,802	142,802	0	STANDING
Behavioral Health	0	0	24,400,114	24,400,114	PG 3 LN 7
Community Access and Eligibility	0	0	68,043,944	68,043,944	PG 6 LN 12
Child Support Services	0	0	15,434,282	15,434,282	PG 8 LN 7

Health and Human Services

General Fund

	Actual FY 2023 (1)	Estimated FY 2024 (2)	House Approp FY 2025 (3)	Hse Appr FY25 vs Est FY 2024 (4)	Page and Line # (5)
Health Program Operations	0	0	39,597,231	39,597,231	PG 12 LN 26
State Child Care Assistance	0	0	34,966,931	34,966,931	PG 16 LN 24
Early Intervention and Supports	0	0	35,277,739	35,277,739	PG 17 LN 4
Child Protective Services	0	0	170,374,778	170,374,778	PG 17 LN 32
State Specialty Care	0	0	100,006,128	100,006,128	PG 20 LN 17
Administration and Compliance	0	0	21,194,894	21,194,894	PG 21 LN 11
HHS - Human Services	\$ 20,026,842	\$ 21,215,448	\$ 509,440,237	\$ 488,224,789	
HHS - Human Rights					
LiHEAP Weatherization Assistance Program – Standing	\$ 0	\$ 1	\$ 1	\$ 0	
Central Administration	0	186,913	0	-186,913	
Community Advocacy and Services	0	956,894	0	-956,894	
Criminal & Juvenile Justice	0	1,318,547	0	-1,318,547	
Single Grant Program	0	140,000	0	-140,000	
HHS - Human Rights	\$ 0	\$ 2,602,355	\$ 1	\$ -2,602,354	
HHS - Public Health					
Congenital & Inherited Disorders Registry	\$ 0	\$ 223,521	\$ 223,521	\$ 0	STANDING
Psychiatry Residency & Fellowship Program - Standing	0	1,200,000	1,200,000	0	STANDING
Addictive Disorders	0	23,656,992	0	-23,656,992	
Healthy Children and Families	0	5,815,491	0	-5,815,491	
Chronic Conditions	0	4,256,595	0	-4,256,595	
Community Capacity	0	7,435,682	0	-7,435,682	
Essential Public Health Services	0	7,662,464	0	-7,662,464	
Infectious Diseases	0	1,795,902	0	-1,795,902	
Public Protection	0	4,581,792	0	-4,581,792	
Resource Management	0	933,543	0	-933,543	
Public Health	0	0	22,916,821	22,916,821	PG 4 LN 23
HHS - Public Health	\$ 0	\$ 57,561,982	\$ 24,340,342	\$ -33,221,640	
Total Health and Human Services, Department of	\$ 1,989,205,591	\$ 2,113,634,970	\$ 2,204,409,478	\$ 90,774,508	
Total Health and Human Services	\$ 2,068,325,771	\$ 2,124,973,594	\$ 2,217,406,419	\$ 92,432,825	

