Health and Human Services Appropriations Bill
House File 811

FINAL ACTION

April 24, 2009

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

NOTES ON BILLS AND AMENDMENTS (NOBA)

Available on line at http://www3.legis.state.ia.us/noba/index.jsp

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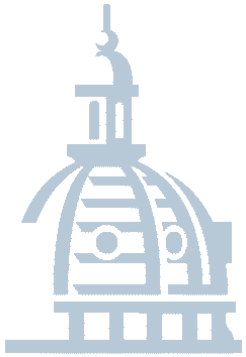

HOUSE FILE 811
HEALTH AND HUMAN SERVICES APPROPRIATIONS BILL

FUNDING SUMMARY

- Appropriates a total of $1.249 billion from the General Fund and 6,990.7 FTE positions to the Departments of Elder Affairs, Public Health, Human Services, and Veterans Affairs, and the Iowa Veterans Home. This is an increase of $25.1 million and a decrease of 136.8 FTE positions compared to the estimated net FY 2009 appropriations. This Bill provides for a reduction in the FY 2009 Medicaid appropriation of $52.0 million, a $6.0 supplemental appropriation to Broadlawns Medical Center from the IowaCare Account, and an increase of 20.8 FTE positions for the Iowa Veterans Home.
- Appropriates a total of $438.1 million from other funds. This is a decrease of $113.0 million compared to the estimated net FY 2009 appropriations. This includes:
  - A decrease of $7.3 million from the Gambling Treatment Fund to the Department of Public Health. This reflects the elimination of the Fund and the transfer of those monies to the General Fund. The appropriations are similar in amount for the two purposes within the Addictive Disorders budget unit of the DPH. (Page 3, Line 27; Page 5, Line 14; Page 84, Line 6; and Page 96, Line 2 through Page 100, Line 3)
  - $142.7 million from the Temporary Assistance to Needy Families (TANF) Fund to the Department of Human Services. This is no change compared to the estimated net FY 2009 appropriation. (Page 12, Line 15 through Page 15, Line 34)
  - $27.3 million from the Senior Living Trust Fund (SLTF) to the Departments of Elder Affairs, Human Services, and Inspections and Appeals, and the Iowa Finance Authority. This is a decrease of $95.0 million compared to the estimated net FY 2009 appropriation. (Page 63, Line 21 through Page 66, Line 16)
  - A decrease of $624,000 from the Property Tax Relief Fund to the Medicaid Program. This was a one-time FY 2009 appropriation. (Not part of this FY 2010 Bill)
  - $1.3 million from the Pharmaceutical Settlement Account to Medical Contracts. This is no change compared to the estimated net FY 2009 appropriation. (Page 66, Line 15)
  - $120.3 million from the IowaCare Account to the Department of Human Services (DHS), the University of Iowa Hospitals and Clinics, and Polk County Broadlawns Medical Center. This is an increase of $8.1 million compared to the estimated net FY 2009 appropriation. (Page 66, Line 25 through Page 69, Line 28)
  - $5.4 million from the Health Care Transformation Account (HCTA) to the DHS and Department of Elder Affairs (DEA). This is a decrease of $200,000 compared to the estimated net FY 2009 appropriation. (Page 69, Line 29 through Page 71 Line 21)
  - $118.8 million from the Health Care Trust Fund to various Departments. This is a decrease of $10.9 million compared to the estimated net FY 2009 appropriation. (Page 78, Line 3 through Page 84, Line 6)
  - Transfers $222,870 from the HCTF Community Capacity appropriation to the Department of Elder Affairs for unmet needs for elderly services. (Page 83, Line 14)

MAJOR INCREASES, DECREASES, AND TRANSFERS OF EXISTING PROGRAMS

Makes the following General Fund or other fund changes for FY 2010:

- ***Department of Elder Affairs:*** A decrease of $316,000 and 3.0 FTE positions compared to the estimated net FY 2009 General Fund appropriation. (Page 1, Line 4)
- ***Department of Public Health:*** A net increase of $25.3 million and a net decrease of 7.5 FTE positions compared to the estimated net FY 2009 General Fund appropriation. The significant changes include:
  - An increase of $25.6 million and 12.0 FTE positions for Addictive Disorders. (Page 3, Line 27)
  - A decrease of $336,000 and 2.0 FTE positions for Healthy Children and Families. (Page 6, Line 20)
  - An increase of $594,000 and a decrease of 2.0 FTE positions for Chronic Conditions. (Page 7, Line 14)
  - An increase of $2.4 million and 9.0 FTE positions for Community Capacity. (Page 8, Line 6)
  - A decrease of $750,000 for Elderly Wellness. (Page 9, Line 3)
  - An increase of $279,000 and 2.5 FTE positions for Environmental Hazards. (Page 9, Line 12)
  - A decrease of $1.2 million and 2.0 FTE positions for Infectious Diseases. (Page 9, Line 23)
  - An increase of $455,000 and 2.0 FTE positions for Public Protection. (Page 9, Line 29)
  - A decrease of $132,000 for Resource Management. (Page 10, Line 20)
- ***Department of Human Services:*** A net increase of $2.9 million and a net decrease of 147.2 FTE positions compared to the estimated net FY 2009 General Fund appropriation. The changes include:
  - A decrease of $7.5 million for the Family Investment Program. (Page 18, Line 21)
  - A decrease of $1.7 million for the Child Support Recovery Unit. (Page 20, Line 17)
  - A net increase of $84.3 million for the Medical Assistance Program. (Page 21, Line 25)
  - A decrease of $302,000 for Medical Contracts. (Page 28, Line 13)
  - An increase of $969,000 for the State Children's Health Insurance Program. (Page 29, Line 20)
  - A decrease of $521,000 for Medical Assistance and Children's Health Insurance Expansions. (Page 91, Line 24)
  - A decrease of $2.5 million for the Child Care Assistance Program. (Page 30, Line 1)
  - A decrease of $837,000 and 1.0 FTE position for the Toledo Juvenile Home. (Page 32, Line 27)
  - A decrease of $1.3 million for the Eldora Training School. (Page 32, Line 32)
  - An increase of $1.6 million for Child and Family Services. (Page 33, Line 7)
  - An increase of $1.2 million for the Adoption Subsidy Program. (Page 39, Line 32)
  - A decrease of $210,000 for the Family Support Subsidy Program. (Page 41, Line 7)
  - A decrease of $3.2 million for the four Mental Health Institutes. (Page 42, Lines 4 through Line 33)

MAJOR INCREASES, DECREASES, AND TRANSFERS OF EXISTING PROGRAMS (CONTINUED)

- A decrease of $2.9 million for the two State Resource Centers. (Page 43, Line 24 through Line 35)
- A decrease of $1.6 million for the State Cases Program. (Page 44, Line 35)
- An increase of $158,000 and 11.0 FTE positions for the Sexual Predator Commitment Program. (Page 47, Line 25)
- A decrease of $9.5 million and 178.7 FTE positions for Field Operations and General Administration. (Page 48, Lines 13 and 26)
- A decrease of $729,000 for Family Planning Funding. (Page 49, Line 31)
- A decrease of $97,000 for Pregnancy Counseling and Support Services. (Page 50, Line 11)

- ***Veterans Affairs:*** A net decrease of $2.8 million and a net increase of 20.8 FTE positions from the General Fund for the Department of Veterans Affairs compared to the estimated net FY 2009 appropriation. This includes:
  - An increase of $132,000 for the Department of Veterans Affairs. (Page 11, Line 3)
  - A decrease of $3.1 million and an increase of 20.8 FTE positions for the Iowa Veterans Home. (Page 11, Line 10)
  - An increase of $414,000 for the County Veterans Grant Program. (Page 12, Line 4)
  - Transfers $1.8 million from the Veterans Home to the Medical Assistance Program to annualize the FY 2009 hospital rebase. (Page 86, Line 32)

STUDIES AND INTENT LANGUAGE

- ***Department of Veterans Affairs:*** Requires the Iowa Veterans Home to adjust the incentive therapy program payment schedule. (Page 11, Line 22)
- ***Department of Human Services (DHS):***
  - Specifies legislative intent that the Department of Human Services (DHS) review expanding eligibility for the federal Food Assistance Program. (Page 18, Line 5)
  - Requires the Iowa Autism Council to work with the DHS to review the option of implementing a Medicaid waiver for autism services. (Page 27, Line 8)
  - Requires the DHS to issue a Request for Proposals (RFP) for a Medicaid correct coding initiative. (Page 27, Line 15)
  - Requires the DHS to request a Medicaid State Plan Amendment for applied behavioral analysis therapy to be effective for FY 2011. (Page 27, Line 24)
  - Permits the DHS to issue an RFP for a Medicaid transportation brokerage system. (Page 27, Line 31)
  - Specifies legislative intent regarding avoidance of a waiting list in FY 2010 with expectation of sufficient funding for child care subsidy assistance in FY 2011. (Page 30, Line 8)
  - Requires the DHS to work with juvenile courts and juvenile court services to improve communication and eliminate barriers. (Page 39, Line 19)

STUDIES AND INTENT LANGUAGE (CONTINUED)

- Requires the DHS to submit a proposal to close one of the Mental Health Institutes. (Page 42, Line 34)
- Requires the Department to staff a task force appointed by the Governor to review the four State Mental Health Institutes and collaborate with the DHS on a proposal to close one of the Mental Health Institutes. (Page 43, Line 10)
- Requires the Iowa Hospital Association to submit information to the Government Oversight Committee during the 2010 Legislative Session regarding the increased compensation and cost of employment for direct care hospital staff. (Page 52, Line 7)
- Requires the DHS to submit proposed rules that have a fiscal impact that were not included in the FY 2010 budget to the Chairpersons and Ranking Members of the Health and Human Services Appropriations Subcommittee and the Appropriations Committees prior to the submittal for the administrative rules process. (Page 60, Line 20)
- Requests the Legislative Council to establish an interim study committee for pharmacy-related issues. (Page 62, Line 9)
- Requires the Mental Health, Mental Retardation, Developmental Disabilities, and Brain Injury Commission and the Iowa Mental Health Planning Council to meet quarterly. (Page 77, Line 12)
- Requires the Direct Care Worker Association to submit a report and the Federal 990 Tax Form. (Page 82, Line 33)
- Requires the Executive Committee of the Electronic Health Information Advisory Council to review barriers in State law related to electronic health records by December 15, 2009. (Page 121, Line 32)

- ***All Four Departments:***
  - Requires the Departments of Elder Affairs, Public Health, Human Services, Veterans Affairs, and Iowa Veterans Home to:
    - Develop a plan for maximizing efficiencies within the budgets for FY 2011. (Page 60, Line 35)
    - Retain to the extent possible positions providing direct services to the public in reductions in full-time equivalent positions. (Page 61, Line 10)
- ***Other:***
  - Requires the Chairpersons of the Health and Human Services Appropriations Subcommittee to appoint a stakeholder task force to address the adult mental health and developmental disabilities system. (Page 76, Line 34)

SIGNIFICANT CHANGES TO THE CODE OF IOWA

- Specifies legislative intent for the DHS to initiate an evaluation system for nursing facility performance. (Page 58, Line 6)
- Adds reduction or elimination of a mobile mental health crisis team to the criteria for eligibility of funding from the Mental Health Risk Pool. (Page 72, Line 15)

SIGNIFICANT CHANGES TO THE CODE OF IOWA (CONTINUED)

- Reduces the FY 2010 appropriation in HF 2700 (FY 2009 Standing Appropriations Act) for mental health allowed growth and provides for the FY 2010 distribution of the funds. (Page 72, Line 21 through Page 76, Line 33)
- Reduces the amount of funding transferred from the General Fund to the Health Care Trust Fund. (Page 83, Line 26)
- Increases the FY 2009 appropriation from the IowaCare Account to the Polk County Broadlawns Medical Center. Increases the amount of tax levy proceeds from the Medical Center to the Treasurer of State. (Page 84, Line 8 through Page 85, Line 27)
- Requires the DHS to revise the projects for the emergency mental health crisis system and a mental health services system for children and youth and to continue both projects for 24 months. (Page 88, Line 9)
- Reduces the FY 2009 nursing facility budget cap in the Medicaid Program. (Page 89, Line 23)
- Includes veterans in the existing Department of Public Health Viral Hepatitis Program. (Page 92, Line 26)
- Requires the Commission on Elder Affairs (Commission on Aging beginning July 1, 2009) to perform the duties of the Senior Living Coordinating Unit and repeals the Senior Living Coordinating Unit. (Page 93, Line 26 through Page 96, Line 1)
- Increases the amount of gambling revenue deposited in the General Fund from $60.0 million to $66.0 million to reflect funding of gambling treatment programs from the General Fund. (Page 96, Line 4)
- Eliminates the Gambling Treatment Fund and various statutory references. (Page 96, Line 30 through Page 100, Line 3)
- Transfers the Child Death Review Team to the Office of the State Medical Examiner. (Page 100, Line 4 through Page 102, Line 18)
- Implements the Public Health Modernization initiative. Creates the Governmental Public Health Advisory Council and Committee, and the Governmental Public Health System Fund. (Page 102, Line 19 through Page 114, Line 32)
- Creates a Nonparticipating Provider Reimbursement Fund within the IowaCare Program and provides that certain hospitals may be eligible for reimbursement in FY 2011 with federal approval. (Page 114, Line 33 through Page 119, Line 14)
- Permits certain examination results to be available to the Board of Cosmetology Arts and Sciences. (Page 119, Line 17)
- Eliminates the retailer revenue for the Electronic Benefit Transfer from the Food Assistance Program. (Page 119, Line 25)
- Requires the Department of Human Services to apply certain background checks to certain children centers. (Page 120, Line 11)
- Strikes Division II of SF 319 (Child Support Omnibus Bill) to reflect a change in federal rules. (Page 121, Line 16)

FY 2009 CARRYFORWARDS, REDUCTIONS, OR SUPPLEMENTALS

- ***Department of Elder Affairs:***
  - Permits the carryforward of any remaining FY 2009 funds from a one-time appropriation for child welfare training expenditures. (Page 87, Line 32)
  - Permits the carryforward of any remaining FY 2009 funds from the appropriation for Pregnancy Counseling. (Page 89, Line 14)
  - Permits the carryforward of $216,000 from the FY 2009 Senior Living Trust Fund appropriation to FY 2010 and FY 2011 for matching available federal nutrition funding from the American Reinvestment and Recovery Act of 2009. (Page 89, Line 29)
- ***Department of Public Health***:
  - A combination of $1.0 million from the General Fund, Health Care Trust Fund, and the Healthy Iowans Tobacco Trust FY 2009 appropriations is carried forward to FY 2010 for addictive disorders. (Page 85, Line 32; Page 86, Line 7; Page 90, Line 31)
- ***Department of Veterans Affairs***:
  - Eliminates the FY 2009 FTE cap for the Iowa Veterans Home. (Page 86, Line 16)
  - Permits carryforward of funds remaining from the Vietnam Veteran Bonus and the Injured Veterans Grant Program appropriations to FY 2010. (Page 91, Line 5 and Page 91, Line 14)
- ***Department of Human Services***:
  - Increases the FY 2009 IowaCare Account appropriation for Polk County Broadlawns Medical Center. (Page 84, Line 8)
  - Decreases the FY 2009 General Fund appropriation for Medicaid. (Page 87, Line 20)
  - The remainder of the FY 2009 State Supplementary Assistance appropriation is carried forward to FY 2010 for the same purpose. (Page 89, Line 30)
  - Strikes the FY 2009 transfer of $3.0 million from the HCTA to the IowaCare Account. (Page 90, Line 5)
  - Requires the remaining FY 2009 General Fund appropriation for Medicaid to carry forward to FY 2010 in lieu of being transferred to the Senior Living Trust Fund. (Page 90, Line 14)
  - Decreases the previously enacted FY 2010 appropriation for the Medicaid, Healthy and Well Kids in Iowa (hawk-i), and hawk-i Expansion Programs. (Page 91, Line 24)

EFFECTIVE DATES

- The following changes take effect on enactment:
  - Requirement that the DHS and juvenile court services develop an FY 2009 funding distribution plan. (Page 63, Line 8)
  - Carryforward of funds in the Department of Public Health relating to Addictive Disorders. (Page 85, Line 32; Page 86, Line 7; Page 90, Line 31; Page 92, Line 8)
  - Elimination of the FY 2009 FTE cap for the Iowa Veterans Home. (Page 86, Line 16)
  - Decrease in the FY 2009 General Fund appropriation for Medicaid. (Page 87, Line 19)
  - Extension of the emergency and children's mental health projects. (Page 88, Line 8)

EFFECTIVE DATES (CONTINUED)

- Carryforward of the FY 2009 State Supplementary Assistance Program appropriation to FY 2010. (Page 88, Line 30)
- Change in the FY 2009 Medicaid nursing facility budget cap. (Page 89, Line 23)
- Carryforward of the FY 2009 Senior Living Trust Fund appropriation of $216,000. (Page 89, Line 30)
- Elimination of the FY 2009 Health Care Transformation Account appropriation to the IowaCare Account. (Page 90, Line 5)
- Carryforward of the FY 2009 Medicaid appropriation for FY 2010 Medicaid expenditures. (Page 90, Line 14)
- Carryforward of the FY 2008 Vietnam Veterans Bonus funding to FY 2010 for the same purpose. (Page 91, Line 6)
- Carryforward of the FY 2007 Injured Veterans Grant Program funding to FY 2010 for the same purpose. (Page 91, Line 15)
- Decrease in the FY 2010 Medicaid, hawk-i, and hawk-i Expansion Program appropriation. (Page 91, Line 24)
- Transfer of the funds remaining in the Child Care Credit Fund to the General Fund. (Page 92, Line 4)

EFFECTIVE DATE AND RETROACTIVITY PROVISION

- The increases in the FY 2009 IowaCare Account appropriation to Polk County Broadlawns Medical Center and the hospital tax levy transferred from Polk County to the Treasurer of State are effective on enactment and retroactive to July 1, 2008. (Page 85, Line 24)
- Changes related to Medicaid federal compliance with continuous eligibility for children are effective on enactment and retroactive to July 1, 2008. (Page 121, Line 7)
- The change repealing certain sections of SF 319 regarding child support enforcement information is effective on enactment and retroactive to March 23, 2009.

ENACTMENT DATE

- This Bill was approved by the General Assembly on April 24, 2009.

House File 811 provides for the following changes to the Code of Iowa.

Page #	Line #	Bill Section	Action	Code Section	Description
3	12	1.6	Nwthstnd	Sec. 231.33(19) and 231.63	AAA Board Training and End of Life Planning
13	2	5.2	Nwthstnd	Sec. 8.33	Nonreversion of Contract Services Funds
13	16	5.3	Nwthstnd	Sec. 8.33	FY 2008 FaDSS Carryforward
19	25	7.4	Nwthstnd	Sec. 8.39	DHS Authority to Transfer TANF Funds
21	12	8.4	Nwthstnd	Sec. 598.22A	Retires Child Support Debt
45	31	24.4	Nwthstnd	Sec. 8.33	State Cases Program Carryforward
49	7	28.3	Nwthstnd	Sec. ALL, Chapter 217	Reorganization of Service Delivery
53	18	32.1(j)	Nwthstnd	Sec. ALL	Anesthesiologist Reimbursement Rate Increase
53	22	32.1(k)	Nwthstnd	Sec. 249A.20	Provider Rates
56	23	32.1	Nwthstnd	Sec. ALL	Inflation Rate for ICF/MR Reimbursement Rates
57	15	33	Amends	Sec. 33.4, Chapter 1187, 2008 Iowa Acts	Nursing Facility Reimbursement
61	16	37	Nwthstnd	Sec. ALL	State Employees Meal Reimbursement
61	26	38	Nwthstnd	Sec. ALL	Out-of-State Travel
64	32	43.2	Nwthstnd	Sec. 249H.7	Senior Living Programs
67	27	48.1(b)	Nwthstnd	Sec. ALL	IowaCare Appropriation Payments
71	3	49	Nwthstnd	Sec. 8.39(1)	Funds Transfer
71	34	52	Nwthstnd	Sec. 8.33	Carryforward of Medicaid Funds
72	15	53	Amends	Sec. 426B.5(2)(i)(3)	Mental Health Risk Pool Requirements
72	21	54	Amends	Sec. 1.1, Chapter 1191, 2008 Iowa Acts	Mental Health Allowed Growth
73	7	55.1	Amends	Sec. 1, Chapter 1191, 2008 Iowa Acts	Purchase of Services Contracts
73	19	55.2	Adds	Sec. 1.2, Chapter 1191, 2008 Iowa Acts	Mental Health Allowed Growth
74	16	55.3	Adds	Sec. 1.3, Chapter 1191, 2008 Iowa Acts	Mental Health Allowed Growth

Page #	Line #	Bill Section	Action	Code Section	Description
74	23	55.4-6	Adds	Sec. 1.4, Chapter 1191, 2008 Iowa Acts	Mental Health Allowed Growth
83	26	62	Amends	Sec. 453A.35(1)	Transfer of Tobacco Revenue to the Health Care Trust Fund
84	8	63	Amends	Sec. 44.3, Chapter 1187, 2008 Iowa Acts	IowaCare Broadlawns
84	29	64.1	Nwthstnd	Sec. 249J.24(6)(a)(1)	IowaCare Broadlawns Tax Revenue Collection
85	6	64.2	Nwthstnd	Sec. 249J.24(6)(a)(2)	IowaCare Broadlawns Tax Revenue Collection
87	11	69	Adds	Sec. 5, Chapter 1187, 2008 Iowa Acts	FIP Carryforward
87	20	70	Amends	Sec. 9(2), Chapter 1187, 2008 Iowa Acts	Medicaid Deappropriation
88	9	72	Adds	Sec. 9(20), Chapter 1187, 2008 Iowa Acts	Emergency and Children's Mental Health Services
88	24	73	Adds	Sec. 9.25, Chapter 1187, 2008 Iowa Acts	Medicaid Appropriation
88	30	74	Amends	Sec. 12, Chapter 1187, 2008 Iowa Acts	State Supplementary Assistance Carryforward
89	15	76	Adds	Sec. 30, Chapter 1187, 2008 Iowa Acts	Pregnancy Counseling Carryforward
89	23	77	Amends	Sec. 32.1(a)(1), Chapter 1187, 2008 Iowa Acts	Nursing Facility Cap
89	30	78	Adds	Sec. 39, Chapter 1187, 2008 Iowa Acts	Elder Affairs Senior Living Trust Carryforward
90	5	79	Amends	Sec. 46, Chapter 1187, 2008 Iowa Acts	IowaCare Transfer
90	14	80	Amends	Sec. 50, Chapter 1187, 2008 Iowa Acts	Medicaid Carryforward
91	24	84	Amends	Sec. 16, Chapter 1188, 2008 Iowa Acts	Covering All Children Appropriation
92	26	88	Amends	Sec. 135.19	Hepatitis C Awareness Program
93	25	89	Repeals	Sec. 135.2	Hepatitis C Awarness Program
93	28	90	Amends	Sec. 231.58	Senior Living Coordinating Unit
94	5	91	Amends	Sec. 249H.3(6)(b)	Senior Living Coordinating Unit
94	12	92	Amends	Sec. 249H.3(8)(b)	Senior Living Coordinating Unit

Page #	Line #	Bill Section	Action	Code Section	Description
94	19	93	Repeals	Sec. 249H.3(12)	Senior Living Coordinating Unit
94	21	94	Repeals	Sec. 249H.4(6)	Senior Living Coordinating Unit
94	23	95	Amends	Sec. 249H.7(1)	Senior Living Coordinating Unit
95	3	96	Amends	Sec. 249H.7(2)(1)	Senior Living Coordinating Unit
95	9	97	Amends	Sec. 249H.7(2)(c)	Senior Living Coordinating Unit
95	16	98	Amends	Sec. 249H.9(1)	Senior Living Coordinating Unit
95	25	99	Amends	Sec. 249H.10	Senior Living Coordinating Unit
96	4	100	Amends	Sec. 8.57(6)(e)(1)	Gambling Funds Transfer to State General Fund
96	30	101	Amends	Sec. 99D.7(22)	Gambling Treatment Fund
97	13	102	Repeals	Sec. 99D.15(5)	Gambling Treatment Fund
97	15	103	Amends	Sec. 99F.4(22)	Gambling Treatment Fund
97	33	104	Repeals	99F.11(3)(c)	Gambling Treatment Fund
97	35	105	Amends	Sec. 99G.39(1)	Gambling Treatment Fund
98	18	106	Amends	Sec. 135.150	Gambling Treatment Fund
100	6	108	Amends	Sec. 135.43(1)	Child Death Review Team Duties for State Medical Examiner
100	13	109	Amends	Sec. 135.43(2)	Child Death Review Team Duties for State Medical Examiner
100	30	110	Amends	Sec. 135.43(4)	Child Death Review Team Duties for State Medical Examiner
101	4	111	Amends	Sec. 135.43(7 and 8)	Child Death Review Team Duties for State Medical Examiner
102	6	112	Adds	Sec. 691.6(10)	Child Death Review Team Duties for State Medical Examiner
103	16	115	Adds	Sec. 135A.1	Public Health Modernization
103	19	116	Adds	Sec. 135A.2	Public Health Modernization
105	12	117	Adds	Sec. 135A.3	Public Health Modernization
105	25	118	Adds	Sec. 135A.4	Public Health Modernization
108	16	119	Adds	Sec. 135A.5	Public Health Modernization
110	10	120	Adds	Sec. 135A.6	Public Health Modernization
111	22	121	Adds	Sec. 135A.7	Public Health Modernization
112	27	122	Adds	Sec. 135A.8	Public Health Modernization
113	31	123	Adds	Sec. 135A.9	Public Health Modernization
114	15	124	Adds	Sec. 135A.10	Public Health Modernization

Page #	Line #	Bill Section	Action	Code Section	Description
114	27	125	Adds	Sec. 135A.11	Public Health Modernization
115	1	127.1	Amends	Sec. 249J.24A(1)	IowaCare Nonparticipating Providers Reimbursement
115	35	127.2	Amends	Sec. 249J.24A(2)	IowaCare Nonparticipating Providers Reimbursement
116	23	127.3	Amends	Sec. 249J.24A(3)	IowaCare Nonparticipating Providers Reimbursement
117	19	127.4	Amends	Sec. 249J.24A(4)	IowaCare Nonparticipating Providers Reimbursement
119	4	128.2	Nwthstnd	Sec. 128, HF 811, FY 2010 Health and Human Services Appropriations Bill	IowaCare Renewal
119	25	130	Amends	Sec. 234.12A(1)	Eliminates EBT Fee
120	29	132	Amends	Sec. 249A.3(14)	Medicaid Continuous Eligibility
121	16	133	Repeals	Sec. Various, SF 319, 2009 Iowa Acts	Child Support Repeal
122	30	138	Repeals	Sec. 237A.28 and 422.100	Child Care Tax Credit Repeal

PG LN	House File 811	Explanation
1 1	DIVISION I	
1 2	GENERAL FUND AND BLOCK GRANT APPROPRIATIONS	
1 3	ELDER AFFAIRS	
1 4	Section 1. DEPARTMENT OF ELDER AFFAIRS. There is	
1 5	appropriated from the general fund of the state to the	
1 6	department of elder affairs for the fiscal year beginning July	
1 7	1, 2009, and ending June 30, 2010, the following amount, or so	
1 8	much thereof as is necessary, to be used for the purposes	
1 9	designated:	
1 10	For aging programs for the department of elder affairs and	General Fund appropriation to the Department of Elder Affairs for FY 2010.
1 11	area agencies on aging to provide citizens of Iowa who are 60	
1 12	years of age and older with case management for the frail	
1 13	elderly only if the monthly cost per client for case	
1 14	management for the frail elderly services provided does not	
1 15	exceed the amount specified in this section, resident advocate	
1 16	committee coordination, employment, and other services which	
1 17	may include but are not limited to adult day services, respite	
1 18	care, chore services, telephone reassurance, information and	
1 19	assistance, and home repair services, and for the construction	
1 20	of entrance ramps which make residences accessible to the	
1 21	physically handicapped, and for salaries, support,	
1 22	administration, maintenance, and miscellaneous purposes, and	
1 23	for not more than the following full=time equivalent	
1 24	positions:	
1 25	..... $ 4,958,230	
1 26	..... FTEs 37.50	
		DETAIL: This is a net decrease of $316,214 and 3.00 FTE positions compared to the estimated net FY 2009 appropriation. This includes: • A decrease of $250,000 and 2.00 FTE positions to eliminate the Office of Substitute Decision Maker. • A decrease of $200,000 and 1.00 FTE position to eliminate the Aging and Disability Resource Center. • A decrease of $75,000 to eliminate the Long-Term Care Public Awareness Campaign. • A decrease of $19,000 to eliminate Area Agency on Aging (AAA) Board Training. • A decrease of $82,112 to eliminate AAA administration funding. • A decrease of $20,237 to the Retired Senior Volunteer Program. • An increase of $220,000 to be used to meet unmet home and community-based service needs for seniors. • An increase of $110,135 to replace savings identified in FY 2009.
1 27	1. Funds appropriated in this section may be used to	Permits the use of funds appropriated in this Subsection to
1 28	supplement federal funds under federal regulations. To	supplement federal funds for elderly services if those services are approved by an Area Agency on Aging. Requires local Area Agencies

PG LN	House File 811	Explanation
1 29	receive funds appropriated in this section, a local area	on Aging to match the funds for aging programs and services.
1 30	agency on aging shall match the funds with moneys from other	
1 31	sources according to rules adopted by the department. Funds	
1 32	appropriated in this section may be used for elderly services	
1 33	not specifically enumerated in this section only if approved	
1 34	by an area agency on aging for provision of the service within	
1 35	the area.	
2 1	2. a. Of the funds appropriated in this section,	Requires $1,385,015 to be transferred to the Department of Human Services (DHS) in equal amounts on a quarterly basis for Case Management reimbursement under the Medicaid Elderly Waiver for the Case Management Program for the Frail Elderly.
2 2	$1,385,015 shall be transferred to the department of human	
2 3	services in equal amounts on a quarterly basis for	
2 4	reimbursement of case management services provided under the	
2 5	medical assistance elderly waiver. The department of human	DETAIL: Maintains the current allocation and transfer levels.
2 6	services shall adopt rules for case management services	
2 7	provided under the medical assistance elderly waiver in	
2 8	consultation with the department of elder affairs.	
2 9	b. The monthly cost per client for case management for the	Limits the maximum cost per client to $70.00 per member, per month. If the Department of Human Services adopts rules to revise the reimbursement methodology for case management, the $70.00 cap is eliminated.
2 10	frail elderly services provided shall not exceed an average of	
2 11	$70. However, if the department of human services adopts	
2 12	administrative rules revising the reimbursement methodology to	
2 13	include 15 minute units, 24=hour on=call, and other	
2 14	requirements consistent with federal regulations, the $70	
2 15	monthly cap shall be eliminated and replaced with a quarterly	
2 16	projection of expenditures and reimbursement revisions	
2 17	necessary to maintain expenditures within the amounts budgeted	
2 18	under the appropriations made for the fiscal year for the	
2 19	medical assistance program.	
2 20	c. The department of human services shall review	Requires the Department of Human Services to review expenditure for reimbursement of case management services under the Medicaid Elderly Waiver on a quarterly basis and adjust to provide reimbursements within the appropriation.
2 21	projections for state funding expenditures for reimbursement	
2 22	of case management services under the medical assistance	
2 23	elderly waiver on a quarterly basis and shall determine if an	
2 24	adjustment to the medical assistance reimbursement rates are	
2 25	necessary to provide reimbursement within the state funding	

PG LN	House File 811	Explanation
2 26	amounts budgeted under the appropriations made for the fiscal	
2 27	year for the medical assistance program. Any temporary	
2 28	enhanced federal financial participation that may become	
2 29	available for the medical assistance program during the fiscal	
2 30	year shall not be used in projecting the medical assistance	
2 31	elderly waiver case management budget. The department of	
2 32	human services shall revise such reimbursement rates as	
2 33	necessary to maintain expenditures for medical assistance	
2 34	elderly waiver case management services within the state	
2 35	funding amounts budgeted under the appropriations made for the	
3 1	fiscal year for the medical assistance program.	
3 2	3. Of the funds appropriated in this section, $179,961	Requires a transfer of $179,961 to the Iowa Commission on Volunteer Services in the Department of Economic Development for the Retired Senior Volunteer Program (RSVP).
3 3	shall be transferred to the department of economic development	
3 4	for the Iowa commission on volunteer services to be used for	
3 5	the retired and senior volunteer program.	DETAIL: This is a decrease of $20,237 compared to the FY 2009 allocation.
3 6	4. The department shall continue the elder abuse	Requires the Department to continue the Elder Abuse Initiative.
3 7	initiative program established pursuant to section 231.56A.	
3 8	5. In addition to any other funds appropriated in this	Allocates $220,000 for unmet home and community-based services needs as identified by the Area Agencies on Aging.
3 9	section for these purposes, $220,000 shall be used to provide	
3 10	for elder unmet home and community=based services needs as	
3 11	identified in reports submitted by the area agencies on aging.	
3 12	6. During the fiscal year beginning July 1, 2009,	CODE: Notwithstands requirements relating to Departmental training of AAA Boards and End of Life Information.
3 13	notwithstanding section 231.33, subsection 19, relating to	
3 14	departmental training of area agency on aging boards of	
3 15	directors and section 231.63 relating to the development of	
3 16	end=of=life care information, the department is not required	
3 17	to comply with these requirements if funding is not available.	

PG LN	House File 811	Explanation
3 18	HEALTH	
3 19	Sec. 2. DEPARTMENT OF PUBLIC HEALTH. The allocations made	
3 20	in this section may include amounts carried forward from	
3 21	appropriations and allocations made for the same purposes in	
3 22	the previous fiscal year. There is appropriated from the	
3 23	general fund of the state to the department of public health	
3 24	for the fiscal year beginning July 1, 2009, and ending June	
3 25	30, 2010, the following amounts, or so much thereof as is	
3 26	necessary, to be used for the purposes designated:	
3 27	1. ADDICTIVE DISORDERS	General Fund appropriation to addictive disorders programs.
3 28	For reducing the prevalence of use of tobacco, alcohol, and	
3 29	other drugs, and treating individuals affected by addictive	
3 30	behaviors, including gambling, and for not more than the	
3 31	following full=time equivalent positions:	
3 32	..... $ 28,652,500	
3 33	..... FTEs 18.00	

DETAIL: This is a net increase of $25,616,583 and 12.00 FTE positions compared to the estimated net FY 2009 appropriation. An additional $2,748,692 is provided to addictive disorders programs from the Health Care Trust Fund in Division IV. The General Fund changes include:

- A decrease of $163,393 for a general reduction for addictive disorders programs.
- A decrease of $1,000,000 for tobacco use prevention, cessation, and treatment to reflect available carryforward.
- The following increases were formerly funded by the Healthy Iowans Tobacco Trust (HITT) Fund that has been eliminated:
  - $6,555,385 for tobacco use prevention, cessation, and treatment.
  - $13,057,282 for substance abuse treatment.
  - $993,487 for substance abuse prevention for kids.
- An increase of $6,173,823 to reflect elimination of the Gambling Treatment Fund.
- An increase of 12.00 FTE positions to adjust for anticipated utilization for FY 2010 and to include FTEs formerly funded from the HITT fund.

PG LN	House File 811	Explanation
3 34 3 35 4 1 4 2	a. Of the funds appropriated in this subsection, $8,028,214 shall be used for the tobacco use prevention and control initiative, including efforts at the state and local levels, as provided in chapter 142A.	Requires $8,028,214 to be used for tobacco use prevention, cessation, and treatment. DETAIL: This is a decrease of $450,051 compared to the total FY 2009 allocations. In FY 2009, $1,550,000 of this allocation was funded by the HITT Fund.
4 3 4 4 4 5 4 6 4 7 4 8	(1) The director of public health shall dedicate sufficient resources to promote and ensure retailer compliance with tobacco laws and ordinances relating to persons under 18 years of age, and shall prioritize the state's compliance in the allocation of available funds to comply with 42 U.S.C. 300x=26 and section 453A.2.	Requires the Director of the Department of Public Health to promote and ensure retailer compliance with tobacco laws.
4 9 4 10 4 11 4 12 4 13 4 14 4 15	(2) Of the full=time equivalent positions authorized in this subsection, 2.00 full=time equivalent positions shall be utilized to provide for enforcement of tobacco laws, regulations, and ordinances under a chapter 28D agreement entered into between the Iowa department of public health and the alcoholic beverages division of the department of commerce.	Requires 2.00 FTE positions to be used jointly by the Department of Public Health and the Alcoholic Beverages Division of the Department of Commerce for enforcement of tobacco laws.
4 16 4 17 4 18	b. Of the funds appropriated in this subsection, $17,546,252 shall be used for substance abuse treatment and prevention.	Allocates $17,546,252 for substance abuse treatment and prevention. DETAIL: This is a decrease of $2,600,897 compared to the total FY 2009 allocations. In FY 2009, $14,850,000 of this allocation was funded by the HITT Fund.
4 19 4 20 4 21 4 22	(1) Of the funds allocated in this lettered paragraph, $993,487 shall be used for the public purpose of a grant program to provide substance abuse prevention programming for children.	Allocates $993,487 for substance abuse prevention programs for children. DETAIL: This is a decrease of $56,513 compared to the FY 2009 allocation for a general reduction. This allocation was previously funded by the HITT Fund.
4 23	(a) Of the funds allocated in this subparagraph, $473,100	Requires an allocation of $473,100 for substance abuse prevention

PG LN	House File 811	Explanation
4 24 4 25 4 26 4 27 4 28 4 29 4 30	shall be utilized for the public purpose of providing grant funding for organizations that provide programming for children by utilizing mentors. Programs approved for such grants shall be certified or will be certified within six months of receiving the grant award by the Iowa commission on volunteer services as utilizing the standards for effective practice for mentoring programs.	programs for children to be used for programs that utilize mentors. Requires the programs that receive this funding to be verified within six months of receiving grants by the Iowa Commission on Volunteer Services as using effective standards for mentoring programs. DETAIL: This is a decrease of $26,900 compared to the FY 2009 allocation for a general reduction. This allocation was previously funded by the HITT Fund.
4 31 4 32 4 33 4 34 4 35 5 1 5 2	(b) Of the funds allocated in this subparagraph, $473,100 shall be utilized for the public purpose of providing grant funding for organizations that provide programming that includes youth development and leadership. The programs shall also be recognized as being programs that are scientifically based with evidence of their effectiveness in reducing substance abuse in children.	Requires an allocation of $473,100 for substance abuse prevention programs for children to be used to provide programs that include youth and character development, and leadership. Requires the programs to be recognized as scientifically-based with evidence of effectiveness in reducing substance abuse in children. DETAIL: This is a decrease of $26,900 compared to the FY 2009 allocation for a general reduction. This allocation was previously funded by the HITT Fund.
5 3 5 4	(c) The Iowa department of public health shall utilize a request for proposals process to implement the grant program.	Requires the Department of Public Health to issue a Request for Proposals (RFP) to determine grant recipients for the funds appropriated for substance abuse prevention programs for children.
5 5 5 6	(d) All grant recipients shall participate in a program evaluation as a requirement for receiving grant funds.	Requires substance abuse prevention programs for children to participate in program evaluations.
5 7 5 8 5 9	(e) Of the funds allocated for the grant program, $47,287 shall be used to administer substance abuse prevention grants and for program evaluations.	Requires $47,287 of the amount appropriated for substance abuse prevention programs for children to be used to administer prevention program evaluations. DETAIL: This is a decrease of $2,713 compared to the FY 2009 allocation for a general reduction. This allocation was previously funded by the HITT Fund.
5 10	(2) It is the intent of the general assembly that from the	Specifies it is the intent of the General Assembly that individuals with

PG LN	House File 811	Explanation
5 11	moneys allocated in this lettered paragraph persons with a	a diagnosis of both substance abuse and gambling addiction are
5 12	dual diagnosis of substance abuse and gambling addictions	required to be given priority in treatment services from the funds
5 13	shall be given priority in treatment services.	appropriated in this Section.
5 14	c. (1) Of the funds appropriated in this subsection,	Allocates $4,078,035 for gambling addiction treatment.
5 15	$4,078,035 shall be used for funding of gambling treatment,	
5 16	including administrative costs and to provide programs which	DETAIL: This is a decrease of $702,363 compared to the FY 2009
5 17	may include but are not limited to outpatient and follow=up	estimated allocation. Programs that were previously funded by the
5 18	treatment for persons affected by problem gambling,	eliminated Gambling Treatment Fund will now be funded by the
5 19	rehabilitation and residential treatment programs, information	General Fund. The Department of Public Health is permitted to use a
5 20	and referral services, education and preventive services, and	maximum of $100,000 for licensing of gambling treatment programs.
5 21	financial management services. Of the amount allocated in	
5 22	this lettered paragraph, up to $100,000 may be used for the	
5 23	licensing of gambling treatment programs as provided in	
5 24	section 135.150.	
5 25	(2) (a) Notwithstanding any provision to the contrary, to	Requires the Department of Public Health to implement a process to
5 26	standardize the availability, delivery, cost of delivery, and	create a system for delivery of treatment services. Requires the
5 27	accountability of gambling and substance abuse treatment	process to include the establishment of joint licensure for gambling
5 28	services statewide, the department shall continue	and substance abuse treatment programs. Requires the process to
5 29	implementation of a process to create a system for delivery of	be completed by July 1, 2010.
5 30	the treatment services in accordance with the requirements	
5 31	specified in 2008 Iowa Acts, chapter 1187, section 3,	
5 32	subsection 4. To ensure the system provides a continuum of	
5 33	treatment services that best meets the needs of Iowans, the	
5 34	gambling and substance abuse treatment services in an area may	
5 35	be provided either by a single agency or by separate agencies	
6 1	submitting a joint proposal. The process shall be completed	
6 2	by July 1, 2010.	
6 3	(b) From the amounts designated for gambling and substance	Permits the Department of Public Health to allocate up to $100,000 for
6 4	abuse treatment, the department may use up to $100,000 for	administrative costs to develop and implement the process in
6 5	administrative costs to continue developing and implementing	accordance with this Subsection.
6 6	the process in accordance with subparagraph division (a).	

PG LN	House File 811	Explanation
6 7 6 8 6 9 6 10	(3) The requirement of section 123.53, subsection 3, is met by the appropriations and allocations made in this Act for purposes of substance abuse treatment and addictive disorders for the fiscal year beginning July 1, 2009.	The requirements of Section 123.53(3), Code of Iowa, are met by the appropriations made in this Act.
6 11 6 12 6 13 6 14 6 15 6 16 6 17 6 18 6 19	d. The bureau of substance abuse prevention and treatment, the division of tobacco use prevention and control, and the office of gambling treatment and prevention shall develop a strategy to coordinate prevention activities across the spectrum of addictive disorders in order to maximize efficiencies and reduce expenditures while meeting the needs of Iowans. The strategy shall be presented to the individuals specified in this Act for submission of reports by December 15, 2009.	Requires the Bureau of Substance Abuse Prevention and Treatment, the Division of Tobacco Use, Prevention, and Control, and the Office of Gambling Treatment under the Department of Public Health to develop a strategy to maximize efficiencies and reduce expenditures related to prevention activities by December 15, 2009.
6 20 6 21 6 22 6 23 6 24 6 25 6 26	2. HEALTHY CHILDREN AND FAMILIES For promoting the optimum health status for children, adolescents from birth through 21 years of age, and families, and for not more than the following full=time equivalent positions: ..... $ 2,249,167 ..... FTEs 14.00	General Fund appropriation to healthy children and families programs. DETAIL: This is a net decrease of $335,669 and 2.00 FTE positions compared to the estimated net FY 2009 appropriation. An additional $493,574 is provided to the healthy children and families programs from the Health Care Trust Fund in Division IV. Significant changes to the General Fund appropriation include: • A decrease of $98,500 for elimination of State funding for the Iowa Mother's Milk Bank Program. • A decrease of $36,928 for elimination of the Child Death Review Team. The responsibilities of the Program are transferred to the State Medical Examiner under the Department of Public Health in Division X. • A decrease of $3,546 for elimination of State funding for the Sudden Infant Death Syndrome (SIDS) Autopsies Program. • A decrease of $87,771 for elimination of State funding for dental services for children through the University of Iowa College of Dentistry. • A decrease of $108,924 for a general reduction for healthy children and families programs. • A decrease of 2.00 FTE positions to reflect anticipated utilization

PG LN	House File 811	Explanation
		for FY 2010.
6 27 6 28 6 29 6 30 6 31 6 32 6 33 6 34 6 35 7 1	a. Of the funds appropriated in this subsection, not more than $570,226 shall be used for the healthy opportunities to experience success (HOPES)=healthy families Iowa (HFI) program established pursuant to section 135.106. The department shall transfer the funding allocated for the HOPES=HFI program to the Iowa empowerment board for distribution and shall assist the board in managing the contracting for the funding. The funding shall be distributed to renew the grants that were provided to the grantees that operated the program during the fiscal year ending June 30, 2009.	Limits the General Fund amount used to fund the Healthy Opportunities for Parents to Experience Success (HOPES) Program to $570,226. Requires the Department to transfer this funding to the Iowa Empowerment Board for distribution and management. The funds are required to be distributed to the grantees that received funding in FY 2009. DETAIL: This is a decrease of $75,691 compared to the FY 2009 allocation for a general reduction. An additional $200,000 is allocated to the HOPES Program for child abuse prevention programming from the Temporary Assistance to Needy Families (TANF) Fund appropriation to the Department of Human Services in Division I.
7 2 7 3 7 4 7 5 7 6 7 7	b. Of the funds appropriated in this subsection, $292,791 shall be used to continue to address the healthy mental development of children from birth through five years of age through local evidence=based strategies that engage both the public and private sectors in promoting healthy development, prevention, and treatment for children.	Allocates $292,791 for the Assuring Better Child Health and Development (ABCD II) Program. DETAIL: This is a decrease of $32,209 compared to the FY 2009 allocation for a general reduction. An additional $159,603 is allocated to the ABCD II Program from the appropriation to the healthy children and families programs from the Health Care Trust Fund in Division IV.
7 8 7 9 7 10 7 11 7 12 7 13	c. Of the funds appropriated in this subsection, $35,108 shall be distributed to a statewide dental carrier to provide funds to continue the donated dental services program patterned after the projects developed by the national foundation of dentistry for the handicapped to provide dental services to indigent elderly and disabled individuals.	Allocates $35,108 for dental services for indigent elderly and disabled individuals. DETAIL: This is a decrease of $4,892 compared to the FY 2009 allocation for a general reduction.
7 14 7 15 7 16 7 17 7 18	3. CHRONIC CONDITIONS For serving individuals identified as having chronic conditions or special health care needs, and for not more than the following full=time equivalent positions: ..... $ 2,756,236	General Fund appropriation to chronic conditions programs. DETAIL: This is a net increase of $593,584 and a decrease of 2.00 FTE positions compared to the estimated net FY 2009 appropriation. An additional $999,219 is provided to chronic conditions programs

PG LN	House File 811	Explanation

7 19	..... FTEs 3.00	from the Health Care Trust Fund (HCTF) in Division IV. The changes to the General Fund appropriation include:
		
		• The elimination of State funding of $59,131 for the Childhood Obesity Program. An appropriation of $143,643 is provided to the Childhood Obesity Prevention Program from the HCTF in Division IV.
		• The elimination of State funding of $19,700 for the Hepatitis C Awareness Program.
		• A general reduction of $126,722 for chronic conditions programs.
		• Increases that were previously funded by the Healthy Iowans Tobacco Trust (HITT) Fund:
		  • $88,938 for the Phenylketonuria (PKU) Assistance Program.
		  • $244,579 for the AIDS Drug Assistance Program (ADAP).
		  • $88,938 for the Epilepsy Education Program.
		• An increase of $324,043 to reflect the consolidation of appropriations to chronic conditions from HF 2539 (FY 2008 Health Care Reform Act).
		• An increase of $52,639 to restore administrative savings that were decreased in FY 2009.
		• A decrease of 2.00 FTE positions to reflect anticipated utilization for FY 2010.

7 20 7 21 7 22 7 23	a. Of the funds appropriated in this subsection, $176,542 shall be used for grants to individual patients who have phenylketonuria (PKU) to assist with the costs of necessary special foods.	Allocates $176,542 for Phenylketonuria (PKU) assistance. DETAIL: This is a decrease of $23,458 compared to the total FY 2009 allocations for a general reduction. In FY 2009, $100,000 of this allocation was funded by the HITT Fund.
7 24 7 25 7 26 7 27 7 28 7 29 7 30	b. Of the funds appropriated in this subsection, $438,018 is allocated for continuation of the contracts for resource facilitator services in accordance with section 135.22B, subsection 9, and for brain injury training services and recruiting of service providers to increase the capacity within this state to address the needs of individuals with brain injuries and such individuals' families.	Allocates $438,018 for continuation of the two contracts from FY 2009 in the DPH Brain Injury Services Program. DETAIL: This is a decrease of $61,982 compared to the FY 2009 allocation for a general reduction.

PG LN	House File 811	Explanation
7 31	c. Of the funds appropriated in this subsection, $244,579 shall be used as additional funding to leverage federal funding through the federal Ryan White Care Act, Title II, AIDS drug assistance program supplemental drug treatment grants.	Allocates $244,579 to the AIDS Drug Assistance Program (ADAP). DETAIL: This is a decrease of $30,421 compared to the FY 2009 allocation for a general reduction. This allocation was previously funded by the HITT Fund.
8 1	d. Of the funds appropriated in this subsection, $88,938 shall be used for the public purpose of providing a grant to an existing national=affiliated organization to provide education, client=centered programs, and client and family support for people living with epilepsy and their families.	Allocates $88,938 for epilepsy education and support. DETAIL: This is a decrease of $11,062 compared to the FY 2009 allocation for a general reduction. This allocation was previously funded by the HITT Fund.
8 6	4. COMMUNITY CAPACITY For strengthening the health care delivery system at the local level, and for not more than the following full=time equivalent positions: ..... $ 4,116,847 ..... FTEs 21.00	General Fund appropriation to the community capacity programs. DETAIL: This is a net increase of $2,422,518 and 9.00 FTE positions compared to the estimated net FY 2009 appropriation. An additional $2,253,507 is allocated from the appropriation to the community capacity programs from the HCTF in Division IV. Changes to the General Fund appropriation include: • A decrease of $62,960 for a general reduction. • An increase of $1,054,060 for local public health services. This allocation was previously funded by the HITT Fund. • An increase of $1,267,429 to reflect consolidation of the appropriations to community capacity from HF 2539 (FY 2009 Health Care Reform Act). • An increase of $100,000 for the Department of Public Health's Public Health Modernization Act in Division XI. An additional $61,349 is provided to the initiative from the HCTF in Division IV. • An increase of $63,989 to restore administrative savings that were decreased in FY 2009. • An increase of 9.00 FTE positions to reflect anticipated utilization for FY 2010 and to include FTE positions formerly funded by the HITT Fund. NOTE: An additional $500,000 in federal funding from the American Reinvestment and Recovery Act of 2009 is appropriated in HF 820

PG LN	House File 811	Explanation
		(FY 2010 Federal Funds Appropriations Bill) to community capacity programs.
8 12 8 13 8 14 8 15	a. Of the funds appropriated in this subsection, $90,000 is allocated for a child vision screening program implemented through the university of Iowa hospitals and clinics in collaboration with community empowerment areas.	Requires an allocation of $90,000 for a Child Vision Screening program through the University of Iowa Hospitals and Clinics in collaboration with Community Empowerment areas. DETAIL: This is a decrease of $10,000 compared to the FY 2009 allocation for a general reduction.
8 16 8 17 8 18 8 19 8 20 8 21 8 22 8 23 8 24 8 25 8 26	b. Of the funds appropriated in this subsection, $143,254 is allocated for continuation of an initiative implemented at the university of Iowa and $125,802 is allocated for continuation of an initiative at the state mental health institute at Cherokee to expand and improve the workforce engaged in mental health treatment and services. The initiatives shall receive input from the university of Iowa, the department of human services, the department of public health, and the mental health, mental retardation, developmental disabilities, and brain injury commission to address the focus of the initiatives.	Requires an allocation of $143,254 for a University of Iowa initiative to expand and improve the mental health treatment and services workforce. Requires an allocation of $125,802 for the same type of initiative at the Mental Health Institute at Cherokee. DETAIL: These are decreases compared to the FY 2009 allocations of $16,446 for the University of Iowa initiative and $14,498 to the Mental Health Institute at Cherokee for general reductions. The requirement that the Department of Human Services, the Department of Public Health, and the Brain Injury Commission receive regular updates on the workforce initiative at the Mental Health Institute at Cherokee has been removed.
8 27 8 28 8 29 8 30 8 31	c. Of the funds appropriated in this subsection, $1,054,060 shall be used for essential public health services that promote healthy aging throughout the lifespan, contracted through a formula for local boards of health, to enhance health promotion and disease prevention services.	Requires the Department of Public Health (DPH) to use $1,054,060 for core public health functions, including home health care and public health nursing services. DETAIL: This is a decrease of $103,422 for the specified initiatives compared to the FY 2009 allocation for a general reduction. This allocation was previously funded by the HITT Fund.
8 32 8 33 8 34 8 35	d. Of the funds appropriated in this section, $100,000 shall be deposited in the governmental public health system fund created by this Act to be used to further develop the Iowa public health standards and to begin implementation of	Permits the Department of Public Health to use $100,000 for the Public Health Modernization initiative. DETAIL: This is a new allocation beginning in FY 2010. The allocation will be deposited in the Governmental Public Health System

PG LN	House File 811	Explanation
9 1	public health modernization in accordance with chapter 135A,	Fund established in Division XI.
9 2	as enacted by this Act, to the extent funding is available.	
9 3	5. ELDERLY WELLNESS	General Fund appropriation to the elderly wellness programs.
9 4	For promotion of healthy aging and optimization of the	
9 5	health of older adults:	DETAIL: This is a decrease of $749,696 compared to the estimated net FY 2009 appropriation for a general reduction.
9 6	..... $ 8,345,779	
		NOTE: An additional $700,000 of federal funds from the American Reinvestment and Recovery Act of 2009 is appropriated to elderly wellness programs in HF 820 (FY 2010 Federal Funds Appropriations Bill) for FY 2010.
9 7	a. Of the funds appropriated in this subsection,	Allocates $2,292,076 for the Local Public Health Nursing Program.
9 8	$2,292,076 shall be used for local public health nursing	
9 9	services.	DETAIL: Maintains the current level of funding.
9 10	b. Of the funds appropriated in this subsection,	Allocates $6,053,703 for the Home Care Aide Services Program.
9 11	$6,053,703 shall be used for home care aide services.	DETAIL: This is a decrease of $749,696 compared to the FY 2009 allocation for a general reduction.
9 12	6. ENVIRONMENTAL HAZARDS	General Fund appropriation to the environmental hazards programs.
9 13	For reducing the public's exposure to hazards in the	
9 14	environment, primarily chemical hazards, and for not more than	DETAIL: This is a net increase of $278,654 and 2.50 FTEs compared to the estimated net FY 2009 appropriation. Changes include:
9 15	the following full=time equivalent positions:	
9 16	..... $ 1,000,391	
9 17	..... FTEs 4.50	• A general reduction of $67,913 for environmental hazard programs. • An increase of $262,153 for environmental epidemiology. This allocation was previously funded by the HITT Fund. • An increase of $69,347 for childhood lead poisoning prevention. This allocation was previously funded by the HITT Fund. • An increase of $15,067 to restore administrative savings that were decreased in FY 2009. • An increase of 2.50 FTE positions to reflect the FTEs formerly funded by the HITT Fund that will now be funded by the General

PG LN	House File 811	Explanation
		Fund.
9 18 9 19	a. Of the funds appropriated in this subsection, $601,631 shall be used for childhood lead poisoning provisions.	Requires an allocation of $601,631 for childhood lead poisoning testing. DETAIL: This is a decrease of $61,084 compared to the FY 2009 allocation for a general reduction.
9 20 9 21 9 22	b. Of the funds appropriated in this subsection, not more than $262,153 shall be used for the development of scientific and medical expertise in environmental epidemiology.	Requires an allocation of $262,153 for environmental epidemiology. DETAIL: This is a decrease of $26,617 compared to the FY 2009 allocation for a general reduction. This allocation was previously funded by the HITT Fund.
9 23 9 24 9 25 9 26 9 27 9 28	7. INFECTIOUS DISEASES For reducing the incidence and prevalence of communicable diseases, and for not more than the following full=time equivalent positions: ..... $ 1,630,661 ..... FTEs 5.00	General Fund appropriation to the Infectious Diseases Programs. DETAIL: This is a decrease of $1,164,883 and 2.00 FTE positions compared to the estimated net FY 2009 appropriation. Changes include: • A decrease of $209,600 for general reductions to infectious diseases programs. • A decrease of $992,915 in one-time supplemental funding for FY 2009 for vaccinations used in the 2008 disaster recovery period. The supplemental funding was provided in HF 414 (FY 2009 Appropriation Adjustments Act). • An increase of $37,632 to restore administrative savings that were decreased in FY 2009. • A decrease of 2.00 FTE positions to reflect anticipated utilization for FY 2010.
9 29 9 30 9 31	8. PUBLIC PROTECTION For protecting the health and safety of the public through establishing standards and enforcing regulations, and for not	General Fund appropriation to the public protection programs. DETAIL: This is a net increase of $454,771 and 2.00 FTE positions compared to the estimated net FY 2009 appropriation. Changes

PG LN	House File 811	Explanation
9 32	more than the following full=time equivalent positions:	include:
9 33	..... $ 3,569,986	• A general reduction of $199,905 for public protection programs.
9 34	..... FTEs 130.00	• A decrease of $118,247 for the Office of the State Medical Examiner for a general reduction.
		• An increase of $348,245 for emergency medical services. This allocation was previously funded by the HITT Fund.
		• An increase of $539,468 for the State Poison Control Center. This allocation was previously funded by the HITT Fund.
		• A decrease of $179,822 for one-time funding in FY 2009 for startup costs for plumbing and mechanical contractor licensing.
		• An increase of $65,032 to restore administrative savings that were decreased in FY 2009.
		• An increase of 2.00 FTE positions to reflect anticipated utilization for FY 2010.
9 35	a. Of the funds appropriated in this subsection, not more	Requires $549,240 to be allocated to the Emergency Medical Services Fund.
10 1	than $549,240 shall be credited to the emergency medical	
10 2	services fund created in section 135.25. Moneys in the	
10 3	emergency medical services fund are appropriated to the	
10 4	department to be used for the purposes of the fund.	DETAIL: This is a decrease of $94,260 compared to the FY 2009 allocation. The funds are used for training and equipment provided through the Emergency Medical Services (EMS) Program.
10 5	b. Of the funds appropriated in this subsection, $232,477	Allocates $232,477 to provide program funding for children's sexual violence prevention.
10 6	shall be used for sexual violence prevention programming	
10 7	through a statewide organization representing programs serving	
10 8	victims of sexual violence through the department's sexual	
10 9	violence prevention program. The amount allocated in this	
10 10	lettered paragraph shall not be used to supplant funding	
10 11	administered for other sexual violence prevention or victims	
10 12	assistance programs.	DETAIL: This is a decrease of $30,023 compared to the FY 2009 allocation for a general reduction.
10 13	c. Of the funds appropriated in this subsection, not more	Requires an allocation up to a maximum of $348,244 for Emergency Medical Services (EMS).
10 14	than $348,244 shall be used for the continuation and support	
10 15	of a coordinated system of delivery of trauma and emergency	
10 16	medical services.	DETAIL: This is a decrease of $39,076 compared to the FY 2009

PG LN	House File 811	Explanation
		allocation for a general reduction. This allocation was previously funded by the HITT Fund.
10 17 10 18 10 19	d. Of the funds appropriated in this subsection, not more than $539,467 shall be used for the state poison control center.	Requires an allocation up to a maximum of $539,467 for the State Poison Control Center. DETAIL: This is a decrease of $60,533 compared to the FY 2009 allocation for a general reduction. This allocation was previously funded by the HITT Fund.
10 20 10 21 10 22 10 23 10 24 10 25	9. RESOURCE MANAGEMENT For establishing and sustaining the overall ability of the department to deliver services to the public, and for not more than the following full=time equivalent positions: ..... $ 1,062,517 ..... FTEs 10.00	General Fund appropriation to the Department's resource management activities. DETAIL: This is a net decrease of $131,581 and no change in FTE positions compared to the estimated net FY 2009 appropriation. Changes to the General Fund appropriation include: • A general reduction of $156,508 for resource management. • An increase of $24,927 to restore administrative savings that were decreased in FY 2009. NOTE: An additional $1,800,000 of federal funding from the American Reinvestment and Recovery Act of 2009 is appropriated in HF 820 (FY 2010 Federal Funds Appropriations Bill) for resource management for FY 2010.
10 26 10 27 10 28 10 29 10 30	The university of Iowa hospitals and clinics under the control of the state board of regents shall not receive indirect costs from the funds appropriated in this section. The university of Iowa hospitals and clinics billings to the 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 Department of Public Health. Requires the UIHC to submit billings on a quarterly basis for FY 2010.
10 31	DEPARTMENT OF VETERANS AFFAIRS	
10 32	Sec. 3. DEPARTMENT OF VETERANS AFFAIRS. There is	

PG LN	House File 811	Explanation
10 33	appropriated from the general fund of the state to the	
10 34	department of veterans affairs for the fiscal year beginning	
10 35	July 1, 2009, and ending June 30, 2010, the following amounts,	
11 1	or so much thereof as is necessary, to be used for the	
11 2	purposes designated:	
11 3	1. DEPARTMENT OF VETERANS AFFAIRS ADMINISTRATION	General Fund appropriation to the Department of Veteran Affairs.
11 4	For salaries, support, maintenance, and miscellaneous	
11 5	purposes, including the war orphans educational assistance	DETAIL: This is a decrease of $132,159 and no change in FTE
11 6	fund created in section 35.8, and for not more than the	positions compared to the estimated net FY 2009 appropriation for a
11 7	following full=time equivalent positions:	general reduction of 11.02%.
11 8	..... $ 1,067,170	
11 9	..... FTEs 17.20	
11 10	2. IOWA VETERANS HOME	General Fund appropriation to the Iowa Veterans Home.
11 11	For salaries, support, maintenance, and miscellaneous	
11 12	purposes:	DETAIL: This is a decrease of $3,064,785 compared to the estimated
11 13	..... $ 11,326,650	net FY 2009 appropriation for an 11.30% general reduction to reflect the availability of FY 2009 carryforward funding. The Home expects to carry forward between $5,000,000 and $6,000,000 from FY 2009 to FY 2010. Section 68 transfers $1,833,333 of those funds to the Medicaid Program for hospital rebasing.
		This Bill does not cap FTE positions. The tracking document indicates that there is an increase of 20.76 FTE positions compared to the estimated net FY 2009 FTE positions.
11 14	a. The Iowa veterans home billings involving the	Requires the Iowa Veterans Home to submit monthly claims relating
11 15	department of human services shall be submitted to the	to Medicaid to the Department of Human Services.
11 16	department on at least a monthly basis.	
11 17	b. If there is a change in the employer of employees	Requires a new employer to honor an existing collective bargaining
11 18	providing services at the Iowa veterans home under a	agreement at the Iowa Veterans Home.
11 19	collective bargaining agreement, such employees and the	
11 20	agreement shall be continued by the successor employer as	
11 21	though there had not been a change in employer.	

PG LN	House File 811	Explanation
11 22	c. Commencing with the fiscal year beginning July 1, 2009, the Iowa veterans home shall revise the payment and exemption amounts for residents participating in the incentive therapy program in accordance with all of the following: (1) The incentive therapy payment amount for domiciliary level of care residents shall not exceed $150 per month and for nursing level of care residents shall not exceed $75 per month. (2) The amounts paid under the program that are exempt from computation of resident support shall be increased to reflect the increases in the incentive therapy payments in accordance with subparagraph (1).	Requires the Iowa Veterans Home to adjust the incentive therapy program payment schedule. These are funds provided to residents of the Home for certain work at the Home.
11 34	3. STATE EDUCATIONAL ASSISTANCE == CHILDREN OF DECEASED VETERANS For provision of educational assistance pursuant to section 35.9: ..... $ 22,944	General Fund appropriation for the State Educational Assistance for Children of Deceased Veterans Program. DETAIL: This is a decrease of $2,841 compared to the estimated net FY 2009 appropriation for a general decrease of 11.02%.
12 4	Sec. 4. LIMITATION OF COUNTY COMMISSION OF VETERANS AFFAIRS FUND STANDING APPROPRIATIONS. Notwithstanding the standing appropriation in the following designated section for the fiscal year beginning July 1, 2009, and ending June 30, 2010, the amounts appropriated from the general fund of the state pursuant to that section for the following designated purposes shall not exceed the following amount: For the county commissions of veterans affairs fund under section 35A.16: ..... $ 1,000,000	General Fund appropriation for the County Commissions of Veterans Affairs Fund. DETAIL: This is an increase of $414,401 compared to the estimated net FY 2009 appropriation. This is in lieu of a new FY 2010 standing appropriation for the same purpose. Each of the 99 counties receives a $10,000 grant for veteran-related expenditures and $10,000 is provided to the Department of Veterans Affairs for training expenditures.
12 14	HUMAN SERVICES	
12 15	Sec. 5. TEMPORARY ASSISTANCE FOR NEEDY FAMILIES BLOCK GRANT. There is appropriated from the fund created in section	Temporary Assistance for Needy Families (TANF) FY 2010 Block Grant Fund appropriation.