Health and Human Services

Other Funds

	Actual FY 2023 <u>(1)</u>	Estimated FY 2024 <u>(2)</u>	Supp-House Appr FY 2024 <u>(1)</u>	House Approp FY 2025 <u>(3)</u>	Hse Appr FY25 vs Est FY 2024 <u>(4)</u>	Page and Line # <u>(5)</u>
<u>Public Health, Department of</u>						
Public Health						
Gambling Treatment Program - SWRF	\$ 1,750,000	\$ 0	\$ 0	\$ 0	\$ 0	
Total Public Health, Department of	\$ 1,750,000	\$ 0	\$ 0	\$ 0	\$ 0	
<u>Health and Human Services, Department of</u>						
HHS - Human Services						
FIP - TANF	\$ 2,123,750	\$ 4,881,085	\$ 0	\$ 0	\$ -4,881,085	
PROMISE JOBS - TANF	2,826,748	5,412,060	0	0	-5,412,060	
Field Operations - TANF	31,296,335	31,296,232	0	0	-31,296,232	
General Administration - TANF	3,744,000	3,744,000	0	0	-3,744,000	
Child & Family Services - TANF	31,192,889	32,501,575	0	0	-32,501,575	
Training & Technology - TANF	379,318	1,037,186	0	0	-1,037,186	
Categorical Eligibility SNAP - TANF	16,557	14,236	0	0	-14,236	
TANF General Transfer	0	0	0	12,988,627	12,988,627	PG 9 LN 1
Pregnancy Prevention - TANF	1,602,232	1,913,203	0	1,913,203	0	PG 9 LN 7
Community Access and Eligibility - TANF	0	0	0	5,000,000	5,000,000	PG 9 LN 24
ICAR System - TANF	0	0	0	5,000,000	5,000,000	PG 9 LN 31
FaDSS - TANF	2,885,440	2,888,980	0	2,888,980	0	PG 10 LN 1
Child Abuse Prevention - TANF	74,194	125,000	0	125,000	0	PG 10 LN 8
TANF Administration and Compliance	0	0	0	3,533,647	3,533,647	PG 10 LN 11
Child Care Assistance - TANF	26,205,412	47,166,826	0	47,166,826	0	PG 10 LN 16
Child Protective Service - TANF	0	0	0	62,364,100	62,364,100	PG 10 LN 18
Kinship Stipend - TANF	0	0	0	3,000,000	3,000,000	PG 10 LN 20
Child & Family Serv. (Supplemental) - TANF	0	0	3,000,000	0	0	PG 60 LN 3
HHS - Human Services	\$ 102,346,875	\$ 130,980,383	\$ 3,000,000	\$ 143,980,383	\$ 816,000,000	
HHS - Assistance Payment						
Behavioral Health System - RIF	0	0	0	3,000,000	3,000,000	
Health Program Operations - PSA	234,193	234,193	0	234,193	0	PG 13 LN 25
Medical Assistance - QATF	66,282,906	111,216,205	0	111,216,205	0	PG 14 LN 2
Medical Assistance - HHCAT	33,920,554	33,920,554	0	33,920,554	0	PG 14 LN 14
Medicaid Supplemental - MFF	150,000	150,000	0	150,000	0	PG 36 LN 3
Medical Assistance - HCTF	200,660,000	189,860,000	0	176,470,000	-13,390,000	PG 36 LN 35
HHS - Assistance Payment	\$ 301,247,653	\$ 335,380,952	\$ 0	\$ 324,990,952	\$ 884,507,747	
HHS - Public Health						
Gambling Treatment Program - SWRF	\$ 0	\$ 1,750,000	\$ 0	\$ 1,750,000	\$ 0	PG 3 LN 30
Total Health and Human Services, Department of	\$ 403,594,528	\$ 468,111,335	\$ 3,000,000	\$ 470,721,335	\$ 1,700,507,747	

Health and Human Services

Other Funds

	Actual FY 2023 <u>(1)</u>	Estimated FY 2024 <u>(2)</u>	Supp-House Appr FY 2024 <u>(1)</u>	House Approp FY 2025 <u>(3)</u>	Hse Appr FY25 vs Est FY 2024 <u>(4)</u>	Page and Line # <u>(5)</u>
Total Health and Human Services	\$ 405,344,528	\$ 468,111,335	\$ 3,000,000	\$ 470,721,335	\$ 1,700,507,747	