PG LN	House File 811	Explanation
12 17	8.41 to the department of human services for the fiscal year beginning July 1, 2009, and ending June 30, 2010, from moneys received under the federal temporary assistance for needy families (TANF) block grant pursuant to the federal Personal Responsibility and Work Opportunity Reconciliation Act of 1996, Pub. L. No. 104=193, and successor legislation, which are federally appropriated for the federal fiscal years beginning October 1, 2008, and ending September 30, 2009, and beginning October 1, 2009, and ending September 30, 2010, the following amounts, or so much thereof as is necessary, to be used for the purposes designated:	DETAIL: The federal government implemented Federal Welfare Reform on August 22, 1996. Federal Welfare Reform changed the funding for the Family Investment Program (FIP) from a matching program to a block grant of federal funds. The TANF Program was reauthorized on February 8, 2006, with work participation rates extended to separate State programs and the elimination of high performance bonuses; however, Iowa's grant remains the same at $131,524,959 per year.
12 28	1. To be credited to the family investment program account and used for assistance under the family investment program under chapter 239B: ..... $ 28,606,513	TANF FY 2010 Block Grant appropriation for the Family Investment Program (FIP) Account. DETAIL: This is an increase of $2,505,000 compared to the estimated FY 2009 appropriation.
12 32	2. To be credited to the family investment program account and used for the job opportunities and basic skills (JOBS) program and implementing family investment agreements in accordance with chapter 239B: ..... $ 13,084,528	TANF FY 2010 Block Grant appropriation for the PROMISE JOBS Program. DETAIL: This is a decrease of $250,000 compared to the estimated FY 2009 appropriation.
13 2	Notwithstanding section 8.33, not more than 5 percent of the moneys designated in this subsection that are allocated by the department for contracted services, other than family self=sufficiency grant services allocated under this subsection, that remain unencumbered or unobligated at the close of the fiscal year shall not revert but shall remain available for expenditure for the purposes designated until the close of the succeeding fiscal year. However, unless such moneys are encumbered or obligated on or before September 30, 2010, the moneys shall revert.	CODE: Requires nonreversion of not more than 5.00% of funds allocated for contract services.
13 12	3. To be used for the family development and	TANF FY 2010 Block Grant appropriation for the Family Development

PG	LN	House File 811	Explanation
13	13	self=sufficiency grant program in accordance with section	and Self Sufficiency (FaDSS) Program.
13	14	216A.107:	
13	15	..... $ 2,998,675	DETAIL: Maintains the current level of TANF support.
13	16	Notwithstanding section 8.33, moneys appropriated in this	CODE: Requires nonreversion of funds allocated for the FaDSS Grant Program.
13	17	subsection that remain unencumbered or unobligated at the	
13	18	close of the fiscal year shall not revert but shall remain	
13	19	available for expenditure for the purposes designated until	
13	20	the close of the succeeding fiscal year. However, unless such	
13	21	moneys are encumbered or obligated on or before September 30,	
13	22	2010, the moneys shall revert.	
13	23	4. For field operations:	TANF FY 2010 Block Grant appropriation for Field Operations.
13	24	..... $ 18,507,495	DETAIL: Maintains the current level of TANF support.
13	25	5. For general administration:	TANF FY 2010 Block Grant appropriation for General Administration.
13	26	..... $ 3,744,000	DETAIL: Maintains the current level of TANF support.
13	27	6. For local administrative costs:	TANF FY 2010 Block Grant appropriation for Local Administrative Costs.
13	28	..... $ 2,189,830	DETAIL: Maintains the current level of TANF support.
13	29	7. For state child care assistance:	TANF FY 2010 Block Grant appropriation for Child Care Assistance.
13	30	..... $ 25,831,177	DETAIL: This is a decrease of $2,055,005 compared to the estimated FY 2009 appropriation.
13	31	a. Of the funds appropriated in this subsection,	Requires the (DHS) to transfer $18,986,177 to the Child Care and Development Block Grand and to use $200,000 for training of registered child care home providers. Permits the DHS to contract
13	32	$18,986,177 shall be transferred to the child care and	
13	33	development block grant appropriation made by the Eighty=third	

PG LN	House File 811	Explanation
13 34	General Assembly, 2009 Session, for the federal fiscal year	with colleges or child care resource centers and specifies requirements for funding the grants and the application form for the grant.
13 35	beginning October 1, 2009, and ending September 30, 2010. Of	
14 1	this amount, $200,000 shall be used for provision of	
14 2	educational opportunities to registered child care home	
14 3	providers in order to improve services and programs offered by	
14 4	this category of providers and to increase the number of	
14 5	providers. The department may contract with institutions of	
14 6	higher education or child care resource and referral centers	
14 7	to provide the educational opportunities. Allowable	
14 8	administrative costs under the contracts shall not exceed 5	
14 9	percent. The application for a grant shall not exceed two	
14 10	pages in length.	
14 11	b. Any funds appropriated in this subsection remaining	Specifies that any unallocated funds be used for child care assistance for families enrolled in the FIP program.
14 12	unallocated shall be used for state child care assistance	
14 13	payments for individuals enrolled in the family investment	
14 14	program who are employed.	
14 15	8. For mental health and developmental disabilities	TANF FY 2010 Block Grant appropriation for Mental Health and Developmental Disabilities Community Services.
14 16	community services:	
14 17	..... $ 4,894,052	DETAIL: Maintains the current level of TANF support.
14 18	9. For child and family services:	TANF FY 2010 Block Grant appropriation for Child and Family Services.
14 19	..... $ 32,084,430	DETAIL: Maintains the current level of TANF support.
14 20	10. For child abuse prevention grants:	TANF FY 2010 Block Grant appropriation for Child Abuse Prevention Grants.
14 21	..... $ 250,000	DETAIL: Maintains the current level of TANF support.
14 22	11. For pregnancy prevention grants on the condition that	TANF FY 2010 Block Grant appropriation for pregnancy prevention grants if family planning services are funded.
14 23	family planning services are funded:	

PG LN	House File 811	Explanation
14 24	..... $ 1,930,067	DETAIL: Maintains the current level of TANF support.
14 25 14 26 14 27 14 28 14 29 14 30 14 31 14 32 14 33 14 34 14 35 15 1 15 2 15 3 15 4	Pregnancy prevention grants shall be awarded to programs in existence on or before July 1, 2009, if the programs are comprehensive in scope and have demonstrated positive outcomes. Grants shall be awarded to pregnancy prevention programs which are developed after July 1, 2009, if the programs are comprehensive in scope and are based on existing models that have demonstrated positive outcomes. Grants shall comply with the requirements provided in 1997 Iowa Acts, chapter 208, section 14, subsections 1 and 2, including the requirement that grant programs must emphasize sexual abstinence. Priority in the awarding of grants shall be given to programs that serve areas of the state which demonstrate the highest percentage of unplanned pregnancies of females of childbearing age within the geographic area to be served by the grant.	Requires the recipients of pregnancy prevention grants to meet certain requirements of comprehensiveness and demonstration of 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 should be given to programs in areas of the State that have the highest percentage of unplanned adolescent pregnancies of females of childbearing age within the geographic area served by the grant.
15 5 15 6 15 7 15 8	12. For technology needs and other resources necessary to meet federal welfare reform reporting, tracking, and case management requirements: ..... $ 1,037,186	TANF FY 2010 Block Grant appropriation for federal welfare reform reporting, tracking, and case management technology and resource needs. DETAIL: Maintains the current level of TANF support.
15 9 15 10 15 11 15 12	13. For the healthy opportunities for parents to experience success (HOPES) program administered by the department of public health to target child abuse prevention: ..... $ 200,000	TANF FY 2010 Block Grant appropriation for the Healthy Opportunities for Parents to Experience Success (HOPES) Program. DETAIL: Maintains the current level of TANF support.
15 13 15 14 15 15 15 16	14. To be credited to the state child care assistance appropriation made in this section to be used for funding of community=based early childhood programs targeted to children from birth through five years of age developed by community	TANF FY 2010 Block Grant appropriation to fund community-based programs for children from birth to age five as developed by community empowerment areas.

PG	LN	House File 811	Explanation
15	17	empowerment areas as provided in section 28.9:	DETAIL: Maintains the current level of TANF support.
15	18	..... $ 7,350,000	
15	19	a. The department shall transfer TANF block grant funding	Requires the DHS to transfer TANF funds to the Child Care and Development Block Grant.
15	20	appropriated and allocated in this subsection to the child	
15	21	care and development block grant appropriation in accordance	
15	22	with federal law as necessary to comply with the provisions of	
15	23	this subsection.	
15	24	b. Of the amounts appropriated in this section,	Requires $12,962,008 of the federal TANF funds appropriated in this Section to be transferred to the federal Social Services Block Grant appropriation.
15	25	$12,962,008 for the fiscal year beginning July 1, 2009, shall	
15	26	be transferred to the appropriation of the federal social	
15	27	services block grant made for that fiscal year.	DETAIL: Maintains the current level of TANF support.
15	28	c. The department may transfer funds allocated in this	Permits the DHS to transfer funds to general administration and field operations for costs associated with TANF-funded Programs and the Family Investment Program (FIP).
15	29	section to the appropriations made in this Act for general	
15	30	administration and field operations for resources necessary to	
15	31	implement and operate the services referred to in this section	
15	32	and those funded in the appropriation made in this division of	
15	33	this Act for the family investment program from the general	
15	34	fund of the state.	
15	35	Sec. 6. FAMILY INVESTMENT PROGRAM ACCOUNT.	Requires funds credited to the Family Investment Program (FIP) Account for FY 2010 to be used as specified.
16	1	1. Moneys credited to the family investment program (FIP)	
16	2	account for the fiscal year beginning July 1, 2009, and ending	
16	3	June 30, 2010, shall be used to provide assistance in	
16	4	accordance with chapter 239B.	
16	5	2. The department may use a portion of the moneys credited	Permits the DHS to use FIP funds for various administrative purposes.
16	6	to the FIP account under this section as necessary for	
16	7	salaries, support, maintenance, and miscellaneous purposes.	

PG LN	House File 811	Explanation
16 8 16 9 16 10 16 11 16 12 16 13 16 14	3. The department may transfer funds allocated in this section to the appropriations in this Act for general administration and field operations for resources necessary to implement and operate the services referred to in this section and those funded in the appropriation made in this division of this Act for the family investment program from the general fund of the state.	Permits the DHS to transfer funds to general administration and field operations for costs associated with this Section.
16 15 16 16 16 17	4. Moneys appropriated in this division of this Act and credited to the FIP account for the fiscal year beginning July 1, 2009, and ending June 30, 2010, are allocated as follows:	Requires that TANF Block Grant funds appropriated to the FIP Account be allocated as specified.
16 18 16 19 16 20 16 21 16 22 16 23 16 24	a. To be retained by the department of human services to be used for coordinating with the department of human rights to more effectively serve participants in the FIP program and other shared clients and to meet federal reporting requirements under the federal temporary assistance for needy families block grant: ..... $ 20,000	Allocates $20,000 to the DHS to be used for administrative services. DETAIL: Maintains the current level of support.
16 25 16 26 16 27 16 28 16 29	b. To the department of human rights for staffing, administration, and implementation of the family development and self=sufficiency grant program in accordance with section 216A.107: ..... $ 5,496,946	Allocates $5,496,946 of the FY 2010 General Fund appropriation and TANF funds to the Department of Human Rights for the Family Development and Self-Sufficiency (FaDSS) Grant Program. DETAIL: This is a decrease of $66,096 compared to the FY 2009 allocation.
16 30 16 31 16 32 16 33	(1) Of the funds allocated for the family development and self=sufficiency grant program in this lettered paragraph, not more than 5 percent of the funds shall be used for the administration of the grant program.	Specifies that a maximum of 5.00% of the allocation be spent on administration of Family Development and Self-Sufficiency (FaDSS) Program grants.
16 34 16 35	(2) The department of human rights may continue to implement the family development and self=sufficiency grant	Permits the Department of Human Rights to continue to implement the Family Development and Self-Sufficiency Grant Program in FY

PG LN	House File 811	Explanation
17 1	program statewide during fiscal year 2009=2010.	2010.
17 2 17 3	c. For the diversion subaccount of the FIP account: ..... $ 1,814,000	Allocates $1,814,000 of FY 2010 TANF funds for the FIP Diversion Subaccount. DETAIL: This is a decrease of $1,000,000 compared to the FY 2009 allocation.
17 4 17 5 17 6 17 7 17 8	A portion of the moneys allocated for the subaccount may be used for field operations salaries, data management system development, and implementation costs and support deemed necessary by the director of human services in order to administer the FIP diversion program.	Allows a portion of the FIP Diversion funds to be used to administer the FIP Diversion Program.
17 9 17 10	d. For the food stamp employment and training program: ..... $ 68,059	Allocates $68,059 of FY 2010 FIP funds to the Food Stamp Employment and Training Program. DETAIL: Maintains the current level of support.
17 11 17 12 17 13 17 14 17 15 17 16 17 17 17 18 17 19 17 20	The department shall amend the food stamp employment and training state plan in order to maximize to the fullest extent permitted by federal law the use of the fifty=fifty match provisions for the claiming of allowable federal matching funds from the United States department of agriculture pursuant to the federal food stamp employment and training program for providing education, employment, and training services for eligible food assistance program participants, including but not limited to related dependent care and transportation expenses.	Requires the Department to amend the Food Stamp Employment and Training State Plan to maximize federal matching funds received.
17 21 17 22	e. For the JOBS program: ..... $ 21,638,263	Permits the DHS to allocate $21,638,263 of the FY 2010 General Fund appropriation and TANF funds for the PROMISE JOBS Program.

PG LN	House File 811	Explanation
		DETAIL: This is a decrease of $671,853 compared to the FY 2009 allocation.
17 23 17 24 17 25 17 26 17 27 17 28 17 29 17 30 17 31 17 32 17 33 17 34 17 35 18 1 18 2 18 3 18 4	5. Of the child support collections assigned under FIP, an amount equal to the federal share of support collections shall be credited to the child support recovery appropriation made in this division of this Act. Of the remainder of the assigned child support collections received by the child support recovery unit, a portion shall be credited to the FIP account, a portion may be used to increase recoveries, and a portion may be used to sustain cash flow in the child support payments account. If as a consequence of the appropriations and allocations made in this section the resulting amounts are insufficient to sustain cash assistance payments and meet federal maintenance of effort requirements, the department shall seek supplemental funding. If child support collections assigned under FIP are greater than estimated or are otherwise determined not to be required for maintenance of effort, the state share of either amount may be transferred to or retained in the child support payment account.	Requires the federal share of child support collections recovered by the State to be credited to the Child Support Recovery Unit. The remainder of support collected is credited to the FIP account and the DHS is permitted to use a portion to increase recoveries and to sustain cash flow in the child support payments account.
18 5 18 6 18 7 18 8 18 9 18 10 18 11 18 12 18 13 18 14 18 15 18 16 18 17	5A. It is the intent of the general assembly that the department of human services review the feasibility of expanding categorical food assistance program eligibility in Iowa to at least 160 percent of the applicable federal poverty level and simplifying administrative requirements by eliminating current asset tests for food assistance program eligibility. The department shall estimate the potential economic benefits and fiscal impact of making these changes on individual Iowa families and the state. The department shall report on or before December 15, 2009, concerning the review, providing findings and recommendations, to the persons designated by this division of this Act for submission of reports.	Specifies the intent of the General Assembly that the Department review the feasibility of expanding the food assistance program to 160.00% of the Federal Poverty Level (FPL) and simplify administrative eligibility requirements.
18 18	6. The department may adopt emergency rules for the family	Permits the DHS to adopt emergency administrative rules for the FIP,

PG LN	House File 811	Explanation
18 19	investment, JOBS, food stamp, and medical assistance programs	Food Stamp Program, and Medical Assistance Program.
18 20	if necessary to comply with federal requirements.	
18 21	Sec. 7. FAMILY INVESTMENT PROGRAM GENERAL FUND. There is	General Fund appropriation to the DHS for the FIP, to be credited to the FIP Account.
18 22	appropriated from the general fund of the state to the	
18 23	department of human services for the fiscal year beginning	
18 24	July 1, 2009, and ending June 30, 2010, the following amount,	DETAIL: This is a decrease of $7,468,201 compared to the estimated net FY 2009 appropriation. The changes include:
18 25	or so much thereof as is necessary, to be used for the purpose	
18 26	designated:	
18 27	To be credited to the family investment program (FIP)	• A decrease of $4,427,475 for a general reduction of 11.30%.
18 28	account and used for family investment program assistance	• A decrease of $2,600,000 for declining caseload.
18 29	under chapter 239B:	• A decrease of $690,726 to eliminate the Electronic Benefits Transfer (EBT) retailer fee.
18 30	..... $ 34,592,700	• An increase of $250,000 for the FaDSS Program.
		The appropriation for the FIP Account also contains funding for the PROMISE JOBS and FaDSS Programs. The appropriation maintains the current FIP payment levels (maximum grants of $361 per month for a family with two persons and $426 for a family with three persons).
18 31	1. Of the funds appropriated in this section, $8,553,735	General Fund allocation of $8,553,735 for the PROMISE JOBS Program.
18 32	is allocated for the JOBS program.	DETAIL: This is a decrease of $421,853 compared to the FY 2009 allocation.
18 33	2. Of the funds appropriated in this section, $2,518,271	General Fund allocation of $2,518,271 for the FaDSS Program.
18 34	is allocated for the family development and self=sufficiency	
18 35	grant program.	DETAIL: This is a decrease of $66,096 compared to the FY 2009 allocation.
19 1	3. a. Of the funds appropriated in this section, $219,423	General Fund allocation of $219,423 to provide tax preparation help for low-income Iowans.
19 2	shall be used for continuation of a grant to an Iowa=based	
19 3	nonprofit organization with a history of providing tax	
19 4	preparation assistance to low=income Iowans in order to expand	DETAIL: This is a decrease of $30,577 compared to the FY 2009 allocation.

PG LN	House File 811	Explanation
19 5	the usage of the earned income tax credit. The purpose of the	
19 6	grant is to supply this assistance to underserved areas of the	
19 7	state. The grant shall be provided to an organization that	
19 8	has existing national foundation support for supplying such	
19 9	assistance that can also secure local charitable match	
19 10	funding.	
19 11	b. The general assembly supports efforts by the	Specifies that the General Assembly supports the efforts to create a statewide earned income tax credit and asset-building coalition.
19 12	organization receiving funding under this subsection to create	
19 13	a statewide earned income tax credit and asset=building	
19 14	coalition to achieve both of the following purposes:	
19 15	(1) Expanding the usage of the tax credit through new and	
19 16	enhanced outreach and marketing strategies, as well as	
19 17	identifying new local sites and human and financial resources.	
19 18	(2) Assessing and recommending various strategies for	
19 19	Iowans to develop assets through savings, individual	
19 20	development accounts, financial literacy, antipredatory	
19 21	lending initiatives, informed home ownership, use of various	
19 22	forms of support for work, and microenterprise business	
19 23	development targeted to persons who are self=employed or have	
19 24	fewer than five employees.	
19 25	4. Notwithstanding section 8.39, for the fiscal year	CODE: Specifies that the DHS has the authority to transfer TANF funds to the Social Services Block Grant as necessary to meet Maintenance of Effort requirements.
19 26	beginning July 1, 2009, if necessary to meet federal	
19 27	maintenance of effort requirements or to transfer federal	
19 28	temporary assistance for needy families block grant funding to	
19 29	be used for purposes of the federal social services block	
19 30	grant or to meet cash flow needs resulting from delays in	
19 31	receiving federal funding or to implement, in accordance with	
19 32	this division of this Act, activities currently funded with	
19 33	juvenile court services, county, or community moneys and state	
19 34	moneys used in combination with such moneys, the department of	
19 35	human services may transfer funds within or between any of the	
20 1	appropriations made in this division of this Act and	
20 2	appropriations in law for the federal social services block	
20 3	grant to the department for the following purposes, provided	

PG	LN	House File 811	Explanation
20	4	that the combined amount of state and federal temporary	
20	5	assistance for needy families block grant funding for each	
20	6	appropriation remains the same before and after the transfer:	
20	7	a. For the family investment program.	
20	8	b. For child care assistance.	
20	9	c. For child and family services.	
20	10	d. For field operations.	
20	11	e. For general administration.	
20	12	f. MH/MR/DD/BI community services (local purchase).	
20	13	This subsection shall not be construed to prohibit the use	
20	14	of existing state transfer authority for other purposes. The	
20	15	department shall report any transfers made pursuant to this	
20	16	subsection to the legislative services agency.	
20	17	Sec. 8. CHILD SUPPORT RECOVERY. There is appropriated	General Fund appropriation to the DHS for the Child Support Recovery Unit.
20	18	from the general fund of the state to the department of human	
20	19	services for the fiscal year beginning July 1, 2009, and	
20	20	ending June 30, 2010, the following amount, or so much thereof	DETAIL: This is a decrease of $1,662,001 and an increase of 5.00 FTE positions compared to the estimated net FY 2009 appropriation for a general reduction of 11.30%.
20	21	as is necessary, to be used for the purposes designated:	
20	22	For child support recovery, including salaries, support,	
20	23	maintenance, and miscellaneous purposes, and for not more than	
20	24	the following full=time equivalent positions:	
20	25	..... $ 13,420,460	
20	26	..... FTEs 520.00	
20	27	1. The department shall expend up to $27,032, including	Requires the DHS to expend up to $27,032 during FY 2010 for a child support public awareness campaign. The funding limitation includes federal funds. The campaign is to be operated in cooperation with the Office of the Attorney General and is to emphasize parental involvement and financial support.
20	28	federal financial participation, for the fiscal year beginning	
20	29	July 1, 2009, for a child support public awareness campaign.	
20	30	The department and the office of the attorney general shall	
20	31	cooperate in continuation of the campaign. The public	
20	32	awareness campaign shall emphasize, through a variety of media	
20	33	activities, the importance of maximum involvement of both	DETAIL: This is a decrease of $3,968 compared to the estimated net FY 2009 allocation.
20	34	parents in the lives of their children as well as the	
20	35	importance of payment of child support obligations.	
21	1	2. Federal access and visitation grant moneys shall be	Specifies the process for utilization of receipts from federal Access

PG LN	House File 811	Explanation
21 2	issued directly to private not=for=profit agencies that provide services designed to increase compliance with the child access provisions of court orders, including but not limited to neutral visitation sites and mediation services.	and Visitation Grants.
21 6	3. The appropriation made to the department for child support recovery may be used throughout the fiscal year in the manner necessary for purposes of cash flow management, and for cash flow management purposes the department may temporarily draw more than the amount appropriated, provided the amount appropriated is not exceeded at the close of the fiscal year.	Permits the DHS to use the appropriation 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.
21 12	4. For Iowa orders, notwithstanding section 598.22A and effective October 1, 2009, support arrearages for which all rights have been and remain assigned to the department for time periods prior to October 1, 1997, when a child did not receive assistance under Title IV=A of the federal Social Security Act or when a child received foster care services, are considered satisfied up to the amount of assistance received or foster care funds expended, and the child support recovery unit shall update court records accordingly. The unit shall send information regarding the provisions of this subsection to the obligor and obligee by regular mail to the last known address, and any objection by an obligor or an obligee shall be heard by the district court.	CODE: Retires child support debt owed to the State prior to October 1, 1997. DETAIL: If the Department wished to continue to collect this debt, the federal government would have required a $200,000 upgrade to their computer system. The State only collects about $1,000 per month from the debt owed before October 1, 1997. The debt is owed solely to the State and no parents are owed these funds.
21 25	Sec. 9. MEDICAL ASSISTANCE. There is appropriated from the general fund of the state to the department of human services for the fiscal year beginning July 1, 2009, and ending June 30, 2010, the following amount, or so much thereof as is necessary, to be used for the purpose designated: For medical assistance reimbursement and associated costs as specifically provided in the reimbursement methodologies in effect on June 30, 2009, except as otherwise expressly authorized by law, including reimbursement for abortion	General Fund appropriation to the DHS for the Medical Assistance (Medicaid) Program. DETAIL: This is a net increase of $84,311,517 compared to the estimated net FY 2009 appropriation. Major increases and decreases include: • An increase of $53,356,130 for increases in utilization and enrollment. • An increase of $9,000,000 to replace funding for the four Mental

PG	LN	House File 811	Explanation
21	34	services which shall be available under the medical assistance	Health Institutes phased out from the IowaCare Program.
21	35	program only for those abortions which are medically	• An increase of $7,060,000 for increased clawback payments for Medicare Part D.
22	1	necessary:	• An increase of $6,038,070 to annualize the Home and Community-Based Services Waiver.
22	2	..... $677,613,847	• An increase of $3,819,318 to replace one-time carryforward funds from FY 2008. • An increase of $988,923 for Targeted Case Management. • An increase of $102,751 for a 5.00% increase for Family Planning Provider rates. • A decrease of $500,000 to eliminate funding for the Iowa Health Care Collaborative. • A decrease of $50,000 to the Iowa Chronic Care Consortium. • A decrease of $7,327,735 to shift General Fund Medicaid funding to the Health Care Trust Fund. • An increase of $94,968,712 to reflect a decrease in funding from the Senior Living Trust Fund. • A decrease of $83,144,652 to reflect available funds from the 6.20% Federal Medical Assistance Matching Percentage (FMAP) adjustment in the federal American Reinvestment and Recovery Act of 2009. NOTE: Section 84 of SF 478 (FY 2010 Standing Appropriations Bill) amends the Medicaid appropriation to add an additional $4,335,993 to the Disproportionate Share Hospital (DSH) payment.
22	3	1. Medically necessary abortions are those performed under	Specifies conditions that permit the Medical Assistance Program to reimburse providers for abortion services. DETAIL: This is the same language that has been included for several years.
22	4	any of the following conditions:	
22	5	a. The attending physician certifies that continuing the	
22	6	pregnancy would endanger the life of the pregnant woman.	
22	7	b. The attending physician certifies that the fetus is	
22	8	physically deformed, mentally deficient, or afflicted with a	
22	9	congenital illness.	
22	10	c. The pregnancy is the result of a rape which is reported	
22	11	within 45 days of the incident to a law enforcement agency or	
22	12	public or private health agency which may include a family	
22	13	physician.	

PG LN	House File 811	Explanation
22 14	d. The pregnancy is the result of incest which is reported	
22 15	within 150 days of the incident to a law enforcement agency or	
22 16	public or private health agency which may include a family	
22 17	physician.	
22 18	e. Any spontaneous abortion, commonly known as a	
22 19	miscarriage, if not all of the products of conception are	
22 20	expelled.	
22 21	2. The department shall utilize not more than $60,000 of	Requires the DHS to use a maximum of $60,000 of the funds appropriated for Medical Assistance to continue the Acquired Immune Deficiency Syndrome/Human Immunodeficiency Virus (AIDS/HIV) Health Insurance Premium Payment as established during the Second Extraordinary Session in 1992.
22 22	the funds appropriated in this section to continue the	
22 23	AIDS/HIV health insurance premium payment program as	
22 24	established in 1992 Iowa Acts, Second Extraordinary Session,	
22 25	chapter 1001, section 409, subsection 6. Of the funds	
22 26	allocated in this subsection, not more than $5,000 may be	
22 27	expended for administrative purposes.	DETAIL: Maintains the current level of General Fund support.
22 28	3. Of the funds appropriated in this Act to the department	Requires $950,000 of the Substance Abuse Grants appropriation in the Department of Public Health to be transferred to the Medical Assistance Program in the DHS for continuation of the Managed Substance Abuse Treatment Program. Also, requires the DHS to assume management of the Program.
22 29	of public health for addictive disorders, $950,000 for the	
22 30	fiscal year beginning July 1, 2009, shall be transferred to	
22 31	the department of human services for an integrated substance	
22 32	abuse managed care system. The department shall not assume	
22 33	management of the substance abuse system in place of the	
22 34	managed care contractor unless such a change in approach is	
22 35	specifically authorized in law. The departments of human	
23 1	services and public health shall work together to maintain the	DETAIL: Maintains the current level of General Fund support. The Managed Substance Abuse Treatment Program was funded for the first time in FY 1996.
23 2	level of mental health and substance abuse services provided	
23 3	by the managed care contractor through the Iowa plan for	
23 4	behavioral health. Each department shall take the steps	
23 5	necessary to continue the federal waivers as necessary to	
23 6	maintain the level of services.	
23 7	4. a. The department shall aggressively pursue options	Requires the DHS to aggressively pursue options for assisting special needs individuals that become ineligible for continued services under the Early and Periodic Screening, Diagnosis, and Treatment (EPSDT) Program as a result of turning 21 years of age. The individuals are to have been approved for additional assistance through the DHS
23 8	for providing medical assistance or other assistance to	
23 9	individuals with special needs who become ineligible to	
23 10	continue receiving services under the early and periodic	

PG	LN	House File 811	Explanation
23	11	screening, diagnosis, and treatment program under the medical	exception to policy process, but have health care needs exceeding available funding. This Section requires the Department to allocate $100,000 to fund one or more pilot projects focused on providing care in the community. DETAIL: Maintains the current level of General Fund support.
23	12	assistance program due to becoming 21 years of age who have	
23	13	been approved for additional assistance through the	
23	14	department's exception to policy provisions, but who have	
23	15	health care needs in excess of the funding available through	
23	16	the exception to policy provisions.	
23	17	b. Of the funds appropriated in this section, $100,000	
23	18	shall be used for participation in one or more pilot projects	
23	19	operated by a private provider to allow the individual or	
23	20	individuals to receive service in the community in accordance	
23	21	with principles established in Olmstead v. L.C., 527 U.S. 581	
23	22	(1999), for the purpose of providing medical assistance or	
23	23	other assistance to individuals with special needs who become	
23	24	ineligible to continue receiving services under the early and	
23	25	periodic screening, diagnosis, and treatment program under the	
23	26	medical assistance program due to becoming 21 years of age who	
23	27	have been approved for additional assistance through the	
23	28	department's exception to policy provisions, but who have	
23	29	health care needs in excess of the funding available through	
23	30	the exception to the policy provisions.	
23	31	5. Of the funds appropriated in this section, up to	Permits the DHS to transfer up to $3,050,082 to Field Operations or General Administration for implementation costs of the new Medicare Part D prescription drug benefit and low-income subsidy application process.
23	32	$3,050,082 may be transferred to the field operations or	
23	33	general administration appropriations in this Act for	
23	34	operational costs associated with Part D of the federal	
23	35	Medicare Prescription Drug, Improvement, and Modernization Act	
24	1	of 2003, Pub. L. No. 108=173.	
24	2	6. Of the funds appropriated in this section, not more	Prohibits the Department from expending more than $166,600 for outreach for the Medicaid and hawk-i programs.
24	3	than $166,600 shall be used to enhance outreach efforts. The	
24	4	department may transfer funds allocated in this subsection to	
24	5	the appropriations in this division of this Act for general	
24	6	administration, the state children's health insurance program,	
24	7	or medical contracts, as necessary, to implement the outreach	
24	8	efforts.	
24	9	7. Of the funds appropriated in this section, up to	Permits a maximum of $442,100 for Clinical Assessment Services.

PG	LN	House File 811	Explanation
24	10	$442,100 may be transferred to the appropriation in this Act	
24	11	for medical contracts to be used for clinical assessment	DETAIL: Maintains the current allocation level.
24	12	services related to remedial services in accordance with	
24	13	federal law.	
24	14	8. A portion of the funds appropriated in this section may	Permits the Department to use a portion of the funds appropriated to carry out the Payment Error Rate Measurement (PERM) Program. This brings the Department into compliance with the federal Improper Payments Information Act of 2002.
24	15	be transferred to the appropriations in this division of this	
24	16	Act for general administration, medical contracts, the state	
24	17	children's health insurance program, or field operations to be	
24	18	used for the state match cost to comply with the payment error	
24	19	rate measurement (PERM) program for both the medical	
24	20	assistance and state children's health insurance programs as	
24	21	developed by the centers for Medicare and Medicaid services of	
24	22	the United States department of health and human services to	
24	23	comply with the federal Improper Payments Information Act of	
24	24	2002, Pub. L. No. 107=300.	
24	25	9. It is the intent of the general assembly that the	Specifies legislative intent that the Department continue to implement the recommendations of the ABCD II Clinical Panel for changes to billing procedures, codes, and eligible service providers.
24	26	department continue to implement the recommendations of the	
24	27	assuring better child health and development initiative II	
24	28	(ABCDII) clinical panel to the Iowa early and periodic	
24	29	screening, diagnostic, and treatment services healthy mental	
24	30	development collaborative board regarding changes to billing	
24	31	procedures, codes, and eligible service providers.	
24	32	10. Of the funds appropriated in this section, a	Requires the Department to provide residents in nursing facilities, ICF/MRs, and ICF/MIs with a personal needs allowance of $50 per month.
24	33	sufficient amount is allocated to supplement the incomes of	
24	34	residents of nursing facilities, intermediate care facilities	
24	35	for persons with mental illness, and intermediate care	
25	1	facilities for persons with mental retardation, with incomes	DETAIL: There are no changes in this provision from FY 2009.
25	2	of less than $50 in the amount necessary for the residents to	
25	3	receive a personal needs allowance of $50 per month pursuant	
25	4	to section 249A.30A.	
25	5	11. Of the funds appropriated in this section, the	Transfers funds from the Medical Assistance appropriation to the four

PG	LN	House File 811	Explanation
25	6	following amounts shall be transferred to appropriations made	Mental Health Institutes.
25	7	in this division of this Act to the state mental health	
25	8	institutes:	DETAIL: The funds are transferred to replace funding from the IowaCare Program that is being phased out in FY 2009 and FY 2010.
25	9	a. Cherokee mental health institute ..... $ 9,098,425	
25	10	b. Clarinda mental health institute ..... $ 1,977,305	
25	11	c. Independence mental health institute ..... $ 9,045,894	
25	12	d. Mount Pleasant mental health institute .... $ 5,752,587	
25	13	12. a. Of the funds appropriated in this section,	Allocates $2,687,889 for the State match for the Disproportionate Share Hospital (DSH) payment of $7,321,954.
25	14	$2,687,889 is allocated for state match for disproportionate	
25	15	share hospital payment of $7,321,954 to hospitals that meet	
25	16	both of the following conditions:	NOTE: Section 85 of SF 478 (FY 2010 Standing Appropriations Bill) amends this Section to allocate a total of $7,023,882 for the DSH payment for a total State and federal payment of $19,133,430.
25	17	(1) The hospital qualifies for disproportionate share and	
25	18	graduate medical education payments.	
25	19	(2) The hospital is an Iowa state=owned hospital with more	
25	20	than 500 beds and eight or more distinct residency specialty	
25	21	or subspecialty programs recognized by the American college of	
25	22	graduate medical education.	
25	23	b. Distribution of the disproportionate share payment	
25	24	shall be made on a monthly basis. The total amount of	
25	25	disproportionate share payments including graduate medical	
25	26	education, enhanced disproportionate share, and Iowa	
25	27	state=owned teaching hospital payments shall not exceed the	
25	28	amount of the state's allotment under Pub. L. No. 102=234. In	
25	29	addition, the total amount of all disproportionate share	
25	30	payments shall not exceed the hospital=specific	
25	31	disproportionate share limits under Pub. L. No. 103=66.	
25	32	13. Of the funds appropriated in this section, up to	Transfers up to $4,634,065 to the IowaCare Program.
25	33	$4,634,065 may be transferred to the IowaCare account created	
25	34	in section 249J.24.	
25	35	14. Of the funds appropriated in this section, $200,000	Allocates $200,000 to the Iowa Chronic Care Consortium.
26	1	shall be used for the Iowa chronic care consortium pursuant to	
26	2	2003 Iowa Acts, chapter 112, section 12, as amended by 2003	DETAIL: This is a decrease of $50,000 compared to the FY 2009 allocation.
26	3	Iowa Acts, chapter 179, sections 166 and 167.	

PG LN	House File 811	Explanation
26 4	15. One hundred percent of the nonfederal share of payments to area education agencies that are medical assistance providers for medical assistance=covered services provided to medical assistance=covered children, shall be made from the appropriation made in this section.	Allocates Medicaid funds to Area Education Agencies.
26 9	16. a. Any new or renewed contract entered into by the department with a third party to administer behavioral health services under the medical assistance program shall provide that any interest earned on payments from the state during the state fiscal year shall be remitted to the department for deposit in a separate account after the end of the fiscal year.	Specifies that any new or renewed contract with a third party behavioral health administrator requires interest earned to be remitted to the Department for deposit in a separate account that can only be used for Health and Human Services related activities.
26 16	b. The department shall continue to maintain a separate account within the medical assistance budget for the deposit of all funds remitted pursuant to a contract with a third party to administer behavioral health services under the medical assistance program established pursuant to 2008 Iowa Acts 1187, section 9, subsection 20. Notwithstanding section 8.33, funds remaining in the account that remain unencumbered or unobligated at the end of any fiscal year shall not revert but shall remain available in succeeding fiscal years and shall be used only in accordance with appropriations from the account for health and human services=related purposes.	
26 27	c. For the fiscal year beginning July 1, 2009, funds in the separate account are appropriated to the department of human services as state matching funds for the medical assistance program.	Appropriates remitted funds under the current contract with Magellan Behavioral Health to the Medical Assistance Program.
26 31	17. The department shall continue to implement the provisions in 2007 Iowa Acts, chapter 218, section 124 and section 126, as amended by 2008 Iowa Acts, chapter 1188, section 55, relating to eligibility for certain persons with disabilities under the medical assistance program in	Requires the Department to continue the implementation of the federal Family Opportunity Act. DETAIL: The Family Opportunity Act is a Medicaid buy-in Program for children with family income of up to 300.00% of the Federal Poverty Level and meet SSI-eligibility requirements.

PG LN	House File 811	Explanation
27 1	accordance with the federal family opportunity Act.	
27 2 27 3 27 4 27 5 27 6 27 7	18. The department shall add behavior programming, crisis intervention, and mental health outreach services to the home and community=based services mental retardation waiver in order to continue necessary home and community=based services for persons transitioning into the community under the money follows the person grant program.	Requires the Department to add behavior programming, crisis intervention, and mental health outreach services to the Mental Retardation Waiver under the Home and Community-Based Services Waiver Programs. DETAIL: This change is required to maintain compliance with the federal Money Follows the Person Grant.
27 8 27 9 27 10 27 11 27 12 27 13 27 14	19. It is the intent of the general assembly that the Iowa autism council established in section 256.35A shall work with the department of human services to review the option of implementing a home and community=based services waiver for individuals up to 21 years of age with autism under the medical assistance program. The council shall present final recommendations to the general assembly by January 15, 2010.	Requires the Department to review options for implementing a Home and Community-Based Waiver for individuals under the age of 21 with autism.
27 15 27 16 27 17 27 18 27 19 27 20 27 21 27 22 27 23	20. The department shall issue a request for proposals to implement a correct coding initiative for the medical assistance program to promote correct coding of health care services by providers, to evaluate claims submissions, and to prevent improper payment. The department may use a portion of any savings projected to result from the initiative for one=time implementation costs and for on=going costs of the contract to the extent that savings exceed costs of the initiative.	Requires the Department to issue a Request for Proposals (RFP) to implement a correct coding initiative for the Medicaid Program. This will help eliminate any improper payments and save the State money.
27 24 27 25 27 26 27 27 27 28 27 29 27 30	21. The department shall request a medical assistance state plan amendment to be effective July 1, 2010, that specifies the coverage criteria for applied behavioral analysis therapy in the remedial services program. Such coverage criteria shall be based on the best practices in medical literature that have been documented to achieve results.	Requires the Department to submit a State Plan Amendment to cover Applied Behavioral Analysis Therapy in the Remedial Services Program to be effective for FY 2011.

PG LN	House File 811	Explanation
27 31	22. The department may issue a request for proposals to implement a transportation brokerage system for administering medical assistance program medical transportation payments and client referrals. Any request for proposals shall be structured to be budget neutral to the state.	Permits the Department to issue an RFP to implement a transportation brokerage system for Medicaid transportation payments and client referrals.
28 1	Sec. 10. HEALTH INSURANCE PREMIUM PAYMENT PROGRAM. There is appropriated from the general fund of the state to the department of human services for the fiscal year beginning July 1, 2009, and ending June 30, 2010, the following amount, or so much thereof as is necessary, to be used for the purpose designated: For administration of the health insurance premium payment program, including salaries, support, maintenance, and miscellaneous purposes, and for not more than the following full=time equivalent positions: ..... $ 508,011 ..... FTEs 19.00	General Fund appropriation to the DHS for the Health Insurance Premium Payment (HIPP) Program. DETAIL: This is a decrease of $62,913 and 2.00 FTE positions compared to the estimated net FY 2009 appropriation for a general reduction of 11.30%.
28 13	Sec. 11. MEDICAL CONTRACTS. There is appropriated from the general fund of the state to the department of human services for the fiscal year beginning July 1, 2009, and ending June 30, 2010, the following amount, or so much thereof as is necessary, to be used for the purpose designated: For medical contracts, including salaries, support, maintenance, and miscellaneous purposes, and for not more than the following full=time equivalent positions: ..... $ 13,651,503 ..... FTEs 6.00	General Fund appropriation to the DHS for Medical Contracts. DETAIL: This is a net decrease of $301,564 and no change in FTE positions compared to the estimated net FY 2009 appropriation. Changes include: • An increase of $1,298,761 for vendor and contract procurement, inflation, and system changes required by federal law. • A decrease of $1,600,325 for a general reduction of 11.30%.
28 23	Sec. 12. STATE SUPPLEMENTARY ASSISTANCE. 1. There is appropriated from the general fund of the state to the department of human services for the fiscal year beginning July 1, 2009, and ending June 30, 2010, the following amount, or so much thereof as is necessary, to be	General Fund appropriation to the DHS for State Supplementary Assistance. DETAIL: This is a net increase of $80,432 compared to the estimated net FY 2009. Major increases and decreases include:

PG LN	House File 811	Explanation
28 28	used for the purpose designated:	• An increase of $2,426,972 to maintain Maintenance of Effort requirements. • A decrease of $500,000 to reflect an available carryforward. • An increase of $182,381 to replace funding from the Health Iowan's Tobacco Trust Fund. • A decrease of $2,028,921 for a general reduction of 11.30%.
28 29	For the state supplementary assistance program:	
28 30	..... $ 18,412,646	
28 31	2. The department shall increase the personal needs	Requires the DHS to increase the personal needs allowance of residential care facilities residents at the same rate and time as federal Supplemental Security Income (SSI) and Social Security benefits are increased. Permits the DHS to adopt emergency rules for implementation.
28 32	allowance for residents of residential care facilities by the	
28 33	same percentage and at the same time as federal supplemental	
28 34	security income and federal social security benefits are	
28 35	increased due to a recognized increase in the cost of living.	
29 1	The department may adopt emergency rules to implement this	
29 2	subsection.	
29 3	3. If during the fiscal year beginning July 1, 2009, the	Permits the DHS to adjust rates for State Supplementary Assistance to meet federal Maintenance of Effort requirements. Permits the DHS to adopt emergency rules for implementation.
29 4	department projects that state supplementary assistance	
29 5	expenditures for a calendar year will not meet the federal	
29 6	pass=through requirement specified in Title XVI of the federal	
29 7	Social Security Act, section 1618, as codified in 42 U.S.C.	
29 8	1382g, the department may take actions including but not	
29 9	limited to increasing the personal needs allowance for	
29 10	residential care facility residents and making programmatic	
29 11	adjustments or upward adjustments of the residential care	
29 12	facility or in=home health=related care reimbursement rates	
29 13	prescribed in this division of this Act to ensure that federal	
29 14	requirements are met. In addition, the department may make	
29 15	other programmatic and rate adjustments necessary to remain	
29 16	within the amount appropriated in this section while ensuring	
29 17	compliance with federal requirements. The department may	
29 18	adopt emergency rules to implement the provisions of this	
29 19	subsection.	
29 20	Sec. 13. STATE CHILDREN'S HEALTH INSURANCE PROGRAM.	General Fund appropriation to the DHS for the Children's Health Insurance Program, also known as the Healthy and Well Kids in Iowa
29 21	1. There is appropriated from the general fund of the	

PG LN	House File 811	Explanation
29 22	state to the department of human services for the fiscal year	(hawk-i) Program.
29 23	beginning July 1, 2009, and ending June 30, 2010, the	
29 24	following amount, or so much thereof as is necessary, to be	DETAIL: This is a net increase of $968,978 compared to the estimated net FY 2009 appropriation. Major increases and decreases include:
29 25	used for the purpose designated:	
29 26	For maintenance of the healthy and well kids in Iowa (hawk=	
29 27	i) program pursuant to chapter 514I for receipt of federal	• An increase of $276,850 to continue to enroll additional eligible children.
29 28	financial participation under Title XXI of the federal Social	• An increase of $4,838,432 to replace one-time carryforward funds from FY 2008.
29 29	Security Act, which creates the state children's health	• An increase of $219,000 to continue outreach and advertising efforts.
29 30	insurance program:	• A decrease of $2,500,000 to reflect available funds in the hawk-i Trust Fund.
29 31	..... $ 14,629,830	• A decrease of $234,282 for an annual FMAP adjustment.
		• A decrease of $1,631,022 for a general reduction of 11.30%.
29 32	2. Of the funds appropriated in this section, $128,950 is	Allocates $128,950 to continue an outreach contract with the Department of Public Health and allocates up to $90,050 for additional advertising and outreach.
29 33	allocated for continuation of the contract for advertising and	
29 34	outreach with the department of public health and $90,050 is	
29 35	allocated for other advertising and outreach.	
30 1	Sec. 14. CHILD CARE ASSISTANCE. There is appropriated	General Fund appropriation to the DHS for the Child Care Assistance Programs.
30 2	from the general fund of the state to the department of human	
30 3	services for the fiscal year beginning July 1, 2009, and	DETAIL: This is a net decrease of $2,509,260 compared to the estimated net FY 2009 appropriation. An additional $25,831,177 is appropriated to child care programs from the TANF appropriations to DHS in this Division for FY 2010. Changes to the General Fund appropriation include:
30 4	ending June 30, 2010, the following amount, or so much thereof	
30 5	as is necessary, to be used for the purpose designated:	
30 6	For child care programs:	
30 7	..... $ 37,974,472	• An increase of $1,135,646 for annual caseload growth for the Child Care Subsidy Program.
		• A decrease of $872,509 to reflect available carryforward from FY 2009.
		• A decrease of $445,000 to reflect an increase in federal Temporary Assistance for Needy Families (TANF) funding.

PG LN	House File 811	Explanation
		• A decrease of $161,471 to reflect decreased costs for the Quality Rating System (QRS) Program. • A decrease of $179,175 to reflect an increase in the Federal Medical Assistance Percentage (FMAP) rate. • An increase of $2,600,000 to replace funding from the Child Care Tax Credit Fund that is being eliminated beginning in FY 2010. • A decrease of $4,586,751 to implement an across-the-board reduction of 11.32% for Child Care Assistance Programs.
30 8 30 9 30 10 30 11 30 12 30 13 30 14 30 15 30 16 30 17	1. Of the funds appropriated in this section, $34,417,754 shall be used for state child care assistance in accordance with section 237A.13. It is the intent of the general assembly to appropriate sufficient funding for the state child care assistance program for the fiscal year beginning July 1, 2010, in order to avoid establishment of waiting list requirements by the department in the preceding fiscal year in anticipation that enhanced funding under the federal American Recovery and Reinvestment Act of 2009 will not be replaced for the fiscal year beginning July 1, 2010.	Allocates $34,417,754 to provide child care assistance for low-income employed Iowans. Specifies it is the intent of the General Assembly to appropriate sufficient funding to the Program in FY 2011 to avoid the DHS beginning a waiting list for services in FY 2010 for FY 2011. DETAIL: This is a decrease of $3,171,815 compared to the FY 2009 allocation. NOTE: An additional $9,050,000 is provided to child care assistance from the American Reinvestment and Recovery Act of 2009 via increased funding for the Child Care Development Block Grant for FY 2010.
30 18 30 19 30 20 30 21 30 22 30 23 30 24	2. Nothing in this section shall be construed or is intended as or shall imply a grant of entitlement for services to persons who are eligible for assistance due to an income level consistent with the waiting list requirements of section 237A.13. Any state obligation to provide services pursuant to this section is limited to the extent of the funds appropriated in this section.	Specifies that assistance from the Child Care Assistance Program is not an entitlement and the State's obligation to provide services is limited to the funds available.
30 25 30 26 30 27 30 28 30 29 30 30	3. Of the funds appropriated in this section, $480,453 is allocated for the statewide program for child care resource and referral services under section 237A.26. A list of the registered and licensed child care facilities operating in the area served by a child care resource and referral service shall be made available to the families receiving state child	Allocates $480,453 for the Statewide Child Care Resource and Referral Program. Requires a list of the registered and licensed child care facilities to be made available by Child Care Resource and Referral Programs to families receiving assistance under the Child Care Assistance Program.

PG	LN	House File 811	Explanation
30	31	care assistance in that area.	DETAIL: This is a decrease of $45,071 compared to the FY 2009 allocation for a general reduction.
30	32	4. a. Of the funds appropriated in this section,	Allocates $1,536,181 for the Quality Rating System (QRS).
30	33	$1,536,181 is allocated for child care quality improvement	
30	34	initiatives including but not limited to the voluntary quality	DETAIL: This is a decrease of $144,107 compared to the FY 2009 allocation for a general reduction.
30	35	rating system in accordance with section 237A.30.	
31	1	b. The department shall revise the achievement bonus	Requires the Department of Human Services to revise the current method of awarding achievement bonuses for participants in the QRS.
31	2	provisions under the voluntary quality rating system to	
31	3	provide that the bonus amount paid for a provider renewing a	
31	4	rating at levels 2 through 4 in years subsequent to the	
31	5	initial rating shall not be more than 50 percent of the amount	
31	6	of the initial bonus award. For providers who renew at a	
31	7	lower rating level than previously awarded, the achievement	
31	8	bonus amount shall not be more than 50 percent of the award	
31	9	amount for the lower rating level.	
31	10	5. The department may use any of the funds appropriated in	Permits funds appropriated for child care to be used as matching funds for federal grants. Specifies that funds are obligated when expenditures are projected or allocated to the DHS regions.
31	11	this section as a match to obtain federal funds for use in	
31	12	expanding child care assistance and related programs. For the	
31	13	purpose of expenditures of state and federal child care	DETAIL: This provision was also in effect for FY 2009.
31	14	funding, funds shall be considered obligated at the time	
31	15	expenditures are projected or are allocated to the	
31	16	department's service areas. Projections shall be based on	
31	17	current and projected caseload growth, current and projected	
31	18	provider rates, staffing requirements for eligibility	
31	19	determination and management of program requirements including	
31	20	data systems management, staffing requirements for	
31	21	administration of the program, contractual and grant	
31	22	obligations and any transfers to other state agencies, and	
31	23	obligations for decategorization or innovation projects.	
31	24	6. A portion of the state match for the federal child care	Requires a portion of the State match for the federal Child Care and

PG LN	House File 811	Explanation
31 25	and development block grant shall be provided as necessary to meet federal matching funds requirements through the state general fund appropriation made for child development grants and other programs for at=risk children in section 279.51.	Development Block Grant to be provided from the State appropriation for child development grants and other programs for at-risk children.
31 29	7. Of the funds appropriated in this section, $1,097,084 is transferred to the Iowa empowerment fund from which it is appropriated to be used for professional development for the system of early care, health, and education.	Requires a transfer of $1,097,084 to the Iowa Empowerment Board for professional development opportunities for individuals working in early care, health, and education. DETAIL: This is a decrease of $102,916 compared to the FY 2009 transfer for a general reduction.
31 33	8. Of the funds appropriated in this section, $350,000 shall be allocated to a county with a population of more than 300,000 to be used for continuation of a grant to support child care center services provided to children with mental, physical, or emotional challenges in order for the children to remain in a home or family setting.	Requires $350,000 of the Child Care appropriation to be transferred to Polk County to support child care center services for children with various special needs. DETAIL: Maintains the current level of support. This item received initial funding in FY 2009 as a one-time grant.
32 4	9. Of the amount allocated in subsection 1, $93,000 shall be used for the public purpose of providing a grant to a neighborhood affordable housing and services organization established in a county with a population of more than 350,000, that provides at least 300 apartment units to house more than 1,000 residents, of which more than 80 percent belong to a minority population and at least 95 percent are headed by a single parent and have an income below federal poverty guidelines, to be used for child development programming for children residing in the housing.	Requires $93,000 to be used for child development programming for children residing in the Oakridge Neighborhood in the city of Des Moines in Polk County. DETAIL: This is a new appropriation for FY 2010.
32 14	10. Notwithstanding section 8.33, moneys appropriated in this section or received from the federal appropriations made for the purposes of this section that remain unencumbered or unobligated at the close of the fiscal year shall not revert to any fund but shall remain available for expenditure for the	CODE: Requires nonreversion of FY 2009 Child Care Assistance Program funds.

PG LN	House File 811	Explanation
32 19	purposes designated until the close of the succeeding fiscal	
32 20	year.	
32 21	Sec. 15. JUVENILE INSTITUTIONS. There is appropriated	
32 22	from the general fund of the state to the department of human	
32 23	services for the fiscal year beginning July 1, 2009, and	
32 24	ending June 30, 2010, the following amounts, or so much	
32 25	thereof as is necessary, to be used for the purposes	
32 26	designated:	
32 27	1. For operation of the Iowa juvenile home at Toledo and	General Fund appropriation to the DHS for the Juvenile Home at Toledo.
32 28	for salaries, support, and maintenance, and for not more than	
32 29	the following full=time equivalent positions:	
32 30	..... $ 6,754,759	DETAIL: This is a decrease of $836,515 and 1.00 FTE position compared to the estimated net FY 2009 appropriation for the implementation of an 11.01% across-the-board reduction for FY 2010.
32 31	..... FTEs 125.00	NOTE: An additional $836,515 is appropriated to Toledo from the Human Services Reinvestment Fund established in HF 820 (FY 2010 Federal Funds Appropriations Bill).
32 32	2. For operation of the state training school at Eldora	General Fund appropriation to the DHS for the State Training School at Eldora.
32 33	and for salaries, support, and maintenance, and for not more	
32 34	than the following full=time equivalent positions:	
32 35	..... $ 10,717,787	DETAIL: This is a decrease of $1,327,300 and no change to FTE positions compared to the estimated net FY 2009 appropriation for the implementation of an 11.31% across-the-board reduction for FY 2010.
33 1	..... FTEs 202.70	NOTE: An additional $1,327,300 is appropriated to Eldora from the Human Services Reinvestment Fund established in HF 820 (FY 2010 Federal Funds Appropriations Bill).
33 2	3. A portion of the moneys appropriated in this section	Requires a portion of the funds appropriated for the two juvenile institutions to be used for pregnancy prevention in FY 2010.
33 3	shall be used by the state training school and by the Iowa	
33 4	juvenile home for grants for adolescent pregnancy prevention	
33 5	activities at the institutions in the fiscal year beginning	DETAIL: This provision was also in effect for FY 2009.

PG LN	House File 811	Explanation
33 6	July 1, 2009.	
33 7	Sec. 16. CHILD AND FAMILY SERVICES.	General Fund appropriation to the DHS for Child and Family Services.
33 8	1. There is appropriated from the general fund of the	
33 9	state to the department of human services for the fiscal year	
33 10	beginning July 1, 2009, and ending June 30, 2010, the	
33 11	following amount, or so much thereof as is necessary, to be	
33 12	used for the purpose designated:	
33 13	For child and family services:	
33 14	..... $ 90,591,451	

DETAIL: This is a net General Fund increase of $1,619,752 compared to the estimated net FY 2009 appropriation. An additional $32,084,430 is allocated to child and family services from the DHS TANF appropriation in this Division. Changes to the General Fund appropriation include:

- A decrease of $98,500 to eliminate State funding for a child protection center in Black Hawk County.
- A decrease of $175,984 for protective child care services for a general reduction.
- A decrease of $136,895 for the Preparation for Adult Living (PALS) Program for a general reduction.
- A decrease of $209,552 for adolescent monitoring services for a general reduction.
- A decrease of $78,451 for supervised treatment for a general reduction.
- A decrease of $62,579 for school-based supervision services for a general reduction.
- A decrease of $49,530 for the Juvenile Drug Courts for a general reduction.
- A decrease of $702,673 for family foster care services for a general reduction.
- A decrease of $180,126 for foster parent recruitment and retention for a general reduction.
- A decrease of $353,382 for shelter care beds funding.
- A decrease of $1,357,091 for group care services.
- A decrease of $53,841 for supervised apartment living services for a general reduction.
- A decrease of $57,611 for the child welfare information system for a general reduction.
- A decrease of $38,006 for child welfare services support for a general reduction.
- A decrease of $375,000 to eliminate State funding for technical assistance and quality assurance.
- An increase of $3,579,852 for general child welfare services. This

PG LN	House File 811	Explanation
		allocation was previously funded by the HITT Fund. • An increase of $442,524 to reflect updated estimates to the Foster Care Recovery Fund based on current and projected recovery rates. • An increase of $1,717,753 to replace one-time FY 2008 carryforward funding for decategorization. The FY 2009 allocation was funded with carryforward funds that were allocated to decategorization in prior State fiscal years and would have otherwise reverted to the General Fund after June 30, 2008. • An increase of $100,000 for child welfare provider training. • An increase of $406,391 for foster and adoptive family peer support. • A decrease of $93,271 to reflect updated estimates to Title IV-E funds based on current eligibility rates and the projected FY 2010 Federal Medical Assistance Percentage (FMAP) rate. • A decrease of $146,522 to eliminate State funding for four diversion and mediation pilot projects. • A decrease of $78,000 for a multi-dimensional foster care treatment level pilot program for a general reduction. • A decrease of $379,754 for a general reduction for Child Welfare Programs for FY 2010. NOTE: An additional $2,000,000 of federal funds from the American Reinvestment and Recovery Act of 2009 is appropriated in HF 820 (FY 2010 Federal Funds Appropriations Bill) to child and family services for FY 2010.
33 15 33 16 33 17 33 18 33 19 33 20 33 21 33 22	2. In order to address a reduction of $5,200,000 from the amount allocated under the appropriation made for the purposes of this section in prior years for purposes of juvenile delinquent graduated sanction services, up to $5,200,000 of the amount of federal temporary assistance for needy families block grant funding appropriated in this division of this Act for child and family services shall be made available for purposes of juvenile delinquent graduated sanction services.	Allocates $5,200,000 in Temporary Assistance to Needy Families (TANF) funds for delinquency programs. DETAIL: Maintains the current allocation level.
33 23	3. The department may transfer funds appropriated in this	Permits the DHS to transfer funds appropriated for Child and Family Services to Medicaid, the Family Investment Program (FIP), General

PG LN	House File 811	Explanation
33 24	section as necessary to pay the nonfederal costs of services	Administration, or Field Operations to pay for costs associated with child welfare services in these areas.
33 25	reimbursed under the medical assistance program, state child	
33 26	care assistance program, or the family investment program	
33 27	which are provided to children who would otherwise receive	
33 28	services paid under the appropriation in this section. The	
33 29	department may transfer funds appropriated in this section to	
33 30	the appropriations made in this division of this Act for	
33 31	general administration and for field operations for resources	
33 32	necessary to implement and operate the services funded in this	
33 33	section.	
33 34	4. a. Of the funds appropriated in this section, up to	Allocates up to $34,200,400 for group care services and maintenance costs.
33 35	$34,200,400 is allocated as the statewide expenditure target	
34 1	under section 232.143 for group foster care maintenance and	
34 2	services. If the department projects that such expenditures	NOTE: House File 820 (FY 2010 Federal Funds Appropriations Bill) requires the DHS to transfer $1,387,581 in FY 2010 to the Human Services Reinvestment Fund and decreases the group foster care maintenance and services target to $32,812,819. The new target is a decrease of $3,028,925 compared to the FY 2009 allocation.
34 3	for the fiscal year will be less than the target amount	
34 4	allocated in this lettered paragraph, the department may	
34 5	reallocate the excess to provide additional funding for	
34 6	shelter care or the child welfare emergency services addressed	
34 7	with the allocation for shelter care.	
34 8	b. If at any time after September 30, 2009, annualization	Requires the group foster care expenditure target to be reviewed under certain conditions and requires review hearings when appropriate.
34 9	of a service area's current expenditures indicates a service	
34 10	area is at risk of exceeding its group foster care expenditure	
34 11	target under section 232.143 by more than 5 percent, the	
34 12	department and juvenile court services shall examine all group	
34 13	foster care placements in that service area in order to	
34 14	identify those which might be appropriate for termination. In	
34 15	addition, any aftercare services believed to be needed for the	
34 16	children whose placements may be terminated shall be	
34 17	identified. The department and juvenile court services shall	
34 18	initiate action to set dispositional review hearings for the	
34 19	placements identified. In such a dispositional review	
34 20	hearing, the juvenile court shall determine whether needed	
34 21	aftercare services are available and whether termination of	
34 22	the placement is in the best interest of the child and the	

PG LN	House File 811	Explanation
34 23	community.	
34 24 34 25 34 26 34 27 34 28 34 29 34 30	5. In accordance with the provisions of section 232.188, the department shall continue the child welfare and juvenile justice funding initiative during fiscal year 2009=2010. Of the funds appropriated in this section, $1,717,753 is allocated specifically for expenditure for fiscal year 2009=2010 through the decategorization service funding pools and governance boards established pursuant to section 232.188.	Allocates $1,717,753 for decategorization services. DETAIL: This is a decrease of $1,887,247 compared to the original FY 2009 allocation. However, it is an increase of $1,717,753 in General Funds to replace one-time FY 2008 carryforward funding for decategorization. The FY 2009 allocation was funded with carryforward funds that were allocated to decategorization in prior State fiscal years and would have otherwise reverted to the General Fund after June 30, 2009.
34 31 34 32 34 33 34 34 34 35	6. A portion of the funds appropriated in this section may be used for emergency family assistance to provide other resources required for a family participating in a family preservation or reunification project or successor project to stay together or to be reunified.	Permits a portion of the Child and Family Services appropriation to be used for emergency family assistance under specified conditions.
35 1 35 2 35 3 35 4 35 5 35 6 35 7	7. Notwithstanding section 234.35 or any other provision of law to the contrary, state funding for shelter care shall be limited to $7,686,460. The department may continue or amend shelter care provider contracts to include the child welfare emergency services for children who might otherwise be served in shelter care that were implemented pursuant to 2008 Iowa Acts, chapter 1187, section 16, subsection 7.	CODE: Limits State funding for shelter care to $7,686,460. Permits the Department of Human Services to continue or amend provider contracts to include child welfare emergency services. DETAIL: This is an increase of $385,755 compared to the FY 2009 allocation. NOTE: An additional $500,000 of federal funds from the American Reinvestment and Recovery Act of 2009 is appropriated in HF 820 (FY 2010 Federal Funds Appropriations Bill) to shelter care for FY 2010.
35 8 35 9 35 10 35 11 35 12 35 13	8. Except for federal funds provided by the federal American Recovery and Reinvestment Act of 2009, federal funds received by the state during the fiscal year beginning July 1, 2009, as the result of the expenditure of state funds appropriated during a previous state fiscal year for a service or activity funded under this section are appropriated to the	CODE: Requires federal funds received in FY 2010 for the expenditure of State funds in a previous fiscal year to be used for child welfare services. Requires nonreversion of funds through FY 2011.