Health and Human Services

FTE Positions

	Actual FY 2023 (1)	Estimated FY 2024 (2)	House Approp FY 2025 (3)	Hse Appr FY25 vs Est FY 2024 (4)	Page and Line # (5)
Health and Human Services, Department of					
HHS - Aging					
Aging Programs	0.00	31.02	0.00	-31.02	
Office of LTC Ombudsman	0.00	12.00	0.00	-12.00	
HHS - Aging	<u>0.00</u>	<u>43.02</u>	<u>0.00</u>	<u>-43.02</u>	
HHS - Assistance Payment					
Family Investment Program/PROMISE JOBS	20.13	18.50	0.00	-18.50	
Medical Assistance	8.53	13.10	0.00	-13.10	
Health Program Operations	3.29	3.00	0.00	-3.00	
Child Care Assistance	2.73	5.22	0.00	-5.22	
Child and Family Services	4.62	5.00	0.00	-5.00	
HHS - Assistance Payment	<u>39.30</u>	<u>44.82</u>	<u>0.00</u>	<u>-44.82</u>	
HHS - Eldora State Training School					
Eldora Training School	165.87	206.82	0.00	-206.82	
HHS - Cherokee Mental Health Institution					
Cherokee MHI	148.97	167.49	0.00	-167.49	
HHS - Independence Mental Health Institution					
Independence MHI	163.46	184.20	0.00	-184.20	
HHS - Glenwood Resource Center					
Glenwood Resource Center	428.45	343.50	0.00	-343.50	
HHS - Woodward Resource Center					
Woodward Resource Center	477.35	545.76	0.00	-545.76	
HHS - Civil Commitment Unit / Sexual Offenders					
Civil Commitment Unit for Sexual Offenders	129.07	146.02	0.00	-146.02	
HHS - Community Services					
Child Support Services	415.14	423.00	0.00	-423.00	
Field Operations	1,519.26	1,589.00	0.00	-1,589.00	
HHS - Community Services	<u>1,934.40</u>	<u>2,012.00</u>	<u>0.00</u>	<u>-2,012.00</u>	
HHS - Human Services					
General Administration	279.17	323.67	0.00	-323.67	
HHS Administration	0.00	0.00	4,156.00	4,156.00	
HHS - Human Services	<u>279.17</u>	<u>323.67</u>	<u>4,156.00</u>	<u>3,832.33</u>	
HHS - Human Rights					
Central Administration	0.00	5.58	0.00	-5.58	
Community Advocacy and Services	0.00	7.53	0.00	-7.53	
Criminal & Juvenile Justice	0.00	7.57	0.00	-7.57	

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Health and Human Services

FTE Positions

	Actual FY 2023 (1)	Estimated FY 2024 (2)	House Approp FY 2025 (3)	Hse Appr FY25 vs Est FY 2024 (4)	Page and Line # (5)
HHS - Human Rights	0.00	20.68	0.00	-20.68	
HHS - Public Health					
Addictive Disorders	0.00	12.00	0.00	-12.00	
Healthy Children and Families	0.00	12.05	0.00	-12.05	
Chronic Conditions	0.00	11.00	0.00	-11.00	
Community Capacity	0.00	14.00	0.00	-14.00	
Infectious Diseases	0.00	6.00	0.00	-6.00	
Public Protection	0.00	59.00	0.00	-59.00	
Resource Management	0.00	4.00	0.00	-4.00	
HHS - Public Health	0.00	118.05	0.00	-118.05	
Total Health and Human Services, Department of	3,766.04	4,156.03	4,156.00	-0.03	

Health and Human Services

FTE Positions

	Actual FY 2023 (1)	Estimated FY 2024 (2)	House Approp FY 2025 (3)	Hse Appr FY25 vs Est FY 2024 (4)	Page and Line # (5)
<u>Aging, Iowa Department on</u>					
Aging					
Aging Programs	33.78	0.00	0.00	0.00	
Office of LTC Ombudsman	12.23	0.00	0.00	0.00	
Total Aging, Iowa Department on	46.00	0.00	0.00	0.00	
<u>Public Health, Department of</u>					
Public Health					
Addictive Disorders	8.65	0.00	0.00	0.00	
Healthy Children and Families	10.68	0.00	0.00	0.00	
Chronic Conditions	8.66	0.00	0.00	0.00	
Community Capacity	6.31	0.00	0.00	0.00	
Infectious Diseases	4.76	0.00	0.00	0.00	
Public Protection	140.08	0.00	0.00	0.00	
Resource Management	3.42	0.00	0.00	0.00	
Total Public Health, Department of	182.56	0.00	0.00	0.00	
<u>Veterans Affairs, Department of</u>					
Veterans Affairs, Dept. of					
General Administration	8.83	9.00	15.00	6.00	PG 1 LN 9
Total Veterans Affairs, Department of	8.83	9.00	15.00	6.00	
Total Health and Human Services	4,003.43	4,165.03	4,171.00	5.97	