PG LN	House File 811	Explanation
35 14	department to be used as additional funding for services and	
35 15	purposes provided for under this section. Notwithstanding	
35 16	section 8.33, moneys received in accordance with this	
35 17	subsection that remain unencumbered or unobligated at the	
35 18	close of the fiscal year shall not revert to any fund but	
35 19	shall remain available for the purposes designated until the	
35 20	close of the succeeding fiscal year.	
35 21	9. Of the funds appropriated in this section, at least	Requires $3,464,856 to be used for protective child care assistance.
35 22	$3,464,856 shall be used for protective child care assistance.	DETAIL: This is an increase of $231,429 compared to the FY 2009 allocation.
35 23	10. a. Of the funds appropriated in this section, up to	Provides the following allocations related to court-ordered services for juveniles:
35 24	$2,257,277 is allocated for the payment of the expenses of	
35 25	court=ordered services provided to juveniles who are under the	
35 26	supervision of juvenile court services, which expenses are a	• Allocates up to $2,257,277 for court-ordered services provided to children that are under the supervision of juvenile court services. This is a decrease of $11,686 compared to the FY 2009 allocation.
35 27	charge upon the state pursuant to section 232.141, subsection	
35 28	4. Of the amount allocated in this lettered paragraph, up to	
35 29	$1,556,287 shall be made available to provide school=based	• Allocates $1,556,287 for school-based supervision of delinquent children, limits training funds to $15,000, and requires a portion of the cost for school-based liaisons to be paid by school districts. Maintains the current level of General Fund support.
35 30	supervision of children adjudicated under chapter 232, of	
35 31	which not more than $15,000 may be used for the purpose of	
35 32	training. A portion of the cost of each school=based liaison	
35 33	officer shall be paid by the school district or other funding	
35 34	source as approved by the chief juvenile court officer.	
35 35	b. Of the funds appropriated in this section, up to	• Allocates $819,722 for court-ordered services provided to children that are under the supervision of the Department of Human Services. This is a decrease of $4,243 compared to the FY 2009 allocation for a general reduction.
36 1	$819,722 is allocated for the payment of the expenses of	
36 2	court=ordered services provided to children who are under the	
36 3	supervision of the department, which expenses are a charge	
36 4	upon the state pursuant to section 232.141, subsection 4.	
36 5	c. Notwithstanding section 232.141 or any other provision	CODE: Requires allocations to the DHS districts to be made according to a formula determined by the State Court Administrator by June 15, 2009.
36 6	of law to the contrary, the amounts allocated in this	
36 7	subsection shall be distributed to the judicial districts as	
36 8	determined by the state court administrator and to the	
36 9	department's service areas as determined by the administrator	

PG LN	House File 811	Explanation
36 10	of the department's division of child and family services.	
36 11	The state court administrator and the division administrator	
36 12	shall make the determination of the distribution amounts on or	
36 13	before June 15, 2009.	
36 14	d. Notwithstanding chapter 232 or any other provision of	CODE: Prohibits a court from ordering any service that is a charge to the State if there are insufficient funds to reimburse the service. Requires the Chief Juvenile Court Officer to use the funds in a manner that will cover the entire fiscal year and permits funds to be transferred between districts.
36 15	law to the contrary, a district or juvenile court shall not	
36 16	order any service which is a charge upon the state pursuant to	
36 17	section 232.141 if there are insufficient court=ordered	
36 18	services funds available in the district court or departmental	
36 19	service area distribution amounts to pay for the service. The	
36 20	chief juvenile court officer and the departmental service area	
36 21	manager shall encourage use of the funds allocated in this	
36 22	subsection such that there are sufficient funds to pay for all	
36 23	court=related services during the entire year. The chief	
36 24	juvenile court officers and departmental service area managers	
36 25	shall attempt to anticipate potential surpluses and shortfalls	
36 26	in the distribution amounts and shall cooperatively request	
36 27	the state court administrator or division administrator to	
36 28	transfer funds between the judicial districts' or departmental	
36 29	service areas' distribution amounts as prudent.	
36 30	e. Notwithstanding any provision of law to the contrary, a	CODE: Prohibits a district or juvenile court from ordering a county to pay for a service provided to a juvenile that is a charge to the State.
36 31	district or juvenile court shall not order a county to pay for	
36 32	any service provided to a juvenile pursuant to an order	
36 33	entered under chapter 232 which is a charge upon the state	
36 34	under section 232.141, subsection 4.	
36 35	f. Of the funds allocated in this subsection, not more	Prohibits expenditure of more than $100,000 by the Judicial Branch for administration related to court-ordered services.
37 1	than $100,000 may be used by the judicial branch for	
37 2	administration of the requirements under this subsection.	
37 3	11. Of the funds appropriated in this section, $1,005,166	Requires an allocation of $1,005,166 to be transferred to the Department of Public Health for a Child Protection Center Grant Program.
37 4	shall be transferred to the department of public health to be	
37 5	used for the child protection center grant program in	

PG LN	House File 811	Explanation
37 6	accordance with section 135.118.	DETAIL: This is a decrease of $24,834 compared to the estimated net FY 2009 allocation for a general reduction.
37 7 37 8 37 9 37 10 37 11 37 12 37 13	12. If the department receives federal approval to implement a waiver under Title IV=E of the federal Social Security Act to enable providers to serve children who remain in the children's families and communities, for purposes of eligibility under the medical assistance program, children who participate in the waiver shall be considered to be placed in foster care.	Requires children that receive in-home or community-based services under a federal Title IV-E waiver to be considered as placed in foster care in order to remain eligible for Medicaid, if the DHS receives federal approval to implement the waiver.
37 14 37 15 37 16	13. Of the funds appropriated in this section, $2,695,256 is allocated for the preparation for adult living program pursuant to section 234.46.	Allocates $2,695,256 for the Preparation for Adult Living Services (PALS) Program. DETAIL: This is a decrease of $166,908 compared to the FY 2009 allocation for a general reduction.
37 17 37 18 37 19 37 20 37 21 37 22 37 23 37 24 37 25 37 26 37 27 37 28 37 29 37 30 37 31	14. Of the funds appropriated in this section, $975,162 shall be used for juvenile drug courts. The amount allocated in this subsection shall be distributed as follows: a. To the judicial branch for salaries to assist with the operation of juvenile drug court programs operated in the following jurisdictions: (1) Marshall county: ..... $ 58,509 (2) Woodbury county: ..... $ 117,267 (3) Polk county: ..... $ 182,779 (4) The third judicial district: ..... $ 63,385 (5) The eighth judicial district:	Allocates a total of $975,162 for juvenile drug courts. Of this amount, a total of $485,325 is allocated for Judicial Branch staff costs, and $489,837 is allocated for juvenile drug court services for juveniles and their families. DETAIL: This is a decrease of $54,838 compared to the FY 2009 allocation for a general reduction.

PG LN	House File 811	Explanation
37 32	..... $ 63,385	
37 33	b. For court=ordered services to support substance abuse	
37 34	services provided to the juveniles participating in the	
37 35	juvenile drug court programs listed in paragraph "a" and the	
38 1	juveniles' families:	
38 2	..... $ 489,837	
38 3	The state court administrator shall allocate the funding	
38 4	designated in this paragraph among the programs.	
38 5	15. Of the funds appropriated in this section, $224,288	Requires an allocation of $224,288 for Project Harmony.
38 6	shall be used for the public purpose of providing a grant to a	
38 7	nonprofit human services organization providing services to	DETAIL: This is a decrease of $12,612 compared to the FY 2009 allocation.
38 8	individuals and families in multiple locations in southwest	
38 9	Iowa and Nebraska for support of a project providing	
38 10	immediate, sensitive support and forensic interviews, medical	
38 11	exams, needs assessments, and referrals for victims of child	
38 12	abuse and their nonoffending family members.	
38 13	16. Of the funds appropriated in this section, $123,923 is	Requires an allocation of $123,923 to provide support for chapters for the ELEVATE support group for foster care children.
38 14	allocated for the elevate approach of providing a support	
38 15	network to children placed in foster care.	DETAIL: This is a decrease of $7,077 compared to the FY 2009 allocation for a general reduction.
38 16	17. Of the funds appropriated in this section, $227,987 is	Allocates $227,987 for an initiative to address child sexual abuse.
38 17	allocated for use pursuant to section 235A.1 for continuation	
38 18	of the initiative to address child sexual abuse implemented	DETAIL: This is an increase of $27,987 compared to the FY 2009 allocation.
38 19	pursuant to 2007 Iowa Acts, chapter 218, section 18,	
38 20	subsection 21.	
38 21	18. Of the funds appropriated in this section, $75,741 is	Allocates $75,741 for a Linn County Juvenile Runaway Program.
38 22	allocated for the public purpose of renewing of a grant to a	
38 23	county with a population between 189,000 and 196,000 in the	DETAIL: This is a decrease of $4,259 compared to the FY 2009 allocation for a general reduction.
38 24	latest preceding certified federal census for implementation	
38 25	of the county's runaway treatment plan under section 232.195.	

PG LN	House File 811	Explanation
38 26 38 27 38 28	19. Of the funds appropriated in this section, $590,780 is allocated for the community partnership for child protection sites.	Allocates $590,780 for the child welfare Community Partnership for Child Protection sites. DETAIL: This is an increase of $172,780 compared to the FY 2009 allocation for a general reduction.
38 29 38 30 38 31	20. Of the funds appropriated in this section, $355,036 is allocated for the department's minority youth and family projects under the redesign of the child welfare system.	Allocates $355,036 for minority youth and family projects included in child welfare redesign. DETAIL: This is a decrease of $19,964 compared to the FY 2009 allocation for a general reduction.
38 32 38 33 38 34 38 35	21. Of the funds appropriated in this section, $281,217 is allocated for funding of the state match for the federal substance abuse and mental health services administration (SAMHSA) system of care grant.	Allocates $281,217 for the State match for the federal Substance Abuse and Mental Health Services Administration system of care grant. DETAIL: This is a decrease of $18,783 compared to the FY 2009 allocation for a general reduction.
39 1 39 2 39 3 39 4 39 5 39 6 39 7 39 8 39 9 39 10	22. Of the funds appropriated in this section, $23,792 is allocated for the public purpose of providing a grant to a child welfare services provider headquartered in a county with a population between 189,000 and 196,000 in the latest preceding certified federal census that provides multiple services including but not limited to a psychiatric medical institution for children, shelter, residential treatment, after school programs, school=based programming, and an Asperger's syndrome program, to be used for support services for children with autism spectrum disorder and their families.	Allocates $23,792 to Four Oaks for various autism spectrum disorders services. DETAIL: This is a decrease of $1,208 compared to the FY 2009 allocation for a general reduction.
39 11 39 12 39 13 39 14 39 15	23. Of the funds appropriated in this section, $125,000 is allocated for continuation of the contracts for the multidimensional treatment level foster care program established pursuant to 2006 Iowa Acts, chapter 1123, for an additional year. The contractor shall provide a 25 percent	Allocates $125,000 for the Multi-Dimensional Foster Care Treatment Level Program. Requires the DHS to continue the fourth year of the pilot Program with the same contractors. Requires the contractors to provide a 25.00% match and to report on their progress. DETAIL: This is a decrease of $78,000 compared to the FY 2009

PG LN	House File 811	Explanation
39 16	match to receive the funds and shall submit a report on the 39 17 program to the persons designated by this division of this Act 39 18 for submission of reports.	allocation.
39 19	Sec. 17. The department of human services shall work 39 20 jointly with the juvenile court and juvenile court services in 39 21 studying the provision of child abuse information to juvenile 39 22 court services concerning children under the supervision of 39 23 juvenile court services, barriers to timely provision of the 39 24 information, and how the provision of the information can be 39 25 improved. A final report with findings and recommendations 39 26 shall be submitted to the governor, supreme court, and general 39 27 assembly, on or before December 15, 2009.	Directs the DHS, Juvenile Courts, and the Juvenile Court Services to study barriers to communication relating to child abuse information and to provide a report to the Governor, Supreme Court, and the General Assembly by December 15, 2009.
39 28	1. Of the funds appropriated in this section, $80,000 39 29 shall be transferred to the appropriation made in this 39 30 division of this Act for the family support subsidy program to 39 31 supplement that appropriation.	Allocates $80,000 to the DHS Family Support Subsidy Program. DETAIL: This is a one-time allocation to supplement the Program. The FY 2010 General Fund appropriation to the Program will total $1,777,137 including this transfer.
39 32	Sec. 18. ADOPTION SUBSIDY. 39 33 1. There is appropriated from the general fund of the 39 34 state to the department of human services for the fiscal year 39 35 beginning July 1, 2009, and ending June 30, 2010, the 40 1 following amount, or so much thereof as is necessary, to be 40 2 used for the purpose designated: 40 3 For adoption subsidy payments and services: 40 4 ..... $ 34,883,674	General Fund appropriation to the DHS for the Adoption Subsidy Program. DETAIL: This is a net increase of $1,227,335 compared to the estimated net FY 2009 appropriation. Changes include: • An increase of $1,382,019 to fund the supplemental need from FY 2009 in FY 2010. • An increase of $2,054,689 for caseload growth expected in FY 2010. • A decrease of $437,589 to reflect the change in the Federal Medical Assistance Percentage (FMAP) rate. • A decrease of $1,771,784 to implement an across-the-board reduction of 5.26% for FY 2010. NOTE: For FY 2009, the federal American Reinvestment and Recovery Act (ARRA) of 2009 provides for an FMAP increase of

PG LN	House File 811	Explanation
		6.20% for the Adoption Subsidy Program for an estimated $3,470,070. This amount exceeds the supplemental need of $1,382,019 for FY 2009. Therefore, HF 820 (FY 2010 Federal Funds Appropriations Bill) transfers $1,151,849 to the Human Services Reinvestment Fund from FY 2009 to use for FY 2010. For FY 2010, the Program is estimated to receive $4,645,737 from the ARRA FMAP increase of 6.20%.
40 5	2. The department may transfer funds appropriated in this section to the appropriation made in this Act for general administration for costs paid from the appropriation relating to adoption subsidy.	Permits the DHS to transfer funds for adoption recruitment and services.
40 9	3. Except for federal funds provided by the federal American Recovery and Reinvestment Act of 2009, federal funds received by the state during the fiscal year beginning July 1, 2009, as the result of the expenditure of state funds during a previous state fiscal year for a service or activity funded under this section are appropriated to the department to be used as additional funding for the services and activities funded under this section. Notwithstanding section 8.33, moneys received in accordance with this subsection that remain unencumbered or unobligated at the close of the fiscal year shall not revert to any fund but shall remain available for expenditure for the purposes designated until the close of the succeeding fiscal year.	CODE: Requires federal funds received in FY 2010 for the expenditure of State funds in a previous fiscal year to be used for Adoption Subsidy. Requires nonreversion of funds in this Subsection until the close of FY 2011.
40 22	Sec. 19. JUVENILE DETENTION HOME FUND. Moneys deposited in the juvenile detention home fund created in section 232.142 during the fiscal year beginning July 1, 2009, and ending June 30, 2010, are appropriated to the department of human services for the fiscal year beginning July 1, 2009, and ending June 30, 2010, for distribution of an amount equal to a percentage of the costs of the establishment, improvement, operation, and maintenance of county or multicounty juvenile detention homes in the fiscal year beginning July 1, 2008. Moneys	CODE: Requires funds deposited in the Juvenile Detention Fund to be distributed to the Juvenile Detention Centers. DETAIL: It is estimated that the fines that are deposited in the Fund will be approximately $4,000,000 in FY 2009. Fines in the Fund will be allocated to the detention centers based the on FY 2010 projected budgets to be used for operations.

PG LN	House File 811	Explanation
40 31	appropriated for distribution in accordance with this section	
40 32	shall be allocated among eligible detention homes, prorated on	
40 33	the basis of an eligible detention home's proportion of the	
40 34	costs of all eligible detention homes in the fiscal year	
40 35	beginning July 1, 2008. The percentage figure shall be	
41 1	determined by the department based on the amount available for	
41 2	distribution for the fund. Notwithstanding section 232.142,	
41 3	subsection 3, the financial aid payable by the state under	
41 4	that provision for the fiscal year beginning July 1, 2009,	
41 5	shall be limited to the amount appropriated for the purposes	
41 6	of this section.	
41 7	Sec. 20. FAMILY SUPPORT SUBSIDY PROGRAM.	General Fund appropriation for the Family Support Program.
41 8	1. There is appropriated from the general fund of the	
41 9	state to the department of human services for the fiscal year	DETAIL: This is a decrease of $210,175 compared to the estimated net FY 2009 appropriation to reflect the implementation of an 11.01% across-the-board reduction for FY 2010. An additional $80,000 is allocated from the General Fund appropriation to child and family services in this Division to the Family Support Subsidy Program.
41 10	beginning July 1, 2009, and ending June 30, 2010, the	
41 11	following amount, or so much thereof as is necessary, to be	
41 12	used for the purpose designated:	
41 13	For the family support subsidy program:	
41 14	..... $ 1,697,137	
41 15	2. The department shall use at least $385,475 of the	Requires an allocation of $385,475 from the Family Support Subsidy appropriation to continue the Children-at-Home Program in current counties. Also, permits the DHS to expand the Program to additional counties if funds are available, and limits administrative funding to $25,000.
41 16	moneys appropriated in this section for the family support	
41 17	center component of the comprehensive family support program	
41 18	under section 225C.47. Not more than $25,000 of the amount	
41 19	allocated in this subsection shall be used for administrative	
41 20	costs.	DETAIL: This is a decrease of $47,737 compared to the FY 2009 allocation for a general reduction. Increases the administrative cap on expenses by $5,000 compared to the FY 2009 allocation.
41 21	3. If at any time during the fiscal year, the amount of	Provides that if available funds are less than anticipated, the Department is required to revise the funding available to participants in the Family Support Subsidy Program.
41 22	funding available for the family support subsidy program is	
41 23	reduced from the amount initially used to establish the figure	
41 24	for the number of family members for whom a subsidy is to be	
41 25	provided at any one time during the fiscal year,	

PG LN	House File 811	Explanation
41 26	notwithstanding section 225C.38, subsection 2, the department	
41 27	shall revise the figure as necessary to conform to the amount	
41 28	of funding available.	
41 29	Sec. 21. CONNER DECREE. There is appropriated from the	General Fund appropriation to the DHS for Conner Decree training requirements.
41 30	general fund of the state to the department of human services	
41 31	for the fiscal year beginning July 1, 2009, and ending June	
41 32	30, 2010, the following amount, or so much thereof as is	DETAIL: This is a decrease of $4,626 compared to the estimated net FY 2009 appropriation. The funds are used for training purposes to comply with the Conner v. Branstad court decision mandating placement of persons in the least restrictive setting.
41 33	necessary, to be used for the purpose designated:	
41 34	For building community capacity through the coordination	
41 35	and provision of training opportunities in accordance with the	
42 1	consent decree of Conner v. Branstad, No. 4=86=CV=30871(S.D.	
42 2	Iowa, July 14, 1994):	
42 3	..... $ 37,358	
42 4	Sec. 22. MENTAL HEALTH INSTITUTES.	
42 5	1. There is appropriated from the general fund of the	
42 6	state to the department of human services for the fiscal year	
42 7	beginning July 1, 2009, and ending June 30, 2010, the	
42 8	following amounts, or so much thereof as is necessary, to be	
42 9	used for the purposes designated:	
42 10	a. For the state mental health institute at Cherokee for	General Fund appropriation to the Mental Health Institute at Cherokee.
42 11	salaries, support, maintenance, and miscellaneous purposes,	
42 12	and for not more than the following full=time equivalent	
42 13	positions:	DETAIL: This is a decrease of $673,209 and 5.00 FTE positions compared to the estimated net FY 2009 appropriation for a general reduction of 11.30%.
42 14	..... $ 5,436,076	
42 15	..... FTEs 205.00	
42 16	b. For the state mental health institute at Clarinda for	General Fund appropriation to the Mental Health Institute at Clarinda.
42 17	salaries, support, maintenance, and miscellaneous purposes,	
42 18	and for not more than the following full=time equivalent	
42 19	positions:	DETAIL: This is a decrease of $1,071,196 and no change to FTE positions compared to the estimated net FY 2009 appropriation. This includes:
42 20	..... $ 6,227,335	
42 21	..... FTEs 114.95	

PG LN	House File 811	Explanation
		• A decrease of $266,940 to eliminate the mobile Alzheimer's unit. • A decrease of $804,256 for a general reduction of 11.30%.
42 22 42 23 42 24 42 25 42 26 42 27	c. For the state mental health institute at Independence for salaries, support, maintenance, and miscellaneous purposes, and for not more than the following full=time equivalent positions: ..... $ 9,503,567 ..... FTEs 287.85	General Fund appropriation to the Mental Health Institute at Independence. DETAIL: This is a decrease of $1,190,291 and an increase of 0.19 FTE position compared to the estimated net FY 2009 appropriation for a general reduction of 11.30%.
42 28 42 29 42 30 42 31 42 32 42 33	d. For the state mental health institute at Mount Pleasant for salaries, support, maintenance, and miscellaneous purposes, and for not more than the following full=time equivalent positions: ..... $ 1,795,552 ..... FTEs 116.44	General Fund appropriation to the Mental Health Institute at Mount Pleasant. DETAIL: This is a decrease of $227,456 and no change in FTE positions compared to the estimated net FY 2009 appropriation for a general reduction of 11.30%.
42 34 42 35 43 1 43 2 43 3 43 4 43 5 43 6 43 7 43 8 43 9	2. The department shall submit a proposal for closing one state mental health institute and consolidating the services provided at the other state mental health institutes. The proposal shall provide for maintaining the existing levels of beds and services after the consolidation. The proposal shall be developed in coordination with the task force review of the four institutes performed under this section. The department shall incorporate or address the findings and recommendations of the task force in such proposal. The proposal shall be submitted to the persons designated by this division of this Act for submission of reports on or before December 15, 2009.	Requires the Department to submit a proposal to close one State Mental Health Institute (MHI) and consolidate services provided without reducing the total number of beds currently available. Requires the proposal to be developed in coordination with the task force to review the four MHIs.
43 10 43 11 43 12 43 13 43 14	3. The department shall staff a task force to be appointed by the governor consisting of knowledgeable citizens to perform an in=depth review of the four state mental health institutes, services provided, public benefits of the services provided, economic effects connected to the presence of the	Requires the Department to staff a task force appointed by the Governor to review the four State Mental Health Institutes, including: • services provided. • public benefit of the services provided.

PG LN	House File 811	Explanation
43 15	institutes that are realized by the communities in the areas	• economic effects connected to the presence of the institutes in the community.
43 16	served and the families of personnel, and other public costs	• any other public costs and benefits.
43 17	and benefits associated with the presence and availability of	
43 18	the four institutes. The review shall be coordinated with the	Requires a report by December 15, 2009.
43 19	proposal to be developed by the department under this section	
43 20	and shall incorporate or address the proposal findings and	
43 21	recommendations. The task force shall submit a report	
43 22	providing findings and recommendations to the governor and	
43 23	general assembly on or before December 15, 2009.	
43 24	Sec. 23. STATE RESOURCE CENTERS.	
43 25	1. There is appropriated from the general fund of the	
43 26	state to the department of human services for the fiscal year	
43 27	beginning July 1, 2009, and ending June 30, 2010, the	
43 28	following amounts, or so much thereof as is necessary, to be	
43 29	used for the purposes designated:	
43 30	a. For the state resource center at Glenwood for salaries,	General Fund appropriation to the State Resource Center at Glenwood.
43 31	support, maintenance, and miscellaneous purposes:	
43 32	..... $ 17,620,487	DETAIL: This is a decrease of $1,283,277 and an increase of 8.36 FTE positions compared to the estimated net FY 2009 appropriation. The change includes: • A decrease of $388,311 to reflect the appropriate FMAP rate. • A decrease of $894,966 for a general reduction of 4.80%. The FTE positions are not capped in the Bill.
43 33	b. For the state resource center at Woodward for salaries,	General Fund appropriation to the State Resource Center at Woodward.
43 34	support, maintenance, and miscellaneous purposes:	
43 35	..... $ 10,929,200	DETAIL: This is a decrease of $1,632,526 and an increase of 3.52 FTE positions compared to the estimated net FY 2009 appropriation. The change includes: • A decrease of $260,907 to reflect the appropriate FMAP rate.

PG LN	House File 811	Explanation
		• A decrease of $1,371,619 for a general reduction of 11.30%. The FTE positions are not capped in the Bill
44 1 44 2 44 3 44 4 44 5 44 6	2. The department may continue to bill for state resource center services utilizing a scope of services approach used for private providers of ICFMR services, in a manner which does not shift costs between the medical assistance program, counties, or other sources of funding for the state resource centers.	Permits the DHS to continue billing practices that do not include cost shifting.
44 7 44 8	3. The state resource centers may expand the time=limited assessment and respite services during the fiscal year.	Permits the State Resource Centers to expand time-limited assessment and respite services. DETAIL: Time-limited assessments include analysis of patients' conditions and development of therapy plans to assist families in caring for individuals with mental retardation or developmental disabilities. Respite services provide care for special needs individuals for a limited duration to provide families with a temporary reprieve from caretaking responsibilities.
44 9 44 10 44 11 44 12 44 13 44 14 44 15 44 16 44 17 44 18 44 19 44 20 44 21 44 22	4. If the department's administration and the department of management concur with a finding by a state resource center's superintendent that projected revenues can reasonably be expected to pay the salary and support costs for a new employee position, or that such costs for adding a particular number of new positions for the fiscal year would be less than the overtime costs if new positions would not be added, the superintendent may add the new position or positions. If the vacant positions available to a resource center do not include the position classification desired to be filled, the state resource center's superintendent may reclassify any vacant position as necessary to fill the desired position. The superintendents of the state resource centers may, by mutual agreement, pool vacant positions and position classifications	Specifies that positions may be added at the two State Resource Centers if projected revenues are sufficient to pay the salary and support costs of the additional positions.

PG LN	House File 811	Explanation
44 23	during the course of the fiscal year in order to assist one	
44 24	another in filling necessary positions.	
44 25	5. If existing capacity limitations are reached in	Permits a State Resource Center to open certain facilities if a service waiting list exists and funding is available.
44 26	operating units, a waiting list is in effect for a service or	
44 27	a special need for which a payment source or other funding is	
44 28	available for the service or to address the special need, and	
44 29	facilities for the service or to address the special need can	
44 30	be provided within the available payment source or other	
44 31	funding, the superintendent of a state resource center may	
44 32	authorize opening not more than two units or other facilities	
44 33	and begin implementing the service or addressing the special	
44 34	need during fiscal year 2009=2010.	
44 35	Sec. 24. MI/MR/DD STATE CASES.	General Fund appropriation to the DHS for State Cases.
45 1	1. There is appropriated from the general fund of the	
45 2	state to the department of human services for the fiscal year	DETAIL: This is a decrease of $1,620,890 compared to the estimated net FY 2009 appropriation for a general reduction.
45 3	beginning July 1, 2009, and ending June 30, 2010, the	
45 4	following amount, or so much thereof as is necessary, to be	
45 5	used for the purpose designated:	
45 6	For distribution to counties for state case services for	
45 7	persons with mental illness, mental retardation, and	
45 8	developmental disabilities in accordance with section 331.440:	
45 9	..... $ 11,446,288	
45 10	2. For the fiscal year beginning July 1, 2009, and ending	Requires $200,000 of the Community Mental Health Services Block Grant funds from FFY 2008, FFY 2009, or FFY 2010 to be used for the State Cases costs.
45 11	June 30, 2010, $200,000 is allocated for state case services	
45 12	from the amounts appropriated from the fund created in section	
45 13	8.41 to the department of human services from the funds	
45 14	received from the federal government under 42 U.S.C., ch. 6A,	
45 15	subch. XVII, relating to the community mental health center	
45 16	block grant, for the federal fiscal years beginning October 1,	
45 17	2007, and ending September 30, 2008, beginning October 1,	
45 18	2008, and ending September 30, 2009, and beginning October 1,	
45 19	2009, and ending September 30, 2010. The allocation made in	
45 20	this subsection shall be made prior to any other distribution	

PG LN	House File 811	Explanation
45 21	allocation of the appropriated federal funds.	
45 22 45 23 45 24 45 25 45 26 45 27 45 28 45 29 45 30	3. For the fiscal year beginning July 1, 2009, to the extent the appropriation made in this section and other funding provided for state case services and other support, as defined in section 331.440, and the other funding available in the county's services fund under section 331.424A are insufficient to pay the costs of such services and other support, a county of residence may implement a waiting list or other measures to maintain expenditures within the available funding.	Allows counties to implement a waiting list for the State Cases Program if there are insufficient funds to pay the costs of the services.
45 31 45 32 45 33 45 34 45 35	4. Notwithstanding section 8.33, moneys appropriated in this section that remain unencumbered or unobligated at the close of the fiscal year shall not revert but shall remain available for expenditure for the purposes designated until the close of the succeeding fiscal year.	CODE: Requires nonreversion of funds appropriated for State Cases.
46 1 46 2 46 3 46 4 46 5 46 6 46 7 46 8 46 9 46 10	Sec. 25. MENTAL HEALTH AND DEVELOPMENTAL DISABILITIES == COMMUNITY SERVICES FUND. There is appropriated from the general fund of the state to the mental health and developmental disabilities community services fund created in section 225C.7 for the fiscal year beginning July 1, 2009, and ending June 30, 2010, the following amount, or so much thereof as is necessary, to be used for the purpose designated: For mental health and developmental disabilities community services in accordance with this division of this Act: ..... $ 15,790,111	General Fund appropriation for the Mental Health Community Services Fund. DETAIL: This is a decrease of $2,227,779 compared to the estimated net FY 2009 appropriation for a general reduction.
46 11 46 12 46 13 46 14	1. Of the funds appropriated in this section, $15,763,951 shall be allocated to counties for funding of community=based mental health and developmental disabilities services. The moneys shall be allocated to a county as follows:	Allocates $15,763,951 from the Community Services appropriation to counties based on a formula considering the county's population and federal poverty guidelines.
46 15	a. Fifty percent based upon the county's proportion of the	Requires the funds to be used for services to persons with mental

PG LN	House File 811	Explanation
46 16	state's population of persons with an annual income which is equal to or less than the poverty guideline established by the federal office of management and budget. b. Fifty percent based upon the county's proportion of the state's general population. 2. a. A county shall utilize the funding the county receives pursuant to subsection 1 for services provided to persons with a disability, as defined in section 225C.2. However, no more than 50 percent of the funding shall be used for services provided to any one of the service populations. b. A county shall use at least 50 percent of the funding the county receives under subsection 1 for contemporary services provided to persons with a disability, as described in rules adopted by the department.	illness, mental retardation, developmental disabilities, and brain injuries. Specifies that no more than 50.00% may be used for any one of these populations. Requires counties to use at least 50.00% of the funding received on contemporary services.
46 30	3. Of the funds appropriated in this section, $26,160 shall be used to support the Iowa compass program providing computerized information and referral services for Iowans with disabilities and their families.	Allocates $26,160 to support the Iowa Compass Program. The Program provides computerized information and referral services for Iowans with developmental disabilities and their families. DETAIL: This is a decrease of $3,840 compared to the FY 2009 allocation.
46 34	4. a. Funding appropriated for purposes of the federal social services block grant is allocated for distribution to counties for local purchase of services for persons with mental illness or mental retardation or other developmental disability.	Allocates federal funds appropriated in HF 820 (FY 2010 Federal Funds Appropriation Bill) from the Social Services Block Grant for distribution to counties for local purchase of services for persons with mental illness, mental retardation, and developmental disabilities.
47 4	b. The funds allocated in this subsection shall be expended by counties in accordance with the county's county management plan approved by the board of supervisors. A county without an approved county management plan shall not receive allocated funds until the county's management plan is approved.	Requires counties to expend Social Services Block Grant funds according to approved county management plans. Prohibits a county from receiving an allocation of Social Services Block Grant funds until the county's plan is approved.
47 10	c. The funds provided by this subsection shall be	Requires the funds provided in this Subsection to be allocated to each

PG LN	House File 811	Explanation
47 11	allocated to each county as follows:	county according to a specified formula.
47 12	(1) Fifty percent based upon the county's proportion of	
47 13	the state's population of persons with an annual income which	DETAIL: The formula remains unchanged from the FY 1997 formula.
47 14	is equal to or less than the poverty guideline established by	
47 15	the federal office of management and budget.	
47 16	(2) Fifty percent based upon the amount provided to the	
47 17	county for local purchase of services in the preceding fiscal	
47 18	year.	
47 19	5. A county is eligible for funds under this section if	Specifies that a county is eligible for State funding through the Community Mental Health Services Fund if it meets the requirements for receiving Property Tax Relief funds and Allowed Growth funds.
47 20	the county qualifies for a state payment as described in	
47 21	section 331.439.	
47 22	6. The most recent population estimates issued by the	Requires the Department to utilize the most recent population estimates for the distribution of these funds.
47 23	United States bureau of the census shall be applied for the	
47 24	population factors utilized in this section.	
47 25	Sec. 26. SEXUALLY VIOLENT PREDATORS.	General Fund appropriation to the DHS for the Sexual Predator Commitment Program.
47 26	1. There is appropriated from the general fund of the	
47 27	state to the department of human services for the fiscal year	
47 28	beginning July 1, 2009, and ending June 30, 2010, the	DETAIL: This is net increase of $158,446 and 11.00 FTE positions. This includes:
47 29	following amount, or so much thereof as is necessary, to be	
47 30	used for the purpose designated:	
47 31	For costs associated with the commitment and treatment of	• An increase of $662,000 for an adjustment in per diem and caseload growth.
47 32	sexually violent predators in the unit located at the state	• A decrease of $503,554 for a general reduction.
47 33	mental health institute at Cherokee, including costs of legal	
47 34	services and other associated costs, including salaries,	
47 35	support, maintenance, and miscellaneous purposes, and for not	
48 1	more than the following full=time equivalent positions:	
48 2	..... $ 6,860,204	
48 3	..... FTEs 105.50	
48 4	2. Unless specifically prohibited by law, if the amount	Permits the Unit for Commitment of Sexually Violent Predators to accept out-of-state clients when the entire cost is reimbursed.
48 5	charged provides for recoupment of at least the entire amount	
48 6	of direct and indirect costs, the department of human services	

PG LN	House File 811	Explanation
48 7	may contract with other states to provide care and treatment	
48 8	of persons placed by the other states at the unit for sexually	
48 9	violent predators at Cherokee. The moneys received under such	
48 10	a contract shall be considered to be repayment receipts and	
48 11	used for the purposes of the appropriation made in this	
48 12	section.	
48 13	Sec. 27. FIELD OPERATIONS. There is appropriated from the	General Fund appropriation to the DHS for Field Operations staff and support.
48 14	general fund of the state to the department of human services	
48 15	for the fiscal year beginning July 1, 2009, and ending June	
48 16	30, 2010, the following amount, or so much thereof as is	
48 17	necessary, to be used for the purposes designated:	
48 18	For field operations, including salaries, support,	DETAIL: This is a net decrease of $6,201,760 and 130.55 FTE positions compared to the estimated net FY 2009 appropriation. An additional $18,507,495 is allocated to Field Operations from the TANF appropriation to DHS in this Division. The General Fund changes include:
48 19	maintenance, and miscellaneous purposes, and for not more than	
48 20	the following full=time equivalent positions:	
48 21	..... $ 63,032,831	• An increase of $1,500,001 to restore various carryforward funds from FY 2008.
48 22	..... FTEs 2,000.13	• A decrease of $7,701,761 to implement an across-the-board reduction of 11.12% for Field Operations.
		• A decrease of 130.55 FTEs to reflect anticipated decreases to staff levels.
		NOTE: An additional $680,596 of federal funds from the American Reinvestment and Recovery Act of 2009 is appropriated in HF 820 (FY 2010 Federal Funds Appropriations Bill) for field operations for an additional 17.00 FTE positions due to the passage of SF 389 (Health Care Omnibus II Act).
48 23	Priority in filling full=time equivalent positions shall be	Requires priority to be given to child protection services and eligibility determinations when filling FTE positions.
48 24	given to those positions related to child protection services	
48 25	and eligibility determination for low=income families.	
		DETAIL: This requirement was in place for FY 2009 for child protection services. The eligibility determination requirement was new for FY 2009.
48 26	Sec. 28. GENERAL ADMINISTRATION. There is appropriated	General Fund appropriation to the DHS for General Administration.

PG LN	House File 811	Explanation
48 27	from the general fund of the state to the department of human	
48 28	services for the fiscal year beginning July 1, 2009, and	DETAIL: This is a net decrease of $1,595,837 and 53.17 FTE positions compared to the estimated net FY 2009 appropriation. An additional $3,744,000 is allocated to General Administration from the TANF appropriation to the DHS in this Division. Changes to the General Fund appropriation include:
48 29	ending June 30, 2010, the following amount, or so much thereof	
48 30	as is necessary, to be used for the purpose designated:	
48 31	For general administration, including salaries, support,	
48 32	maintenance, and miscellaneous purposes, and for not more than	
48 33	the following full=time equivalent positions:	
48 34	..... $ 15,252,523	• An increase of $274,000 for general administration. This allocation was previously funded by the HITT Fund.
48 35	..... FTEs 354.33	• A decrease of $1,869,837 to implement an across-the-board reduction of 11.09% for General Administration. • A decrease of 53.17 FTEs to reflect anticipated decreases to staff levels.
49 1	1. Of the funds appropriated in this section, $48,556 is	Allocates $48,556 to the Prevention of Disabilities Policy Council.
49 2	allocated for the prevention of disabilities policy council	
49 3	established in section 225B.3.	DETAIL: This is a decrease of $8,444 compared to the FY 2009 allocation for a general reduction.
49 4	2. The department shall report at least monthly to the	Requires the DHS to submit monthly expenditure reports to the LSA.
49 5	legislative services agency concerning the department's	
49 6	operational and program expenditures.	DETAIL: This was also a requirement for FY 2009.
49 7	3. Notwithstanding provisions to the contrary in chapter	CODE: Permits the Department of Human Services to implement reorganization of service delivery beginning in FY 2010 only after notifying the Chairpersons and Ranking Members of the Health and Human Services Appropriations Subcommittee, the Department of Management, and the Legislative Services Agency for review and comment of any proposal to reorganize.
49 8	217, if necessary to address funding reductions in general	
49 9	administration and field operations, the department may	
49 10	propose and implement reorganization of the departmental	
49 11	administration and field operations during the fiscal year	
49 12	beginning July 1, 2009. At least 30 calendar days prior to	
49 13	implementation of any reorganization, the department shall	
49 14	submit a detailed proposal for the reorganization to the	
49 15	chairpersons and ranking members of the joint appropriations	
49 16	subcommittee on health and human services, the department of	
49 17	management, and the persons designated by this division of	

PG LN	House File 811	Explanation
49 18	this Act for submission of reports, to provide an opportunity	
49 19	for review, and comment, and possible revision of the	
49 20	proposal.	
49 21	4. The department shall adopt rules pursuant to chapter	Requires the Department of Human Services to adopt administrative rules to establish standards for children's centers.
49 22	17A establishing standards for childrens centers under section	
49 23	237B.1, as amended by this Act.	
49 24	Sec. 29. VOLUNTEERS. There is appropriated from the	General Fund appropriation to the DHS for the development and coordination of the Volunteer Services Program.
49 25	general fund of the state to the department of human services	
49 26	for the fiscal year beginning July 1, 2009, and ending June	
49 27	30, 2010, the following amount, or so much thereof as is	DETAIL: This is a decrease of $11,650 compared to the estimated net FY 2009 appropriation to implement an across-the-board reduction of 11.01% for Volunteers for FY 2010.
49 28	necessary, to be used for the purpose designated:	
49 29	For development and coordination of volunteer services:	
49 30	..... $ 94,067	
49 31	Sec. 30. FAMILY PLANNING SERVICES. There is appropriated	General Fund appropriation to the DHS for Family Planning Services.
49 32	from the general fund of the state to the department of human	
49 33	services for the fiscal year beginning July 1, 2009, and	DETAIL. This is a decrease of $728,750 compared to the estimated net FY 2009 appropriation.
49 34	ending June 30, 2010, the following amount or so much thereof	
49 35	as is necessary, to be used for the purpose designated:	
50 1	For family planning services to individuals with incomes	
50 2	not to exceed 200 percent of the federal poverty level as	
50 3	defined by the most recently revised income guidelines	
50 4	published by the United States department of health and human	
50 5	services, who are not currently receiving the specific benefit	
50 6	under the medical assistance program:	
50 7	..... $ 10,000	
50 8	Moneys appropriated under this section shall not be used to	Prohibits Family Planning funding from being used for abortions. Requires the DHS to work with stakeholders to implement the program.
50 9	provide abortions. The department shall work with appropriate	
50 10	stakeholders to implement and administer the program.	
50 11	Sec. 31. PREGNANCY COUNSELING AND SUPPORT SERVICES PROGRAM	General Fund appropriation to the DHS for Pregnancy Counseling and

PG LN	House File 811	Explanation
50 12	== APPROPRIATION. There is appropriated from the general fund	Support Services.
50 13	of the state to the department of human services for the	
50 14	fiscal year beginning July 1, 2009, and ending June 30, 2010,	DETAIL. This is a decrease of $97,000 compared to the estimated net FY 2009 appropriation.
50 15	the following amount or so much thereof as is necessary for	
50 16	the purpose designated:	
50 17	For a pregnancy counseling and support services program as	
50 18	specified in this section:	
50 19	..... $ 100,000	
50 20	The department of human services shall continue the	Requires the DHS to establish a Pregnancy Counseling and Support Services Program to provide services, information, education, counseling, and support to women that experience unplanned pregnancies.
50 21	pregnancy counseling and support services program to provide	
50 22	core services consisting of information, education,	
50 23	counseling, and support services to women who experience	
50 24	unplanned pregnancies by supporting childbirth, assisting	
50 25	pregnant women in remaining healthy and maintaining a healthy	
50 26	pregnancy while deciding whether to keep the child or place	
50 27	the child for adoption, and assisting women after the birth of	
50 28	a child that was implemented pursuant to 2008 Iowa Acts,	
50 29	chapter 1187, section 30.	
50 30	Sec. 32. MEDICAL ASSISTANCE, STATE SUPPLEMENTARY	Caps nursing facility reimbursements at $146,803,575 and requires the DHS to adjust the inflation factor in the case-mix reimbursement rate if expenditures exceed the cap.
50 31	ASSISTANCE, AND SOCIAL SERVICE PROVIDERS REIMBURSED UNDER THE	
50 32	DEPARTMENT OF HUMAN SERVICES.	
50 33	1. a. (1) For the fiscal year beginning July 1, 2009,	DETAIL: This is a decrease of $36,563,748 compared to the FY 2009 cap. The decrease reflects a 6.20% FMAP increase in the federal American Recovery and Reinvestment Act of 2009. There is no change in the overall rate for nursing facilities compared to FY 2009. The federal government is now paying for a greater percentage of the costs.
50 34	the total state funding amount for the nursing facility budget	
50 35	shall not exceed $146,803,575.	
51 1	(2) For the fiscal year beginning July 1, 2009, the	
51 2	department shall rebase case=mix nursing facility rates.	
51 3	However, total nursing facility budget expenditures, including	
51 4	both case=mix and noncase=mix shall not exceed the amount	
51 5	specified in subparagraph (1). When calculating case=mix per	
51 6	diem cost and the patient=day=weighted medians used in	
51 7	rate=setting for nursing facilities effective July 1, 2009,	
51 8	the inflation factor applied from the midpoint of the cost	
51 9	report period to the first day of the state fiscal year rate	NOTE: Section 73 of HF 820 (FY 2010 Federal Funds Appropriations Bill) amends the nursing facility cap to add an additional $6,000,000 for rebasing.

PG	LN	House File 811	Explanation
51	10	period shall be adjusted to maintain state funding within the	
51	11	amount specified in subparagraph (1).	
51	12	(3) The department, in cooperation with nursing facility	
51	13	representatives, shall review projections for state funding	
51	14	expenditures for reimbursement of nursing facilities on a	
51	15	quarterly basis and the department shall determine if an	
51	16	adjustment to the medical assistance reimbursement rate is	
51	17	necessary in order to provide reimbursement within the state	
51	18	funding amount. Any temporary enhanced federal financial	
51	19	participation that may become available to the Iowa medical	
51	20	assistance program during the fiscal year shall not be used in	
51	21	projecting the nursing facility budget. Notwithstanding 2001	
51	22	Iowa Acts, chapter 192, section 4, subsection 2, paragraph	
51	23	"c", and subsection 3, paragraph "a", subparagraph (2), if the	
51	24	state funding expenditures for the nursing facility budget for	
51	25	the fiscal year beginning July 1, 2009, are projected to	
51	26	exceed the amount specified in subparagraph (1), the	
51	27	department shall adjust the reimbursement for nursing	
51	28	facilities reimbursed under the case=mix reimbursement system	
51	29	to maintain expenditures of the nursing facility budget within	
51	30	the specified amount. The department shall revise such	
51	31	reimbursement as necessary to adjust the annual accountability	
51	32	measures payment in accordance with 2001 Iowa Acts, chapter	
51	33	192, section 4, subsection 4, as amended by 2008 Iowa Acts,	
51	34	chapter 1187, section 33, and as amended by this Act.	
51	35	b. For the fiscal year beginning July 1, 2009, the	Requires a reimbursement rate of $4.57 per prescription for pharmacist services using a single dispensing fee or the usual and customary fee, whichever is lower.
52	1	department shall reimburse pharmacy dispensing fees using a	
52	2	single rate of $4.57 per prescription or the pharmacy's usual	
52	3	and customary fee, whichever is lower.	DETAIL: Maintains the FY 2009 reimbursement rate.
52	4	c. (1) For the fiscal year beginning July 1, 2009,	Requires the rate of reimbursement for outpatient services to remain the same as the FY 2009 reimbursement rate.
52	5	reimbursement rates for outpatient hospital services shall	
52	6	remain at the rates in effect on June 30, 2009.	
52	7	(2) For the fiscal year beginning July 1, 2009,	Requires the rate of reimbursement for inpatient services to remain

PG LN	House File 811	Explanation
52 8	reimbursement rates for inpatient hospital services shall	the same as the FY 2009 reimbursement rate.
52 9	remain at the rates in effect on June 30, 2009. The Iowa	
52 10	hospital association shall submit information to the general	DETAIL: The Iowa Hospital Association is required to submit information to the Government Oversight Committee regarding actions taken to increase compensation for direct care hospital staff.
52 11	assembly's standing committees on government oversight during	
52 12	the 2010 session of the general assembly regarding actions	
52 13	taken to increase compensation and other costs of employment	
52 14	for hospital staff who provide direct care to patients.	
52 15	(3) For the fiscal year beginning July 1, 2009, the	Requires the rate of reimbursement for graduate medical education and disproportionate share hospital fund to remain the same as the FY 2009 reimbursement rate.
52 16	graduate medical education and disproportionate share hospital	
52 17	fund shall remain at the amount in effect on June 30, 2009.	
52 18	(4) In order to ensure the efficient use of limited state	Requires funds appropriated for hospital activities to be used for activities pursuant to the federal Medicare program.
52 19	funds in procuring health care services for low=income Iowans,	
52 20	funds appropriated in this Act for hospital services shall not	
52 21	be used for activities which would be excluded from a	
52 22	determination of reasonable costs under the federal Medicare	
52 23	program pursuant to 42 U.S.C. 1395X(v)(1)(N).	
52 24	d. For the fiscal year beginning July 1, 2009,	Requires rural health clinics, hospice services, and acute mental hospitals to be reimbursed at the rate established under the federal Medicare Program for FY 2010.
52 25	reimbursement rates for rural health clinics, hospices,	
52 26	independent laboratories, rehabilitation agencies, and acute	
52 27	mental hospitals shall be increased in accordance with	
52 28	increases under the federal Medicare program or as supported	
52 29	by their Medicare audited costs.	
52 30	e. For the fiscal year beginning July 1, 2009,	Requires rates to home health agencies to remain at the rate in effect June 30, 2009.
52 31	reimbursement rates for home health agencies shall remain at	
52 32	the rates in effect on June 30, 2009, not to exceed a home	
52 33	health agency's actual allowable cost.	
52 34	f. For the fiscal year beginning July 1, 2009, federally	Requires the DHS to reimburse federally qualified health centers for 100.00% of the reasonable costs for provision of services to Medical Assistance Program recipients.
52 35	qualified health centers shall receive cost=based	
53 1	reimbursement for 100 percent of the reasonable costs for the	

PG LN	House File 811	Explanation
53 2	provision of services to recipients of medical assistance.	
53 3 53 4 53 5	g. For the fiscal year beginning July 1, 2009, the reimbursement rates for dental services shall remain at the rates in effect on June 30, 2009.	Requires the FY 2010 reimbursement rates for dental services to remain at the rate in effect June 30, 2009.
53 6 53 7 53 8 53 9 53 10	h. Unless legislation is enacted by the Eighty=third General Assembly, 2009 Session, adjusting such rates, for the fiscal year beginning July 1, 2009, the maximum reimbursement rate for psychiatric medical institutions for children shall be $167.19 per day.	Caps the FY 2010 reimbursement rate for psychiatric medical institutions for children (PMICs) at $167.19 per day. DETAIL: Maintains the FY 2009 reimbursement rate.
53 11 53 12 53 13 53 14 53 15 53 16 53 17	i. For the fiscal year beginning July 1, 2009, unless otherwise specified in this Act, all noninstitutional medical assistance provider reimbursement rates shall remain at the rates in effect on June 30, 2009, except for area education agencies, local education agencies, infant and toddler services providers, and those providers whose rates are required to be determined pursuant to section 249A.20.	Requires the FY 2010 reimbursement rates for all non-institutional Medical Assistance providers, with specified exceptions, to remain at FY 2009 rates.
53 18 53 19 53 20 53 21	j. Notwithstanding any provision to the contrary, for the fiscal year beginning July 1, 2009, the reimbursement rate for anesthesiologists shall remain at the rate in effect on June 30, 2009.	CODE: Requires the FY 2010 reimbursement rates for Anesthesiologists to remain at the rate in effect June 30, 2009.
53 22 53 23 53 24 53 25 53 26 53 27 53 28	k. Notwithstanding section 249A.20, for the fiscal year beginning July 1, 2009, the average reimbursement rate for health care providers eligible for use of the federal Medicare resource=based relative value scale reimbursement methodology under that section shall remain at the rate in effect on June 30, 2009; however, this rate shall not exceed the maximum level authorized by the federal government.	CODE: Requires the FY 2010 rates for health providers eligible for the average rate reimbursement to remain at the rate in effect June 30, 2009.
53 29	l. For the fiscal year beginning July 1, 2009, the	Requires the reimbursement rates for residential care facilities to be

PG	LN	House File 811	Explanation
53	30	reimbursement rate for residential care facilities shall not be less than the minimum payment level as established by the federal government to meet the federally mandated maintenance of effort requirement. The flat reimbursement rate for facilities electing not to file semiannual cost reports shall not be less than the minimum payment level as established by the federal government to meet the federally mandated maintenance of effort requirement.	no less than the minimum payment level required to meet the federal Maintenance of Effort requirement.
54	3	m. For the fiscal year beginning July 1, 2009, inpatient mental health services provided at hospitals shall be reimbursed at the cost of the services, subject to Medicaid program upper payment limit rules; community mental health centers and providers of mental health services to county residents pursuant to a waiver approved under section 225C.7, subsection 3, shall be reimbursed at 100 percent of the reasonable costs for the provision of services to recipients of medical assistance; and psychiatrists shall be reimbursed at the medical assistance program fee for service rate.	Requires the FY 2010 reimbursement rate for inpatient mental health services at hospitals to be set at 100.00% of costs.
54	13	n. For the fiscal year beginning July 1, 2009, the reimbursement rate for consumer=directed attendant care shall remain at the rates in effect on June 30, 2009.	Requires the FY 2010 reimbursement rates for Consumer-Directed Attendant Care to remain at the rate in effect June 30, 2009.
54	16	o. For the fiscal year beginning July 1, 2009, the reimbursement rate for providers of family planning services that are eligible to receive a 90 percent federal match shall be increased by 5 percent above the rates in effect on June 30, 2009.	Requires the FY 2010 reimbursement rates for Family Planning Services be increased by 5.00% compared to the rates in effect June 30, 2009.
54	21	2. For the fiscal year beginning July 1, 2009, the reimbursement rate for providers reimbursed under the in= home=related care program shall not be less than the minimum payment level as established by the federal government to meet the federally mandated maintenance of effort requirement.	Establishes the maximum FY 2010 reimbursement rate for in-home health-related care providers at the minimum payment level established by the federal government.

PG LN	House File 811	Explanation
54 26	3. Unless otherwise directed in this section, when the department's reimbursement methodology for any provider reimbursed in accordance with this section includes an inflation factor, this factor shall not exceed the amount by which the consumer price index for all urban consumers increased during the calendar year ending December 31, 2002.	Specifies that when the required reimbursement methodology for providers under this Section includes an inflation factor, the factor cannot exceed the increase in the Consumer Price Index (CPI) for Urban Consumers for the calendar year ending December 31, 2002.
54 32	4. For the fiscal year beginning July 1, 2009, notwithstanding section 234.38, the foster family basic daily maintenance rate, the maximum adoption subsidy rate, and the maximum supervised apartment living foster care rate, and the preparation for adult living program maintenance rate for children ages 0 through 5 years shall be $16.36, the rate for children ages 6 through 11 years shall be $17.01, the rate for children ages 12 through 15 years shall be $18.62, and the rate for children and young adults ages 16 and older shall be $18.87.	CODE: Provides the daily family foster care rates and the maximum adoption subsidy rates for children by age range for FY 2010. DETAIL: The FY 2010 rates are the same as the FY 2009 rates. Permits the reimbursement to be less than the statutory requirement of 65.00% of the United States Department of Agriculture cost to raise a child. The provision is for FY 2010 only.
55 7	5. For the fiscal year beginning July 1, 2009, the maximum reimbursement rates for social services providers reimbursed under a purchase of social services contract shall remain at the rates in effect on June 30, 2009, or the provider's actual and allowable cost plus inflation for each service, whichever is less. However, the rates may be adjusted under any of the following circumstances: a. If a new service was added after June 30, 2009, the initial reimbursement rate for the service shall be based upon actual and allowable costs. b. If a social service provider loses a source of income used to determine the reimbursement rate for the provider, the provider's reimbursement rate may be adjusted to reflect the loss of income, provided that the lost income was used to support actual and allowable costs of a service purchased under a purchase of service contract.	Requires the maximum reimbursement rates for social service providers, including the Resource Family Recruitment and Retention Contractor, to be the same rate as provided in FY 2009, and provides for circumstances when the rates may be adjusted.
55 23	6. For the fiscal year beginning July 1, 2009, the	Maintains foster care reimbursement rates for specified providers in

PG LN	House File 811	Explanation
55 24	reimbursement rates for family=centered service providers,	FY 2010 at the same level as FY 2009.
55 25	family foster care service providers, group foster care	
55 26	service providers, and the resource family recruitment and	
55 27	retention contractor shall remain at the rates in effect on	
55 28	June 30, 2009.	
55 29	7. The group foster care reimbursement rates paid for	Requires the group foster care reimbursement rates paid for placement of children out-of-state to be calculated according to the same rate-setting principles as those used for in-state providers, unless the Director of the DHS determines that appropriate care cannot be provided in the State. Also, requires payment of the daily rate to be based on the number of days in the calendar month that service is provided.
55 30	placement of children out of state shall be calculated	
55 31	according to the same rate=setting principles as those used	
55 32	for in=state providers, unless the director of human services	
55 33	or the director's designee determines that appropriate care	
55 34	cannot be provided within the state. The payment of the daily	
55 35	rate shall be based on the number of days in the calendar	
56 1	month in which service is provided.	
56 2	8. For the fiscal year beginning July 1, 2009, remedial	Requires the FY 2010 child welfare remedial service providers to be reimbursed under the FY 2009 methodology.
56 3	service providers shall receive the same level of	
56 4	reimbursement under the same methodology in effect on June 30,	
56 5	2009.	
56 6	9. a. For the fiscal year beginning July 1, 2009, the	Requires the FY 2010 combined service and maintenance components of the reimbursement rate paid to shelter care providers to be based on the cost report submitted to the DHS. Also, requires a maximum reimbursement rate of $92.36 per day, and requires the DHS to reimburse shelter care providers at the actual and allowable unit cost, plus inflation, not to exceed the maximum reimbursement rate. DETAIL: This maintains the rate received in FY 2009.
56 7	combined service and maintenance components of the	
56 8	reimbursement rate paid for shelter care services and	
56 9	alternative child welfare emergency services purchased under a	
56 10	contract shall be based on the financial and statistical	
56 11	report submitted to the department. The maximum reimbursement	
56 12	rate shall be $92.36 per day. The department shall reimburse	
56 13	a shelter care provider at the provider's actual and allowable	
56 14	unit cost, plus inflation, not to exceed the maximum	
56 15	reimbursement rate.	
56 16	b. Notwithstanding section 232.141, subsection 8, for the	CODE: Maintains the limit of the Statewide average reimbursement rates paid to shelter care providers that was received in FY 2009. This impacts the amount of charges that are reimbursed.
56 17	fiscal year beginning July 1, 2009, the amount of the	
56 18	statewide average of the actual and allowable rates for	
56 19	reimbursement of juvenile shelter care homes that is utilized	

PG LN	House File 811	Explanation
56 20	for the limitation on recovery of unpaid costs shall remain at	
56 21	the amount in effect for this purpose in the preceding fiscal	
56 22	year.	
56 23	10. For the fiscal year beginning July 1, 2009, the	Requires the DHS to calculate reimbursement rates for intermediate care facilities for persons with mental retardation (ICF/MRs) at the 80th percentile for FY 2010 and calculates the inflation factor for ICF/MRs at 3.00% for FY 2010.
56 24	department shall calculate reimbursement rates for	
56 25	intermediate care facilities for persons with mental	
56 26	retardation at the 80th percentile. For the fiscal year	
56 27	beginning July 1, 2009, notwithstanding any provision to the	DETAIL: The consumer price index that is normally used to calculate the inflation factor is less than the amount budgeted for FY 2010. The legislation changes the inflation factor to the budgeted number. This change is for FY 2010 only.
56 28	contrary, the rate calculation methodology shall utilize a 3	
56 29	percent consumer price index inflation factor. However,	
56 30	beginning July 1, 2010, the rate calculation methodology shall	
56 31	utilize the consumer price index inflation factor applicable	
56 32	to the fiscal year beginning July 1, 2010.	
56 33	11. For the fiscal year beginning July 1, 2009, for child	Requires the DHS to set FY 2010 provider reimbursement rates for child care providers based on the rate reimbursement survey completed in December 2004. Requires rates to be set in a manner that will provide incentives for non-registered providers to become registered.
56 34	care providers reimbursed under the state child care	
56 35	assistance program, the department shall set provider	
57 1	reimbursement rates based on the rate reimbursement survey	
57 2	completed in December 2004. Effective July 1, 2009, the child	
57 3	care provider reimbursement rates shall remain at the rates in	
57 4	effect on June 30, 2009. The department shall set rates in a	
57 5	manner so as to provide incentives for a nonregistered	
57 6	provider to become registered by applying the increase only to	
57 7	registered and licensed providers.	
57 8	12. For the fiscal year beginning July 1, 2009,	Specifies that FY 2010 reimbursements for providers reimbursed by the DHS may be modified if appropriated funding is allocated for that purpose from the Senior Living Trust Fund.
57 9	reimbursements for providers reimbursed by the department of	
57 10	human services may be modified if appropriated funding is	
57 11	allocated for that purpose from the senior living trust fund	
57 12	created in section 249H.4.	
57 13	13. The department may adopt emergency rules to implement	Permits the DHS to adopt emergency rules to implement these reimbursements.
57 14	this section.	

PG	LN	House File 811	Explanation
57	15	Sec. 33. 2001 Iowa Acts, chapter 192, section 4,	CODE: Implements new nursing facility pay-for-performance measures that reward facilities for quality of care, quality of life, and efficiency standards.
57	16	subsection 4, as amended by 2008 Iowa Acts, chapter 1187,	
57	17	section 33, is amended by striking the subsection, and	
57	18	inserting in lieu thereof the following:	
57	19	4. NURSING FACILITY PAY=FOR=PERFORMANCE.	
57	20	a. It is the intent of the general assembly that the	
57	21	department of human services initiate a system to recognize	
57	22	nursing facilities that provide quality of life and	
57	23	appropriate access to medical assistance program beneficiaries	
57	24	in a cost=effective manner.	
57	25	b. The department shall design and implement a program to	DETAIL: A total of $2,276,000 is currently allocated for this program under the Medicaid appropriation.
57	26	establish benchmarks and to collect data for these benchmarks	
57	27	to evaluate nursing facility performance and to adjust the	
57	28	program and benchmarks, accordingly, to recognize improvement.	
57	29	The program shall include procedures to provide a	
57	30	pay=for=performance payment based upon a nursing facility's	
57	31	achievement of multiple favorable outcomes as determined by	
57	32	these benchmarks. Any increased reimbursement shall not	
57	33	exceed 5 percent of the sum of the direct and nondirect care	
57	34	medians. The increased reimbursement shall be included in the	
57	35	calculation of nursing facility modified price=based payment	
58	1	rates with the exception of Medicare=certified hospital=based	
58	2	nursing facilities, state=operated nursing facilities, and	
58	3	special population nursing facilities. The increased	
58	4	reimbursement shall be applicable to the payment periods	
58	5	beginning July 1, 2009.	
58	6	c. It is the intent of the general assembly that any	
58	7	pay=for=performance payments to nursing facilities be used to	
58	8	support direct care staff through increased wages, enhanced	
58	9	benefits, and expanded training opportunities and that all	
58	10	pay=for=performance payments be used in a manner that improves	
58	11	and enhances quality of care for residents.	
58	12	d. The program shall include various levels of compliance	
58	13	in order for a nursing facility to be considered eligible for	
58	14	a pay=for=performance payment including:	
58	15	(1) The initial meeting of prerequisites including all of	
58	16	the following:	

PG	LN	House File 811	Explanation
58	17	(a) A nursing facility shall not be eligible to	
58	18	participate if during the payment period the nursing facility	
58	19	receives a deficiency resulting in actual harm or immediate	
58	20	jeopardy, pursuant to the federal certification guidelines at	
58	21	an H level scope and severity or higher, regardless of the	
58	22	amount of fines assessed.	
58	23	(b) The pay=for=performance payment component shall be	
58	24	suspended for any month the nursing facility is in denial of	
58	25	payment for new admissions status.	
58	26	(2) Monitoring for nursing facility compliance with	
58	27	program requirements including:	
58	28	(a) Survey compliance during the payment period. If a	
58	29	nursing facility receives a deficiency resulting in actual	
58	30	harm pursuant to the federal certification guidelines at a G	
58	31	level scope and severity or higher, the payment shall be	
58	32	reduced by 25 percent for each such deficiency received during	
58	33	the state fiscal year. Additionally, if the nursing facility	
58	34	fails to cure any deficiency cited within the time required by	
58	35	the department of inspections and appeals, the payment shall	
59	1	be forfeited and the nursing facility shall not receive any	
59	2	payment for that payment period.	
59	3	(b) Compliance with the use of the pay=for=performance	
59	4	payment received.	
59	5	(c) Establishing and utilizing a tracking and reporting	
59	6	system to document the use of the pay=for=performance payments	
59	7	by the nursing facility.	
59	8	(3) Use of measures based on the four domains of quality	
59	9	of life, quality of care, access, and efficiency.	
59	10	e. (1) The department shall utilize cost reports or other	
59	11	means to document nursing facility eligibility for and	
59	12	compliance with the pay=for=performance payments.	
59	13	(2) The department shall publish the results of the	
59	14	measures for which a nursing facility qualifies and the amount	
59	15	of any pay=for=performance payment received. The department	
59	16	shall also publish information regarding the use of the	
59	17	pay=for=performance payments by any nursing facility receiving	
59	18	such payment.	
59	19	f. The department may adopt emergency rules to implement	

PG	LN	House File 811	Explanation
59	20	this subsection.	
59	21	g. The department shall request any medical assistance	
59	22	state plan amendment necessary to implement the	
59	23	pay=for=performance payment methodology.	
59	24	h. It is the intent of the general assembly that the	Requires the DHS to continue to convene the long-term care stakeholders workgroup to develop recommendations on quality of care improvement and implementation.
59	25	department of human services continue to convene the workgroup	
59	26	established pursuant to 2008 Iowa Acts, chapter 1187, section	
59	27	33, to develop recommendations to design a quality improvement	
59	28	process for targeted nursing facilities for implementation in	
59	29	the fiscal year beginning July 1, 2010. Recommendations shall	
59	30	include a process that identifies the best practices used in	
59	31	facilities receiving pay=for=performance payment and creates a	
59	32	system to assist other nursing facilities in the	
59	33	implementation of those best practices.	
59	34	Sec. 34. EMERGENCY RULES.	Permits the Department of Human Services and the Mental Health, Mental Retardation, Developmental Disabilities, and Brain Injury Commission to adopt emergency rules when authorized.
59	35	1. If specifically authorized by a provision of this	
60	1	division of this Act, the department of human services or the	
60	2	mental health, mental retardation, developmental disabilities,	
60	3	and brain injury commission may adopt administrative rules	
60	4	under section 17A.4, subsection 2, and section 17A.5,	
60	5	subsection 2, paragraph "b", to implement the provisions and	
60	6	the rules shall become effective immediately upon filing or on	
60	7	a later effective date specified in the rules, unless the	
60	8	effective date is delayed by the administrative rules review	
60	9	committee. Any rules adopted in accordance with this section	
60	10	shall not take effect before the rules are reviewed by the	
60	11	administrative rules review committee. The delay authority	
60	12	provided to the administrative rules review committee under	
60	13	section 17A.4, subsection 5, and section 17A.8, subsection 9,	
60	14	shall be applicable to a delay imposed under this section,	
60	15	notwithstanding a provision in those sections making them	
60	16	inapplicable to section 17A.5, subsection 2, paragraph "b".	
60	17	Any rules adopted in accordance with the provisions of this	
60	18	section shall also be published as notice of intended action	

PG	LN	House File 811	Explanation
60	19	as provided in section 17A.4.	
60	20	2. If during the fiscal year beginning July 1, 2009, the	Requires the Department of Human Services to report to the Chairpersons and Ranking Members of the Appropriation Committees, the Legislative Services Agency, and the Department of Management at least 30 days prior to submitting rules that will have a fiscal impact that was not addressed in the budget process.
60	21	department of human services is adopting rules in accordance	
60	22	with this section or as otherwise directed or authorized by	
60	23	state law, and the rules will result in an expenditure	
60	24	increase beyond the amount anticipated in the budget process	
60	25	or if the expenditure was not addressed in the budget process	
60	26	for the fiscal year, the department shall notify the persons	
60	27	designated by this division of this Act for submission of	
60	28	reports, the chairpersons and ranking members of the	
60	29	committees on appropriations, and the department of management	
60	30	concerning the rules and the expenditure increase. The	
60	31	notification shall be provided at least 30 calendar days prior	
60	32	to the date notice of the rules is submitted to the	
60	33	administrative rules coordinator and the administrative code	
60	34	editor.	
60	35	Sec. 35. DEPARTMENTAL EFFICIENCIES == BUDGET REDUCTIONS.	Requires the Departments of Elder Affairs, Public Health, Human Services, and Veterans Affairs to develop a plan to maximize efficiencies and reduce their budget by 5.00% beginning in FY 2011. Requires a report to the Health and Human Services Appropriations Subcommittee, Legislative Caucus Staffs, and Legislative Services Agency by December 15, 2009.
61	1	The departments of elder affairs, public health, human	
61	2	services, and veterans affairs shall develop a plan to	
61	3	maximize efficiencies to reduce their respective FY 2009=2010	
61	4	budgets by five percent beginning in FY 2010=2011. The	
61	5	departments shall collaborate to the extent appropriate to	
61	6	accomplish such reductions. The departments shall report	
61	7	their plans for maximizing efficiencies and reducing their	
61	8	budgets to the individuals specified in this Act to receive	
61	9	reports by December 15, 2009.	
61	10	Sec. 36. FULL=TIME EQUIVALENT POSITIONS == REDUCTIONS.	Requires the Directors receiving funds under this Bill to retain positions providing direct services to the public, to the extent possible.
61	11	The director of the department or state agency to which	
61	12	appropriations are made pursuant to this division of this Act,	
61	13	in making any reductions in full=time equivalent positions,	
61	14	shall, to the greatest extent possible, retain those positions	
61	15	providing direct services to the public.	

PG LN	House File 811	Explanation
61 16	Sec. 37. EXPENSE REIMBURSEMENT == REQUIREMENTS. Notwithstanding any provision to the contrary, for the fiscal year beginning July 1, 2009, and ending June 30, 2010, the director of a department or state agency to which appropriations are made pursuant to the provisions of this Act shall require employees, in order to receive reimbursement for expense, to submit actual receipts for meals and other costs. Reimbursement up to the maximum amount shall only be allowed in an amount equal to the sum of the actual receipts submitted.	CODE: Requires State employees to submit receipts to receive reimbursement for meal costs for FY 2010. DETAIL: This provision applies to departments and agencies receiving appropriations in this Bill.
61 26	Sec. 38. OUT=OF=STATE TRAVEL == RESTRICTIONS. Notwithstanding any provision to the contrary, for the fiscal year beginning July 1, 2009, and ending June 30, 2010, out=of=state travel by an employee of a department or state agency to which appropriations are made pursuant to this Act shall not be authorized unless the executive council authorizes the travel as necessary for the performance of official state business.	CODE: Requires all out-of-state travel for FY 2010 to be authorized by the Executive Council. DETAIL: This provision applies to departments and agencies receiving appropriations in this Bill.
61 34	Sec. 39. LEAN GOVERNMENT EXCHANGE. Beginning July 1, 2009, the department of human services shall participate in the lean government exchange through consultation with the department of management, office of lean enterprise, to improve the speed and efficiency of departmental and program processes by eliminating waste. The department shall initially apply this methodology to general administration. The department shall submit periodic progress reports regarding such implementation to the persons designated by this division of this Act for submission of reports.	Requires the Department of Human Services to participate in the lean government exchange in consultation with the Department of Management.
62 9	Sec. 40. PHARMACY=RELATED ISSUES == INTERIM. 1. The legislative council is requested to establish a legislative study committee for the 2009 interim to identify strategies and solutions to address problems arising from	Requests that the Legislative Council establish an interim study committee for pharmacy-related issues. If established, the committee will report to the General Assembly during the 2010 Legislative Session.

PG LN	House File 811	Explanation
62 13	inappropriate medication use in the health care system.	
62 14	2. The study committee shall consist of members of the	NOTE: Senate File 478 (FY 2010 Standing Appropriations Act) amends the insurance industry membership for this committee if established. Representatives from the Federation of Iowa Insurers were added and representatives from Blue Cross Blue Shield and the Principal Financial Group were removed.
62 15	general assembly, and representatives of the department of	
62 16	public health, the Iowa pharmacy association, the Iowa medical	
62 17	society, the Iowa nurses association, wellmark blue cross blue	
62 18	shield, the principal financial group, the university of Iowa	
62 19	college of public health, the Iowa retail federation, the	
62 20	prevention and chronic care management advisory council	
62 21	established in section 135.161, the medical home system	
62 22	advisory council established in section 135.159, the Iowa	
62 23	healthcare collaborative, as defined in section 135.40, the	
62 24	health policy corporation of Iowa, and the Iowa foundation for	
62 25	medical care.	
62 26	3. The study committee shall document the extent and	
62 27	causes of medication use problems and examine potential	
62 28	solutions including medication therapy management programs,	
62 29	evidence=based prescriber education programs, clinical	
62 30	pharmacy services in the primary medical home, collaborative	
62 31	practice models of care, and quality and performance=based	
62 32	payment systems.	
62 33	4. The study committee shall submit a report of its	
62 34	findings and recommendations to the general assembly for	
62 35	consideration during the 2010 legislative session.	
63 1	Sec. 41. REPORTS. Any reports or information required to	Specifies any reports required by this Bill to be submitted to the Chairpersons and Ranking Members of the Health and Human Services Appropriations Subcommittee, Legislative Caucus Staffs, and the Legislative Services Agency.
63 2	be compiled and submitted under this Act shall be submitted to	
63 3	the chairpersons and ranking members of the joint	
63 4	appropriations subcommittee on health and human services, the	
63 5	legislative services agency, and the legislative caucus staffs	
63 6	on or before the dates specified for submission of the reports	
63 7	or information.	
63 8	Sec. 42. EFFECTIVE DATE. The following provisions of this	The provision requiring representatives of the DHS and juvenile court services to collaborate regarding group foster care expenditures is effective on enactment.
63 9	division of this Act, being deemed of immediate importance,	
63 10	take effect upon enactment:	
63 11	The provision under the appropriation for child and family	

PG LN	House File 811	Explanation
63 12	services, relating to requirements of section 232.143 for	
63 13	representatives of the department of human services and	
63 14	juvenile court services to establish a plan for continuing	
63 15	group foster care expenditures for fiscal year 2009=2010.	
63 16	DIVISION II	
63 17	SENIOR LIVING TRUST FUND,	
63 18	PHARMACEUTICAL SETTLEMENT ACCOUNT,	
63 19	IOWACARE ACCOUNT, AND HEALTH CARE	
63 20	TRANSFORMATION ACCOUNT	
63 21	Sec. 43. DEPARTMENT OF ELDER AFFAIRS. There is	Senior Living Trust Fund appropriation to the Department of Elder Affairs.
63 22	appropriated from the senior living trust fund created in	
63 23	section 249H.4 to the department of elder affairs for the	
63 24	fiscal year beginning July 1, 2009, and ending June 30, 2010,	DETAIL: Maintains the current level of funding.
63 25	the following amount, or so much thereof as is necessary, to	
63 26	be used for the purpose designated:	
63 27	For the development and implementation of a comprehensive	
63 28	senior living program, including case management only if the	
63 29	monthly cost per client for case management for the frail	
63 30	elderly services provided does not exceed the amount specified	
63 31	in this section, and including program administration and	
63 32	costs associated with implementation:	
63 33	..... $ 8,486,698	
63 34	1. a. Of the funds appropriated in this section,	Requires $1,010,000 to be transferred to the DHS, in equal amounts on a quarterly basis, for reimbursement under the Medicaid Elderly Waiver.
63 35	$1,010,000 shall be transferred to the department of human	
64 1	services in equal amounts on a quarterly basis for	
64 2	reimbursement of case management services provided under the	DETAIL: Maintains the current allocation and transfer levels.
64 3	medical assistance elderly waiver.	
64 4	b. The monthly cost per client for case management for the	Sets the maximum cost per client at $70.00 per member, per month. If the Department of Human Services adopts rules to revise the reimbursement methodology for case management, the $70.00 cap is eliminated.
64 5	frail elderly services provided shall not exceed an average of	
64 6	$70. However, if the department of human services adopts	
64 7	administrative rules revising the reimbursement methodology to	

PG LN	House File 811	Explanation
64 8	include 15 minute units, 24=hour on=call, and other	
64 9	requirements consistent with federal regulations, the $70	
64 10	monthly cap shall be eliminated and replaced with a quarterly	
64 11	projection of expenditures and reimbursement revisions	
64 12	necessary to maintain expenditures within the amounts budgeted	
64 13	under the appropriations made for the fiscal year for the	
64 14	medical assistance program.	
64 15	c. The department of human services shall review	Requires the Department of Human Services to review expenditures for reimbursement of case management services under the Medicaid Elderly Waiver on a quarterly basis and adjust to provide reimbursements within the appropriation.
64 16	projections for state funding expenditures for reimbursement	
64 17	of case management services under the medical assistance	
64 18	elderly waiver on a quarterly basis and shall determine if an	
64 19	adjustment to the medical assistance reimbursement rates are	
64 20	necessary to provide reimbursement within the state funding	
64 21	amounts budgeted under the appropriations made for the fiscal	
64 22	year for the medical assistance program. Any temporary	
64 23	enhanced federal financial participation that may become	
64 24	available for the medical assistance program during the fiscal	
64 25	year shall not be used in projecting the medical assistance	
64 26	elderly waiver case management budget. The department of	
64 27	human services shall revise such reimbursement rates as	
64 28	necessary to maintain expenditures for medical assistance	
64 29	elderly waiver case management services within the state	
64 30	funding amounts budgeted under the appropriations made for the	
64 31	fiscal year for the medical assistance program.	
64 32	2. Notwithstanding section 249H.7, the department of elder	CODE: Requires the Department of Elder Affairs to maximize federal funds under the federal Older Americans Act, and prohibits these funds from being used for administration.
64 33	affairs shall distribute funds appropriated in this section in	
64 34	a manner that will supplement and maximize federal funds under	
64 35	the federal Older Americans Act and shall not use the amount	
65 1	distributed for any administrative purposes of either the	
65 2	department of elder affairs or the area agencies on aging.	
65 3	3. Of the funds appropriated in this section, $60,000	Allocates $60,000 for dementia-specific education for direct care workers.
65 4	shall be used to provide dementia=specific education to direct	
65 5	care workers and other providers of long=term care to enhance	

PG LN	House File 811	Explanation
65 6	existing or scheduled efforts through the Iowa caregivers	DETAIL: Maintains the current allocation level.
65 7	association, the Alzheimer's association, and other	
65 8	organizations identified as appropriate by the department.	
65 9	Sec. 44. DEPARTMENT OF INSPECTIONS AND APPEALS. There is	Senior Living Trust Fund appropriation to the Department of Inspections and Appeals for inspection and certification of assisted living facilities and adult day care services.
65 10	appropriated from the senior living trust fund created in	
65 11	section 249H.4 to the department of inspections and appeals	
65 12	for the fiscal year beginning July 1, 2009, and ending June	
65 13	30, 2010, the following amount, or so much thereof as is	DETAIL: Maintains the current level of Senior Living Trust Fund support.
65 14	necessary, to be used for the purpose designated:	
65 15	For the inspection and certification of assisted living	
65 16	facilities and adult day care services, including program	
65 17	administration and costs associated with implementation:	
65 18	..... $ 1,339,527	
65 19	Sec. 45. IOWA FINANCE AUTHORITY. There is appropriated	Senior Living Trust Fund appropriation to the Iowa Finance Authority (IFA) for the Rent Subsidy Program.
65 20	from the senior living trust fund created in section 249H.4 to	
65 21	the Iowa finance authority for the fiscal year beginning July	
65 22	1, 2009, and ending June 30, 2010, the following amount, or so	DETAIL: Maintains the current level of Senior Living Trust Fund support.
65 23	much thereof as is necessary, to be used for the purposes	
65 24	designated:	
65 25	For the rent subsidy program, to provide reimbursement for	
65 26	rent expenses to eligible persons:	
65 27	..... $ 700,000	
65 28	Participation in the rent subsidy program shall be limited	Requires participation in the Rent Subsidy Program to be limited to individuals at risk of nursing home placement and those eligible under the federal Money Follows the Person Grant Program. Permits the IFA to use up to $35,000 for administrative costs.
65 29	to only those persons who meet the requirements for the	
65 30	nursing facility level of care for home and community=based	
65 31	services waiver services as in effect on July 1, 2009, and to	
65 32	those individuals who are eligible for the federal money	
65 33	follows the person grant program under the medical assistance	
65 34	program. Of the funds appropriated in this section, not more	
65 35	than $35,000 may be used for administrative costs.	
66 1	Sec. 46. DEPARTMENT OF HUMAN SERVICES. Any funds	Appropriates the balance of the Senior Living Trust Fund to the

PG LN	House File 811	Explanation
66 2	remaining in the senior living trust fund created in section	Medicaid Program for FY 2010 after all other appropriations from the Fund are made.
66 3	249H.4 following the appropriations from the senior living	
66 4	trust fund made in this division of this Act to the department	
66 5	of elder affairs, the department of inspections and appeals,	DETAIL: It is estimated that there will be $39,084,483 available for appropriation. This is a decrease of $72,668,712 compared to the estimated net FY 2009 appropriation.
66 6	and the Iowa finance authority, for the fiscal year beginning	
66 7	July 1, 2009, and ending June 30, 2010, are appropriated to	
66 8	the department of human services to supplement the medical	
66 9	assistance program appropriations made in this Act, including	
66 10	program administration and costs associated with	
66 11	implementation. In order to carry out the purposes of this	
66 12	section, the department may transfer funds appropriated in	
66 13	this section to supplement other appropriations made to the	
66 14	department of human services.	
66 15	Sec. 47. PHARMACEUTICAL SETTLEMENT ACCOUNT. There is	Pharmaceutical Settlement Account appropriation to the Department of Human Services for medical contracts in Medicaid.
66 16	appropriated from the pharmaceutical settlement account	
66 17	created in section 249A.33 to the department of human services	
66 18	for the fiscal year beginning July 1, 2009, and ending June	DETAIL: Maintains the current level of Pharmaceutical Settlement Account support.
66 19	30, 2010, the following amount, or so much thereof as is	
66 20	necessary, to be used for the purpose designated:	
66 21	To supplement the appropriations made for medical contracts	
66 22	under the medical assistance program:	
66 23	..... $ 1,323,833	
66 24	Sec. 48. APPROPRIATIONS FROM IOWACARE ACCOUNT.	
66 25	1. There is appropriated from the IowaCare account created	IowaCare Account appropriation to the University of Iowa Hospitals and Clinics (UIHC).
66 26	in section 249J.24 to the state board of regents for	
66 27	distribution to the university of Iowa hospitals and clinics	
66 28	for the fiscal year beginning July 1, 2009, and ending June	DETAIL: Maintains the current level of IowaCare Account support. IowaCare is an indigent care program for uninsured adults with incomes up to 200.00% of the Federal Poverty Level. It was created during the 2005 Legislative Session in response to the elimination of federal Intergovernmental Transfers (IGTs). Fiscal year 2006 was the first year this appropriation was funded. A portion of the funds are to be used for graduate medical education.
66 29	30, 2010, the following amount, or so much thereof as is	
66 30	necessary, to be used for the purposes designated:	
66 31	For salaries, support, maintenance, equipment, and	
66 32	miscellaneous purposes, for the provision of medical and	
66 33	surgical treatment of indigent patients, for provision of	
66 34	services to members of the expansion population pursuant to	

PG LN	House File 811	Explanation
66 35	chapter 249J, and for medical education:	
67 1	..... $ 27,284,584	
67 2	a. Funds appropriated in this subsection shall not be used	Specifies the conditions that permit the Medical Assistance Program to reimburse providers for abortion services.
67 3	to perform abortions except medically necessary abortions, and	
67 4	shall not be used to operate the early termination of	
67 5	pregnancy clinic except for the performance of medically	DETAIL: The rules regarding abortion that apply to the Medical Assistance Program also apply to IowaCare.
67 6	necessary abortions. For the purpose of this subsection, an	
67 7	abortion is the purposeful interruption of pregnancy with the	
67 8	intention other than to produce a live=born infant or to	
67 9	remove a dead fetus, and a medically necessary abortion is one	
67 10	performed under one of the following conditions:	
67 11	(1) The attending physician certifies that continuing the	
67 12	pregnancy would endanger the life of the pregnant woman.	
67 13	(2) The attending physician certifies that the fetus is	
67 14	physically deformed, mentally deficient, or afflicted with a	
67 15	congenital illness.	
67 16	(3) The pregnancy is the result of a rape which is	
67 17	reported within 45 days of the incident to a law enforcement	
67 18	agency or public or private health agency which may include a	
67 19	family physician.	
67 20	(4) The pregnancy is the result of incest which is	
67 21	reported within 150 days of the incident to a law enforcement	
67 22	agency or public or private health agency which may include a	
67 23	family physician.	
67 24	(5) The abortion is a spontaneous abortion, commonly known	
67 25	as a miscarriage, wherein not all of the products of	
67 26	conception are expelled.	
67 27	b. Notwithstanding any provision of law to the contrary,	CODE: Requires the amount appropriated in this Subsection to be allocated in 12 equal monthly payments.
67 28	the amount appropriated in this subsection shall be allocated	
67 29	in twelve equal monthly payments as provided in section	
67 30	249J.24.	
67 31	2. There is appropriated from the IowaCare account created	IowaCare Account appropriation of an additional $47,020,131 to the State Board of Regents to be distributed to the University of Iowa

PG LN	House File 811	Explanation
67 32	in section 249J.24 to the state board of regents for	Hospitals and Clinics (UIHC).
67 33	distribution to the university of Iowa hospitals and clinics	
67 34	for the fiscal year beginning July 1, 2009, and ending June	DETAIL: This is an increase of $11,050,766 compared to estimated net FY 2009. The increase is for increased enrollment and utilization of the IowaCare Program.
67 35	30, 2010, the following amount, or so much thereof as is	
68 1	necessary, to be used for the purposes designated:	
68 2	For salaries, support, maintenance, equipment, and	
68 3	miscellaneous purposes, for the provision of medical and	
68 4	surgical treatment of indigent patients, for provision of	
68 5	services to members of the expansion population pursuant to	
68 6	chapter 249J, and for medical education:	
68 7	..... $ 47,020,131	
68 8	The amount appropriated in this subsection shall be	Permits the appropriation to be distributed only if expansion population claims exceed the $27,284,584 appropriated to the Board of Regents and requires the funds to be distributed monthly.
68 9	distributed only if expansion population claims adjudicated	
68 10	and paid by the Iowa Medicaid enterprise exceed the	
68 11	appropriation to the state board of regents for distribution	
68 12	to the university of Iowa hospitals and clinics provided in	
68 13	subsection 1. The amount appropriated in this subsection	
68 14	shall be distributed monthly for expansion population claims	
68 15	adjudicated and approved for payment by the Iowa Medicaid	
68 16	enterprise using medical assistance program reimbursement	
68 17	rates.	
68 18	3. There is appropriated from the IowaCare account created	IowaCare Account appropriation to Polk County Broadlawns Medical Center.
68 19	in section 249J.24 to the department of human services for the	
68 20	fiscal year beginning July 1, 2009, and ending June 30, 2010,	DETAIL: This is an increase of $6,000,000 compared to the estimated net FY 2009 appropriation. Broadlawns transfers $38,000,000 of Polk County property tax proceeds to the State to draw down the federal match that funds the IowaCare Program.
68 21	the following amount, or so much thereof as is necessary, to	
68 22	be used for the purposes designated:	
68 23	For distribution to a publicly owned acute care teaching	
68 24	hospital located in a county with a population over 350,000	
68 25	for the provision of medical and surgical treatment of	
68 26	indigent patients, for provision of services to members of the	
68 27	expansion population pursuant to chapter 249J, and for medical	
68 28	education:	
68 29	..... $ 46,000,000	
68 30	a. Notwithstanding any provision of law to the contrary,	

PG	LN	House File 811	Explanation
68	31	the amount appropriated in this subsection shall be allocated	
68	32	in twelve equal monthly payments as provided in section	
68	33	249J.24. Any amount appropriated in this subsection in excess	
68	34	of $41,000,000 shall be allocated only if federal funds are	
68	35	available to match the amount allocated.	
69	1	b. Notwithstanding the total amount of proceeds	
69	2	distributed pursuant to section 249J.24, subsection 6,	
69	3	paragraph "a", unnumbered paragraph 1, for the fiscal year	
69	4	beginning July 1, 2009, and ending June 30, 2010, the county	
69	5	treasurer of a county with a population of over 350,000 in	
69	6	which a publicly owned acute care teaching hospital is located	
69	7	shall distribute the proceeds collected pursuant to section	
69	8	347.7 in a total amount of $38,000,000, which would otherwise	
69	9	be distributed to the county hospital, to the treasurer of	
69	10	state for deposit in the IowaCare account.	
69	11	c. (1) Notwithstanding the amount collected and	
69	12	distributed for deposit in the IowaCare account pursuant to	
69	13	section 249J.24, subsection 6, paragraph "a", subparagraph	
69	14	(1), the first $19,000,000 in proceeds collected pursuant to	
69	15	section 347.7 between July 1, 2009, and December 31, 2009,	
69	16	shall be distributed to the treasurer of state for deposit in	
69	17	the IowaCare account and collections during this time period	
69	18	in excess of $19,000,000 shall be distributed to the acute	
69	19	care teaching hospital identified in this subsection.	
69	20	(2) Notwithstanding the amount collected and distributed	
69	21	for deposit in the IowaCare account pursuant to section	
69	22	249J.24, subsection 6, paragraph "a", subparagraph (2), the	
69	23	first $19,000,000 in collections pursuant to section 347.7	
69	24	between January 1, 2010, and June 30, 2010, shall be	
69	25	distributed to the treasurer of state for deposit in the	
69	26	IowaCare account and collections during this time period in	
69	27	excess of $19,000,000 shall be distributed to the acute care	
69	28	teaching hospital identified in this subsection.	
69	29	Sec. 49. APPROPRIATIONS FROM ACCOUNT FOR HEALTH CARE	Appropriations from the Health Care Transformation Account (HCTA).
69	30	TRANSFORMATION == DEPARTMENT OF HUMAN SERVICES.	
69	31	Notwithstanding any provision to the contrary, there is	DETAIL: The HCTA was created as part of the agreement with the

PG LN	House File 811	Explanation
69 32 69 33 69 34 69 35 70 1	appropriated from the account for health care transformation created in section 249J.23 to the department of human services for the fiscal year beginning July 1, 2009, and ending June 30, 2010, the following amounts, or so much thereof as is necessary, to be used for the purposes designated:	federal Centers for Medicare and Medicaid Services (CMS) to discontinue Iowa's Intergovernmental Transfers (IGTs) during the 2005 Legislative Session. It is intended to fund the reforms specified in HF 841 (IowaCare and Medicaid Reform Act) passed during the 2005 Legislative Session.
70 2 70 3 70 4 70 5	1. For the costs of medical examinations and development of personal health improvement plans for the expansion population pursuant to section 249J.6: ..... $ 556,800	Appropriation from the HCTA for medical examinations and personal improvement plans for IowaCare enrollees. DETAIL: Maintains the current level of HCTA support.
70 6 70 7 70 8	2. For the provision of a medical information hotline for the expansion population as provided in section 249J.6: ..... $ 100,000	Appropriation from the HCTA for a medical information hotline for IowaCare enrollees. DETAIL: This is a decrease of $50,000 compared to the estimated net FY 2009 appropriation.
70 9 70 10 70 11	3. For other health promotion partnership activities pursuant to section 249J.14: ..... $ 600,000	Appropriation from the HCTA for other health partnership activities related to IowaCare. DETAIL: This is a decrease of $300,000 compared to the estimated FY 2009 appropriation.
70 12 70 13 70 14	4. For the costs related to audits, performance evaluations, and studies required pursuant to chapter 249J: ..... $ 125,000	Appropriation from the HCTA for costs related to audits, performance evaluations, and studies related to IowaCare. DETAIL: This is a decrease of $275,000 compared to the estimated FY 2009 appropriation.
70 15 70 16	5. For administrative costs associated with chapter 249J: ..... $ 1,132,412	Appropriation from the HCTA for IowaCare administrative costs. DETAIL: Maintains the current level of HCTA support.
70 17	6. For planning and development, in cooperation with the	Appropriation from the HCTA to the DHS and the DPH to start a

PG LN	House File 811	Explanation
70 18	department of public health, of a phased=in program to provide	program to provide a dental home for children.
70 19	a dental home for children in accordance with section 249J.14,	
70 20	subsection 7:	DETAIL: Maintains the current level of HCTA support.
70 21	..... $ 1,000,000	
70 22	7. For continuation of the establishment of the tuition	Appropriation from the HCTA for tuition assistance for individuals serving individuals with disabilities pilot program.
70 23	assistance for individuals serving individuals with	
70 24	disabilities pilot program, as enacted in 2008 Iowa Acts,	
70 25	chapter 1187, section 130:	DETAIL: This is a decrease of $450,000 compared to the estimated net FY 2009 appropriation.
70 26	..... $ 50,000	
70 27	7A. For medical contracts:	Appropriation from the HCTA for Medical Contracts.
70 28	..... $ 1,300,000	DETAIL: This is a one-time appropriation to make upgrades to the Iowa Medicaid Enterprise's computer systems required by the federal government.
70 29	8. For payment to the publicly owned acute care teaching	Appropriation from the HCTA for the Polk County Broadlawns Medical Center for the IowaCare Program. Requires distribution of the funds on a monthly basis.
70 30	hospital located in a county with a population of over 350,000	
70 31	that is a participating provider pursuant to chapter 249J:	
70 32	..... $ 290,000	DETAIL: This is an increase of $60,000 compared to the estimated net FY 2009 appropriation.
70 33	Disbursements under this subsection shall be made monthly.	Requires the DHS to make 12 monthly payments to Polk County Broadlawns Medical Center for the appropriation. Requires an FY 2010 report from the Medical Center.
70 34	The hospital shall submit a report following the close of the	
70 35	fiscal year regarding use of the funds appropriated in this	
71 1	subsection to the persons specified in this Act to receive	
71 2	reports.	
71 3	Notwithstanding section 8.39, subsection 1, without the	CODE: Permits the DHS to transfer funds to carry out activities in this Section without the approval of the Governor or the Director of the Department of Management, but requires the DHS to report any transfers to the Legislative Services Agency.
71 4	prior written consent and approval of the governor and the	
71 5	director of the department of management, the director of	
71 6	human services may transfer funds among the appropriations	

PG LN	House File 811	Explanation
71 7	made in this section as necessary to carry out the purposes of	
71 8	the account for health care transformation. The department	
71 9	shall report any transfers made pursuant to this section to	
71 10	the legislative services agency.	
71 11	Sec. 50. APPROPRIATION FROM ACCOUNT FOR HEALTH CARE	Appropriation from the HCTA to the Department of Elder Affairs.
71 12	TRANSFORMATION == DEPARTMENT OF ELDER AFFAIRS.	
71 13	Notwithstanding any provision to the contrary, there is	DETAIL: This is a one-time appropriation to make upgrades to the case management computer system to conform to new federal requirements.
71 14	appropriated from the account for health care transformation	
71 15	created in section 249J.23 to the department of elder affairs	
71 16	for the fiscal year beginning July 1, 2009, and ending June	
71 17	30, 2010, the following amounts, or so much thereof as is	
71 18	necessary, to be used for the purpose designated:	
71 19	For re=programming of the SEAMLESS computer system for case	
71 20	management:	
71 21	..... $ 200,000	
71 22	Sec. 51. IOWACARE RENEWAL OF WAIVER. It is the intent of	Specifies that it is the intent of the General Assembly that the Department apply for a renewal of the IowaCare Waiver for an additional five years. Requires the Department to negotiate the removal of the limitation on new provider taxes and transfer the Seriously Emotionally Disturbed Children Waiver to a 1915(c) Home and Community-Based Services Waiver.
71 23	the general assembly that the department of human services	
71 24	apply for renewal of the IowaCare section 1115 demonstration	
71 25	waiver under the medical assistance program. The department	
71 26	shall seek to renew the existing terms of the waiver for an	
71 27	additional five=year period and shall seek maximum expenditure	
71 28	authority for payments to the state's four mental health	
71 29	institutes. The IowaCare section 1115 demonstration waiver	
71 30	renewal shall be amended to remove the limitation on new	
71 31	provider taxes and shall transfer the seriously emotionally	
71 32	disturbed children waiver to be approved as a section 1915(c)	
71 33	home and community=based services waiver.	
71 34	Sec. 52. MEDICAL ASSISTANCE PROGRAM == NONREVERSION FOR FY	CODE: Requires nonreversion of funds from the Medicaid Program to the Senior Living Trust Fund. Instead the funds would remain within the appropriation to be used in the succeeding fiscal year.
71 35	2009=2010. Notwithstanding section 8.33, if moneys	
72 1	appropriated for purposes of the medical assistance program	
72 2	for the fiscal year beginning July 1, 2009, and ending June	
72 3	30, 2010, from the general fund of the state, the senior	DETAIL: The federal American Recovery and Reinvestment Act of 2009 has a provision prohibiting the transfer of Medicaid stimulus

PG LN	House File 811	Explanation
72 4	living trust fund, the health care trust fund, and the	dollars to a reserve or rainy day fund. This language complies with those regulations.
72 5	property tax relief fund are in excess of actual expenditures	
72 6	for the medical assistance program and remain unencumbered or	
72 7	unobligated at the close of the fiscal year, the excess moneys	
72 8	shall not revert but shall remain available for expenditure	
72 9	for the purposes of the medical assistance program until the	
72 10	close of the succeeding fiscal year.	
72 11	DIVISION III	
72 12	MH/MR/DD SERVICES	
72 13	ALLOWED GROWTH FUNDING	
72 14	FY 2009=2010	
72 15	Sec. 53. Section 426B.5, subsection 2, paragraph i,	CODE: Adds Mobile Crisis Teams to critical emergency services when considering the need for Mental Health Risk Pool Funds.
72 16	subparagraph (3), Code 2009, is amended to read as follows:	
72 17	(3) Avoiding the need for reduction or elimination of a	
72 18	mobile crisis team or other critical emergency services when	
72 19	the reduction or elimination places the public's health or	
72 20	safety at risk.	
72 21	Sec. 54. 2008 Iowa Acts, chapter 1191, section 1, is	CODE: Updates the FY 2010 original Mental Health Allowed Growth appropriation to reflect a general reduction of 12.80% and the elimination of the 3.00% Allowed Growth appropriation enacted in HF 2700 (FY 2009 Standing Appropriations Act).
72 22	amended to read as follows:	
72 23	SECTION 1. COUNTY MENTAL HEALTH, MENTAL RETARDATION, AND	
72 24	DEVELOPMENTAL DISABILITIES ALLOWED GROWTH APPROPRIATION AND	
72 25	ALLOCATIONS == FISCAL YEAR 2009=2010.	
72 26	~~1.~~ There is appropriated from the general fund of the	DETAIL: This includes a net decrease of $8,248,200 as follows:
72 27	state to the department of human services for the fiscal year	
72 28	beginning July 1, 2009, and ending June 30, 2010, the	• A decrease of $8,275,660 to eliminate the Allowed Growth increase.
72 29	following amount, or so much thereof as is necessary, to be	• A decrease of $7,022,025 for a general reduction of 12.80%.
72 30	used for the purpose designated:	• An increase of $6,902,735 to move funding from the Health Care Trust Fund to the General Fund.
72 31	For distribution to counties of the county mental health,	• An increase of $146,750 to move the Purchase of Service Provider contract to the General Fund from the HITT Fund that has been eliminated.
72 32	mental retardation, and developmental disabilities allowed	
72 33	growth factor adjustment for fiscal year 2009=2010 as provided	
72 34	in this section in lieu of the allowed growth factor	
72 35	provisions of section 331.438, subsection 2, and section	

PG	LN	House File 811	Explanation
73	1	331.439, subsection 3, and chapter 426B :	
73	2	..... $ ~~69,949,069~~	
73	3	54,108,770	
73	4	~~2. The amount appropriated in this section shall be~~	
73	5	~~allocated as provided in a later enactment of the general~~	
73	6	~~assembly.~~	
73	7	Sec. 55. 2008 Iowa Acts, chapter 1191, section 1, as	CODE: Allocates $146,750 for the continuation of the local purchase of service provider salary increase for FY 2010.
73	8	amended by this division of this Act, is amended by adding the	
73	9	following new subsections:	
73	10	NEW SUBSECTION . 1. Of the amount appropriated in this	DETAIL: Maintains the current level of support. This allocation was previously funded by the Healthy Iowans Tobacco Trust Fund.
73	11	section, $146,750 shall be used for assistance to the counties	
73	12	with limited county mental health, mental retardation, and	
73	13	developmental disabilities services fund balances which were	
73	14	selected in accordance with 2000 Iowa Acts, chapter 1221,	
73	15	section 3, to receive such assistance, in the same amount	
73	16	provided during the fiscal year beginning July 1, 2000, and	
73	17	ending June 30, 2001, to pay reimbursement increases in	
73	18	accordance with 2000 Iowa Acts, chapter 1221, section 3.	
73	19	NEW SUBSECTION . 2. Of the amount appropriated in this	CODE: Requires counties eligible for the $12,000,000 Mental Health Allowed Growth funding to comply with the following:
73	20	section, $12,000,000 shall be distributed as provided in this	
73	21	subsection.	
73	22	a. To be eligible to receive a distribution under this	• Levy at least 90.00% of the maximum levy.
73	23	subsection, a county must meet the following requirements:	• Levy at least $2.00 per $1,000 of the taxable assessed property value.
73	24	(1) The county is levying for the maximum amount allowed	• Maintain a Mental Health Services Fund balance for FY 2008 of 15.00% or less.
73	25	for the county's mental health, mental retardation, and	
73	26	developmental disabilities services fund under section	
73	27	331.424A for taxes due and payable in the fiscal year	
73	28	beginning July 1, 2009, or the county is levying for at least	
73	29	90 percent of the maximum amount allowed for the county's	
73	30	services fund and that levy rate is more than $2 per $1,000 of	
73	31	the assessed value of all taxable property in the county.	
73	32	(2) In the fiscal year beginning July 1, 2007, the	
73	33	county's mental health, mental retardation, and developmental	
73	34	disabilities services fund ending balance under generally	

PG LN	House File 811	Explanation
73 35	accepted accounting principles was equal to or less than 15	
74 1	percent of the county's actual gross expenditures for that	
74 2	fiscal year.	
74 3	b. A county's allocation of the amount appropriated in	
74 4	this subsection shall be determined based upon the county's	
74 5	proportion of the general population of the counties eligible	
74 6	to receive an allocation under this subsection. The most	
74 7	recent population estimates issued by the United States bureau	
74 8	of the census shall be applied in determining population for	
74 9	the purposes of this paragraph.	
74 10	c. The allocations made pursuant to this subsection are	
74 11	subject to the distribution provisions and withholding	
74 12	requirements established in this section for the county mental	
74 13	health, mental retardation, and developmental disabilities	
74 14	allowed growth factor adjustment for the fiscal year beginning	
74 15	July 1, 2009.	
74 16	NEW SUBSECTION . 3. The following amount of the funding	CODE: Sets the expenditure target allocation for the Allowed Growth funding pool for FY 2010.
74 17	appropriated in this section is the allowed growth factor	
74 18	adjustment for fiscal year 2009=2010, and shall be credited to	
74 19	the allowed growth funding pool created in the property tax	
74 20	relief fund and for distribution in accordance with section	
74 21	426B.5, subsection 1:	
74 22	..... $ 41,962,020	
74 23	NEW SUBSECTION . 4. The following formula amounts shall be	CODE: Provides the annual distribution of the FY 2010 Mental Health Allowed Growth appropriation. Reflects appropriations from multiple sources with a single distribution. Requires $54,108,770 to be distributed to counties that levy at least 70.00% for the MH/MR/DD Services Fund and have limited Fund balances. Fund balances for the distribution formula are those from FY 2008. Those counties that have an ending Fund balance of between 10.00% and 25.00% will experience a reduction of $7,664,576 as a withholding target.
74 24	utilized only to calculate preliminary distribution amounts	
74 25	for the allowed growth factor adjustment for fiscal year	
74 26	2009=2010 under this section by applying the indicated formula	
74 27	provisions to the formula amounts and producing a preliminary	
74 28	distribution total for each county:	
74 29	a. For calculation of a distribution amount for eligible	
74 30	counties from the allowed growth funding pool created in the	
74 31	property tax relief fund in accordance with the requirements	
74 32	in section 426B.5, subsection 1:	
74 33	..... $ 49,626,596	

PG	LN	House File 811	Explanation
74	34	b. For calculation of a distribution amount for counties	
74	35	from the mental health and developmental disabilities (MH/DD)	
75	1	community services fund in accordance with the formula	
75	2	provided in the appropriation made for the MH/DD community	
75	3	services fund for the fiscal year beginning July 1, 2009:	
75	4	..... $ 15,763,951	
75	5	NEW SUBSECTION . 5. After applying the applicable	
75	6	statutory distribution formulas to the amounts indicated in	
75	7	subsection 4 for purposes of producing preliminary	
75	8	distribution totals, the department of human services shall	
75	9	apply a withholding factor to adjust an eligible individual	
75	10	county's preliminary distribution total. In order to be	
75	11	eligible for a distribution under this section, a county must	
75	12	be levying 90 percent or more of the maximum amount allowed	
75	13	for the county's mental health, mental retardation, and	
75	14	developmental disabilities services fund under section	
75	15	331.424A for taxes due and payable in the fiscal year for	
75	16	which the distribution is payable. An ending balance	
75	17	percentage for each county shall be determined by expressing	
75	18	the county's ending balance on a modified accrual basis under	
75	19	generally accepted accounting principles for the fiscal year	
75	20	beginning July 1, 2007, in the county's mental health, mental	
75	21	retardation, and developmental disabilities services fund	
75	22	created under section 331.424A, as a percentage of the	
75	23	county's gross expenditures from that fund for that fiscal	
75	24	year. If a county borrowed moneys for purposes of providing	
75	25	services from the county's services fund on or before July 1,	
75	26	2007, and the county's services fund ending balance for that	
75	27	fiscal year includes the loan proceeds or an amount designated	
75	28	in the county budget to service the loan for the borrowed	
75	29	moneys, those amounts shall not be considered to be part of	
75	30	the county's ending balance for purposes of calculating an	
75	31	ending balance percentage under this subsection. The	
75	32	withholding factor for a county shall be the following	
75	33	applicable percent:	
75	34	a. For an ending balance percentage of less than 5	
75	35	percent, a withholding factor of 0 percent. In addition, a	
76	1	county that is subject to this lettered paragraph shall	

PG	LN	House File 811	Explanation
76	2	receive an inflation adjustment equal to 3 percent of the	
76	3	gross expenditures reported for the county's services fund for	
76	4	the fiscal year.	
76	5	b. For an ending balance percentage of 5 percent or more	
76	6	but less than 10 percent, a withholding factor of 0 percent.	
76	7	In addition, a county that is subject to this lettered	
76	8	paragraph shall receive an inflation adjustment equal to 2	
76	9	percent of the gross expenditures reported for the county's	
76	10	services fund for the fiscal year.	
76	11	c. For an ending balance percentage of 10 percent or more	
76	12	but less than 25 percent, a withholding factor of 25 percent.	
76	13	However, for counties with an ending balance percentage of 10	
76	14	percent or more but less than 15 percent, the amount withheld	
76	15	shall be limited to the amount by which the county's ending	
76	16	balance was in excess of the ending balance percentage of 10	
76	17	percent.	
76	18	d. For an ending balance percentage of 25 percent or more,	
76	19	a withholding percentage of 100 percent.	
76	20	NEW SUBSECTION . 6. The total withholding amounts applied	
76	21	pursuant to subsection 5 shall be equal to a withholding	
76	22	target amount of $7,664,576. If the department of human	
76	23	services determines that the amount to be withheld in	
76	24	accordance with subsection 6 is not equal to the target	
76	25	withholding amount, the department shall adjust the	
76	26	withholding factors listed in subsection 6 as necessary to	
76	27	achieve the target withholding amount. However, in making	
76	28	such adjustments to the withholding factors, the department	
76	29	shall strive to minimize changes to the withholding factors	
76	30	for those ending balance percentage ranges that are lower than	
76	31	others and shall not adjust the zero withholding factor or the	
76	32	inflation adjustment percentage specified in subsection 5,	
76	33	paragraph "a".	
76	34	Sec. 56. ADULT MENTAL HEALTH AND DEVELOPMENTAL	Requires the Chairpersons, in consultation with the Ranking Members, of the Health and Human Services Appropriations Subcommittee to appoint a task force of stakeholders during the 2009 interim to address the Mental Health Service System.
76	35	DISABILITIES SERVICES SYSTEM TASK FORCE. The co-chairpersons	
77	1	of the joint appropriations subcommittee on health and human	
77	2	services, in consultation with the ranking members of the	

PG	LN	House File 811	Explanation
77	3	subcommittee, shall appoint a task force of stakeholders for	
77	4	the 2009 legislative interim to address the service system	
77	5	administered by counties for adult mental health and	
77	6	developmental disabilities services. The task force shall	
77	7	address both funding and service issues and may utilize a	
77	8	facilitator to assist the process. The task force shall	
77	9	submit a final report with recommendations to the governor and	
77	10	general assembly for action during the 2010 legislative	
77	11	session.	
77	12	Sec. 57. MENTAL HEALTH, MENTAL RETARDATION, DEVELOPMENTAL	Requires the Mental Health, Mental Retardation, Developmental Disabilities, and Brain Injury Council to meet with the Iowa Mental Health Planning Council quarterly to coordinate efforts.
77	13	DISABILITIES, AND BRAIN INJURY COMMISSION AND MENTAL HEALTH	
77	14	PLANNING COUNCIL. During the fiscal year beginning July 1,	
77	15	2009, the mental health, mental retardation, developmental	
77	16	disabilities, and brain injury commission and the Iowa mental	
77	17	health planning council established by the department of human	
77	18	services pursuant to federal requirements for the community	
77	19	mental health services block grant, or the officers of such	
77	20	bodies, shall meet at least quarterly to coordinate the	
77	21	efforts of the bodies.	
77	22	Sec. 58. STATE RESOURCE CENTER BILLINGS == AMERICAN	Allows for the per diem at the State Resource Centers to be adjusted to account for the increase in the federal share of the billing amount while the federal American Reinvestment and Recovery Act of 2009 is in effect.
77	23	RECOVERY AND REINVESTMENT ACT. For the period beginning	
77	24	October 1, 2008, and ending September 30, 2010, or the period	
77	25	for which funding from the federal American Recovery and	
77	26	Reinvestment Act of 2009 can be used for the cost of care for	
77	27	patients at a state resource center, whichever is longer, the	
77	28	per diem amounts billed to counties under section 222.73 for	
77	29	such care may be adjusted downward by an applicable percentage	
77	30	of the nonfederal portion of the billing amounts, as necessary	
77	31	to comply with the intent of the federal Act.	
77	32	Sec. 59. EFFECTIVE DATE == RETROACTIVE APPLICABILITY. The	Specifies that Section 58, relating to State Resource Center billing, is effective on enactment and retroactive to October 1, 2008.
77	33	section of this division of this Act relating to state	
77	34	resource center billings, being deemed of immediate	

PG LN	House File 811	Explanation
77 35	importance, takes effect upon enactment, is retroactively	
78 1	applicable to October 1, 2008, and is applicable on and after	
78 2	that date.	
78 3	DIVISION IV	
78 4	HEALTH CARE TRUST FUND APPROPRIATIONS ==	
78 5	HEALTH CARE ACTIVITIES	
78 6	Sec. 60. DEPARTMENT OF PUBLIC HEALTH. In addition to any	
78 7	other appropriation made in this Act for the purposes	
78 8	designated, there is appropriated from the health care trust	
78 9	fund created in section 453A.35A to the department of public	
78 10	health for the fiscal year beginning July 1, 2009, and ending	
78 11	June 30, 2010, the following amounts, or so much thereof as is	
78 12	necessary, for the purposes designated:	
78 13	1. ADDICTIVE DISORDERS	Health Care Trust Fund appropriation to the addictive disorders programs.
78 14	..... $ 2,748,692	DETAIL: This is a decrease of $446,472 and 5.0 FTE positions compared to the estimated net FY 2009 appropriation. The changes in the allocations are delineated below.
78 15	a. Of the funds appropriated in this subsection, $357,870	Allocates $357,870 for implementation of three culturally competent substance abuse treatment pilot projects and specifies project requirements.
78 16	shall be used for culturally competent substance abuse	
78 17	treatment pilot projects.	
78 18	(1) The department shall utilize the amount allocated in	DETAIL: This is a decrease of $92,130 compared to the FY 2009 allocation.
78 19	this lettered paragraph for at least three pilot projects to	
78 20	provide culturally competent substance abuse treatment in	
78 21	various areas of the state. Each pilot project shall target a	
78 22	particular ethnic minority population. The populations	
78 23	targeted shall include but are not limited to	
78 24	African=American, Asian, and Latino.	
78 25	(2) The pilot project requirements shall provide for	
78 26	documentation or other means to ensure access to the cultural	

PG LN	House File 811	Explanation
78 27	competence approach used by a pilot project so that such	
78 28	approach can be replicated and improved upon in successor	
78 29	programs.	
78 30	b. Of the funds appropriated in this subsection,	Allocates $1,597,656 for tobacco use prevention, cessation, and treatment, and specifies the activities to be funded. Permits administrative expenditures of $148,262.
78 31	$1,597,656 shall be used for tobacco use prevention,	
78 32	cessation, and treatment. The department shall utilize the	
78 33	funds to provide for a variety of activities related to	
78 34	tobacco use prevention, cessation, and treatment including to	DETAIL: This is a decrease of $1,150,098 compared to the FY 2009 allocation. There is $8,028,214 appropriated from the General Fund for the same purposes. There is a carryforward of $1,000,000 from FY 2009 to FY 2010 expected for the same purpose.
78 35	support Quitline Iowa, QuitNet cessation counseling and	
79 1	education, grants to school districts and community	
79 2	organizations to support Just Eliminate Lies youth chapters	
79 3	and youth tobacco prevention activities, the Just Eliminate	
79 4	Lies tobacco prevention media campaign, nicotine replacement	
79 5	therapy, and other prevention and cessation materials and	
79 6	media promotion. Of the funds allocated in this lettered	
79 7	paragraph, not more than $148,262 may be utilized by the	
79 8	department for administrative purposes.	
79 9	c. Of the funds appropriated in this subsection, $793,166	Allocates $793,166 for substance abuse treatment.
79 10	shall be used for substance abuse treatment activities.	DETAIL: This is a decrease of $128,834 compared to the FY 2009 allocation. There is $17,546,252 allocated to substance abuse treatment and prevention in the addictive disorders General Fund appropriation.
79 11	2. HEALTHY CHILDREN AND FAMILIES	Health Care Trust Fund appropriation to the Healthy Children and Families Programs.
79 12	..... $ 493,574	DETAIL: This is a decrease of $174,126 and 1.00 FTE position compared to the estimated net FY 2009 appropriation. An additional $2,249,167 is provided to the healthy children and families programs from the General Fund in Division I. The changes in the allocations are delineated below.
79 13	a. Of the funds appropriated in this subsection, $159,603	Allocates $159,603 for the Assuring Better Child Health and

PG	LN	House File 811	Explanation
79	14	shall be used to address the healthy mental development of	Development (ABCD II) Program.
79	15	children from birth through five years of age through local	
79	16	evidence=based strategies that engage both the public and	DETAIL: This is a decrease of $40,397 compared to the FY 2009
79	17	private sectors in promoting healthy development, prevention,	allocation. An additional $292,791 is allocated from the General Fund
79	18	and treatment for children.	for this purpose in Division I.
79	19	b. Of the funds appropriated in this subsection, $143,643	Allocates $143,643 for childhood obesity prevention.
79	20	shall be used for childhood obesity prevention.	
			DETAIL: This is a decrease of $36,357 compared to the FY 2009 allocation.
79	21	c. Of the funds appropriated in this subsection, $190,328	Allocates $190,328 for audiological services and hearing aids for
79	22	shall be used to provide audiological services and hearing	children.
79	23	aids for children. The department may enter into a contract	
79	24	to administer this paragraph.	DETAIL: This is a decrease of $48,172 compared to the FY 2009 allocation.
79	25	d. It is the intent of the general assembly that the	Specifies legislative intent that the DPH continue to implement the
79	26	department of public health shall implement the	recommendations of the Postnatal Tissue and Fluid Bank Task Force.
79	27	recommendations of the postnatal tissue and fluid bank task	
79	28	force created in 2007 Iowa Acts, chapter 147, based upon the	
79	29	report submitted to the general assembly in November 2007, as	
79	30	funding becomes available. The department shall notify the	
79	31	Iowa Code editor and the persons specified in this Act to	
79	32	receive reports when such funding becomes available.	
79	33	3. CHRONIC CONDITIONS	Health Care Trust Fund appropriation to the chronic conditions
79	34	..... $ 999,219	programs.
			DETAIL: This is a decrease of $164,962 and 1.00 FTE position compared to the estimated net FY 2009 appropriation. An additional $2,756,236 is provided to the chronic conditions programs from the General Fund in Division I. The changes in the allocations are delineated below.
79	35	a. Of the funds appropriated in this subsection, $383,271	Allocates $383,271 for additional funding for child health specialty

PG LN	House File 811	Explanation
80 1	shall be used for child health specialty clinics.	clinics. DETAIL: This is a decrease of $90,710 compared to the FY 2009 allocation. This is in addition to the current $461,832 in General Fund appropriations provided for this purpose.
80 2 80 3 80 4 80 5 80 6 80 7 80 8 80 9	b. Of the funds appropriated in this subsection, $454,224 shall be used for the comprehensive cancer control program to reduce the burden of cancer in Iowa through prevention, early detection, effective treatment, and ensuring quality of life. The department shall utilize one of the full=time equivalent positions authorized in this subsection for administration of the activities related to the comprehensive cancer control program.	Allocates $454,224 for the Iowa Consortium for Comprehensive Cancer Control. DETAIL: This is a decrease of $45,776 compared to the FY 2009 allocation.
80 10 80 11	c. Of the funds appropriated in this subsection, $161,724 shall be used for cervical and colon cancer screening.	Allocates $161,724 for cervical and colon cancer screening. DETAIL: This is a decrease of $38,276 compared to the FY 2009 allocation.
80 12 80 13	4. COMMUNITY CAPACITY ..... $ 2,720,507	Health Care Trust Fund appropriation to the community capacity programs. DETAIL: This is a decrease of $69,493 and 6.00 FTE positions compared to the estimated net FY 2009 appropriation. An additional $4,116,847 is provided to the community capacity programs from the General Fund in Division I. NOTE: An additional $500,000 is appropriated to community capacity programs from the federal American Reinvestment and Recovery Act of 2009 in HF 820 (FY 2010 Federal Funds Appropriations Bill) for FY 2010.
80 14 80 15	a. Of the funds appropriated in this subsection, $61,349 shall be deposited in the governmental public health system	Allocates $61,349 for local public health redesign efforts. Requires deposit of the funds in the Governmental Public Health System Fund

PG LN	House File 811	Explanation
80 16	fund created by this Act to be used to further develop the 80 17 Iowa public health standards and to begin implementation of 80 18 public health modernization in accordance with chapter 135A, 80 19 as enacted in this Act, to the extent funding is available.	established in Division XI for expenditure by the Department of Public Health. DETAIL: This is a decrease of $13,265 compared to the FY 2009 allocation.
80 20	b. Of the funds appropriated in this subsection, $163,600 80 21 shall be used for the mental health professional shortage area 80 22 program implemented pursuant to section 135.80.	Allocates $163,600 for the Mental Health Professional Shortage Area Program. DETAIL: This is a decrease of $36,400 compared to the FY 2009 allocation.
80 23	c. Of the funds appropriated in this subsection, $40,900 80 24 shall be used for a grant to a statewide association of 80 25 psychologists that is affiliated with the American 80 26 psychological association to be used for continuation of a 80 27 program to rotate intern psychologists in placements in urban 80 28 and rural mental health professional shortage areas, as 80 29 defined in section 135.80.	Allocates $40,900 to implement a rotation program for intern psychologists in urban and rural mental health professional shortage areas. DETAIL: This is a decrease of $9,100 compared to the FY 2009 allocation.
80 30	d. Of the funds appropriated in this subsection, the 80 31 following amounts shall be allocated to the Iowa collaborative 80 32 safety net provider network established pursuant to section 80 33 135.153 to be used for the purposes designated:	Provides for allocations to the Iowa Collaborative Safety Net Provider Network.
80 34	(1) For distribution to the Iowa=Nebraska primary care 80 35 association for statewide coordination of the Iowa 81 1 collaborative safety net provider network: 81 2 ..... $ 81,800	Allocates $81,800 for the Iowa Collaborative Safety Net Provider Network. DETAIL: This is a decrease of $18,200 compared to the FY 2009 allocation.
81 3	(2) For distribution to the Iowa family planning network 81 4 agencies for necessary infrastructure, statewide coordination, 81 5 provider recruitment, service delivery, and provision of	Allocates $82,796 for family planning network agencies to assist patients in finding an appropriate medical home.

PG LN	House File 811	Explanation
81 6 81 7 81 8	assistance to patients in determining an appropriate medical home: ..... $ 82,796	DETAIL: This is a decrease of $17,204 compared to the FY 2009 allocation
81 9 81 10 81 11 81 12	(3) For distribution to the local boards of health that provide direct services for pilot programs in three counties to assist patients in determining an appropriate medical home: ..... $ 82,796	Allocates $82,796 for local board of health pilot programs in three counties to assist patients in finding an appropriate medical home. DETAIL: This is a decrease of $17,204 compared to the FY 2009 allocation.
81 13 81 14 81 15 81 16	(4) For distribution to maternal and child health centers for pilot programs in three counties to assist patients in determining an appropriate medical home: ..... $ 82,796	Allocates $82,796 for three child and maternal health center pilot programs to assist patients in finding an appropriate medical home. DETAIL: This is a decrease of $17,204 compared to the FY 2009 allocation.
81 17 81 18 81 19 81 20 81 21	(5) For distribution to free clinics for necessary infrastructure, statewide coordination, provider recruitment, service delivery, and provision of assistance to patients in determining an appropriate medical home: ..... $ 204,500	Allocates $204,500 for free clinics to assist patients in finding an appropriate medical home. DETAIL: This is a decrease of $45,500 compared to the FY 2009 allocation.
81 22 81 23 81 24 81 25 81 26	(6) For distribution to rural health clinics for necessary infrastructure, statewide coordination, provider recruitment, service delivery, and provision of assistance to patients in determining an appropriate medical home: ..... $ 122,700	Allocates $122,700 for rural health clinics to assist patients in finding an appropriate medical home. DETAIL: This is a decrease of $27,300 compared to the FY 2009 allocation.
81 27 81 28 81 29 81 30	(7) For continuation of the safety net provider patient access to specialty health care initiative as described in 2007 Iowa Acts, ch. 218, section 109: ..... $ 327,200	Allocates $327,200 for the safety net provider patient access to specialty care initiative. DETAIL: This is a decrease of $72,800 compared to the FY 2009 allocation.
81 31	(8) For continuation of the pharmaceutical infrastructure	Allocates $327,200 for the pharmaceutical infrastructure for safety net

PG LN	House File 811	Explanation
81 32 81 33 81 34	for safety net providers as described in 2007 Iowa Acts, ch. 218, section 108: ..... $ 327,200	providers. DETAIL: This is a decrease of $72,800 compared to the FY 2009 allocation.
81 35 82 1 82 2 82 3	The Iowa collaborative safety net provider network may continue to distribute funds allocated pursuant to this lettered paragraph through existing contracts or renewal of existing contracts.	Permits the Iowa Collaborative Safety Net Provider Network to continue existing contracts to distribute the funding.
82 4 82 5 82 6 82 7 82 8 82 9 82 10	e. Of the funds appropriated in this subsection, $500,000 shall be used to continue funding for the community health center incubation grant program. Funds shall be utilized by the recipient of the grant in the previous fiscal year to ensure continuation of affordable primary and preventive health care services to the uninsured and underserved in northwest Iowa.	Allocates $500,000 for the Incubation Grant Program for Community Health Centers. DETAIL: This is a decrease of $150,000 compared to the FY 2009 allocation. This is funding for the Community Health Center in Sioux City.
82 11 82 12 82 13 82 14 82 15 82 16 82 17 82 18 82 19 82 20 82 21 82 22 82 23	f. Of the funds appropriated in this subsection, $200,000 shall be used for continued implementation of the recommendations of the direct care worker task force established pursuant to 2005 Iowa Acts, chapter 88, based upon the report submitted to the governor and the general assembly in December 2006. The department may use a portion of the funds allocated in this paragraph for an additional position to assist in the continued implementation including credentialing of direct care workers. The department of public health shall report to the persons designated in division I of this Act for submission of reports regarding use of the funds allocated in this lettered paragraph, on or before January 10, 2010.	Allocates $200,000 for continued implementation of the recommendations of the Direct Care Worker Task Force. DETAIL: This is an increase of $125,000 compared to the FY 2009 allocation. The Department is permitted to use the funds to hire an additional FTE position to study the process of credentialing direct care workers.
82 24 82 25	g. (1) Of the funds appropriated in this subsection, $150,000 shall be used for allocation to an independent	Allocates $150,000 to enhance the recruitment and retention of direct care workers in health and long-term care.

PG LN	House File 811	Explanation
82 26	statewide direct care worker association for education,	
82 27	outreach, leadership development, mentoring, and other	DETAIL: This is an increase of $10,000 compared to the FY 2009 allocation.
82 28	initiatives intended to enhance the recruitment and retention	
82 29	of direct care workers in health and long=term care.	
82 30	(2) Of the funds appropriated in this subsection, $70,000	Allocates $70,000 for conference scholarships for direct care workers.
82 31	shall be used to provide conference scholarships to direct	
82 32	care workers.	DETAIL: Maintains the current level of support. This allocation was previously funded under the Medical Assistance Program through federal civil monetary penalties from nursing homes.
82 33	(3) The association specified in this lettered paragraph	Requires the Statewide Direct Care Worker Association to submit a report and Federal 990 Tax Form to the Chairpersons and Ranking Members of the Health and Human Services Appropriations Subcommittee, Legislative Caucus Staffs, and the Legislative Services Agency by January 1, 2010.
82 34	shall report to the persons designated in division I of this	
82 35	Act for submission of reports on or before January 1, 2010,	
83 1	the use of the funds allocated in this lettered paragraph, any	
83 2	progress made regarding the initiatives specified and in	
83 3	expanding the association statewide, and the number of	
83 4	scholarships provided, and shall include in the report a copy	
83 5	of the association's internal revenue service form 990.	
83 6	h. The department may utilize one of the full=time	Requires the Department to utilize 1.00 FTE position for administration of activities related to the Iowa Collaborative Safety Net Provider Network.
83 7	equivalent positions authorized in this subsection for	
83 8	administration of the activities related to the Iowa	
83 9	collaborative safety net provider network.	
83 10	i. The department may utilize one of the full=time	Requires the Department to utilize 1.00 FTE position for administration of the Voluntary Health Care Provider Program.
83 11	equivalent positions authorized in this subsection for	
83 12	administration of the volunteer health care provider program	
83 13	pursuant to section 135.24.	
83 14	j. Of the funds appropriated in this subsection, $222,870	Transfers $222,870 from the Department of Public Health to the Department of Elder Affairs to be used for unmet needs for elderly services.
83 15	shall be transferred to the department of elder affairs to be	
83 16	used for unmet needs.	

PG LN	House File 811	Explanation
83 17	Sec. 61. DEPARTMENT OF HUMAN SERVICES. In addition to any	Health Care Trust Fund appropriation to the Medicaid Program.
83 18	other appropriation made in this Act for the purposes	
83 19	designated, there is appropriated from the health care trust	DETAIL: This is a decrease of $3,109,140 compared to the estimated net FY 2009 appropriation.
83 20	fund created in section 453A.35A to the department of human	
83 21	services for the fiscal year beginning July 1, 2009, and	
83 22	ending June 30, 2010, the following amount, or so much thereof	
83 23	as is necessary, for the purpose designated:	
83 24	MEDICAL ASSISTANCE	
83 25	..... $111,834,156	
83 26	Sec. 62. Section 453A.35, subsection 1, Code 2009, is	CODE: Reduces the transfer of the $127,600,000 of revenue to the Health Care Trust Fund from the General Fund to $117,796,000.
83 27	amended to read as follows:	
83 28	1. The proceeds derived from the sale of stamps and the	DETAIL: This is a decrease of $9,804,000 compared to the FY 2009 transfer.
83 29	payment of taxes, fees, and penalties provided for under this	
83 30	chapter, and the permit fees received from all permits issued	
83 31	by the department, shall be credited to the general fund of	
83 32	the state. However, ~~beginning July 1, 2007,~~ of the revenues	
83 33	generated from the tax on cigarettes pursuant to section	
83 34	453A.6, subsection 1, and from the tax on tobacco products as	
83 35	specified in section 453A.43, subsections 1, 2, 3, and 4, and	
84 1	credited to the general fund of the state under this	
84 2	subsection, there is appropriated, annually, to the health	
84 3	care trust fund created in section 453A.35A, the first one	
84 4	hundred ~~twenty=seven~~ seventeen million ~~six~~ seven hundred	
84 5	ninety=six thousand dollars.	
84 6	DIVISION V	
84 7	IOWACARE	
84 8	Sec. 63. 2008 Iowa Acts, chapter 1187, section 44,	CODE: Increases the FY 2009 IowaCare Account appropriation by $6,000,000 for a total of $46,000,000 to Broadlawns Medical Center. In addition, Broadlawns is guaranteed at least $41,000,000 as part of an agreement to provide $38,000,000 in Polk County property tax dollars to draw down federal financial participation.
84 9	subsection 3, is amended to read as follows:	
84 10	3. There is appropriated from the IowaCare account created	
84 11	in section 249J.24 to the department of human services for the	
84 12	fiscal year beginning July 1, 2008, and ending June 30, 2009,	
84 13	the following amount, or so much thereof as is necessary, to	

PG	LN	House File 811	Explanation
84	14	be used for the purposes designated:	
84	15	For distribution to a publicly owned acute care teaching	
84	16	hospital located in a county with a population over three	
84	17	hundred fifty thousand for the provision of medical and	
84	18	surgical treatment of indigent patients, for provision of	
84	19	services to members of the expansion population pursuant to	
84	20	chapter 249J, and for medical education:	
84	21	..... $ ~~40,000,000~~	
84	22	46,000,000	
84	23	Notwithstanding any provision of law to the contrary, the	
84	24	amount appropriated in this subsection shall be allocated in	
84	25	twelve equal monthly payments as provided in section 249J.24.	
84	26	Any amount appropriated in this subsection in excess of	
84	27	$ ~~37,000,000~~ 41,000,000 shall be allocated only if federal	
84	28	funds are available to match the amount allocated.	
84	29	Sec. 64. IOWACARE ACCOUNT == DISTRIBUTION AND DEPOSIT OF	CODE: Increases the amount collected in Polk County property tax from $34,000,000 to $38,000,000 for FY 2009.
84	30	PROCEEDS OF HOSPITAL TAX LEVY.	
84	31	1. Notwithstanding the total amount of proceeds	
84	32	distributed pursuant to section 249J.24, subsection 6,	
84	33	paragraph "a", unnumbered paragraph 1, for the fiscal period	
84	34	beginning July 1, 2008, and ending June 30, 2009, the county	
84	35	treasurer of a county with a population over 350,000 in which	
85	1	a publicly owned acute care teaching hospital is located shall	
85	2	distribute the proceeds collected pursuant to section 347.7 in	
85	3	a total amount of $38,000,000, which would otherwise be	
85	4	distributed to the county hospital, to the treasurer of state	
85	5	for deposit in the IowaCare account.	
85	6	2. Notwithstanding the amount collected and distributed	CODE: Increases the second of two collections of Polk County tax revenue from $17,000,000 to $21,000,000 for FY 2009.
85	7	for deposit in the IowaCare account pursuant to section	
85	8	249J.24, subsection 6, paragraph "a", subparagraph (2), a	
85	9	maximum of $21,000,000 in proceeds collected pursuant to	
85	10	section 347.7 between January 1, 2009, and June 30, 2009,	
85	11	shall be distributed to the treasurer of state for deposit in	
85	12	the IowaCare account and collections during this time in	

PG LN	House File 811	Explanation
85 13	excess of a maximum of $21,000,000 shall be distributed to the	
85 14	acute care teaching hospital identified in section 249J.24,	
85 15	subsection 6. However, if the collections for the period	
85 16	between January 1, 2009, and June 30, 2009, do not equal at	
85 17	least $21,000,000, the initial proceeds collected pursuant to	
85 18	section 347.7 between January 1, 2009, and June 30, 2009, that	
85 19	are in excess of $17,000,000 and which are distributed to the	
85 20	acute care teaching hospital identified in section 249J.24,	
85 21	subsection 6, shall be redistributed to the treasurer of state	
85 22	for deposit in the IowaCare account in a total amount not to	
85 23	exceed a maximum of $21,000,000.	
85 24	Sec. 65. EFFECTIVE DATE == RETROACTIVITY. This division	This Division is effective on enactment and retroactive to July 1, 2008.
85 25	of this Act, being deemed of immediate importance, takes	
85 26	effect upon enactment and is retroactively applicable to July	
85 27	1, 2008.	
85 28	DIVISION VI	
85 29	APPROPRIATIONS == RELATED CHANGES	
85 30	TOBACCO USE PREVENTION AND CONTROL	
85 31	INITIATIVE == HEALTHY IOWANS TOBACCO TRUST	
85 32	Sec. 66. 2008 Iowa Acts, chapter 1186, section 1,	CODE: Requires nonreversion of the Healthy Iowans Tobacco Trust FY 2009 appropriation for tobacco use prevention and control in the Department of Public Health (DPH) to FY 2010. The Bill caps the amount of total carryforward from multiple sources to $1,000,000.
85 33	subsection 2, paragraph a, is amended by adding the following	
85 34	new unnumbered paragraph:	
85 35	NEW UNNUMBERED PARAGRAPH . Notwithstanding section 8.33,	DETAIL: This Section is effective on enactment.
86 1	moneys appropriated in this lettered paragraph that remain	
86 2	unencumbered or unobligated at the close of the fiscal year	
86 3	shall not revert but shall remain available for expenditure	
86 4	for the purposes designated until the close of the succeeding	
86 5	fiscal year.	
86 6	ADDICTIVE DISORDERS == GENERAL FUND	
86 7	Sec. 67. 2008 Iowa Acts, chapter 1187, section 2,	CODE: Requires nonreversion of the General Fund appropriation for

PG LN	House File 811	Explanation
86 8	subsection 1, is amended by adding the following new	addictive disorders in the Department of Public Health (DPH) to FY 2010. The Bill caps the amount of total carryforward from multiple sources to $1,000,000.
86 9	paragraph:	
86 10	NEW PARAGRAPH . c. Notwithstanding section 8.33, moneys	
86 11	appropriated in this subsection that remain unencumbered or	
86 12	unobligated at the close of the fiscal year shall not revert	DETAIL: This Section is effective on enactment.
86 13	but shall remain available for expenditure for the purposes	
86 14	designated until the close of the succeeding fiscal year.	
86 15	IOWA VETERANS HOME FTES	
86 16	Sec. 68. 2008 Iowa Acts, chapter 1187, section 4,	CODE: Eliminates the FY 2009 FTE cap for the Iowa Veterans Home.
86 17	subsection 2, is amended to read as follows:	
86 18	2. IOWA VETERANS HOME	
86 19	For salaries, support, maintenance, and miscellaneous	DETAIL: This Section is effective on enactment.
86 20	purposes ~~, and for not more than the following full=time~~	
86 21	~~equivalent positions~~ :	
86 22	..... $ 12,694,154	
86 23	~~..... FTEs 951.95~~	
86 24	a. The Iowa veterans home billings involving the	
86 25	department of human services shall be submitted to the	
86 26	department on at least a monthly basis.	
86 27	b. If there is a change in the employer of employees	
86 28	providing services at the Iowa veterans home under a	
86 29	collective bargaining agreement, such employees and the	
86 30	agreement shall be continued by the successor employer as	
86 31	though there had not been a change in employer.	
86 32	c. The funds appropriated in this section that remain	CODE: Requires the initial $1,000,000 of the FY 2009 carryforward from the Iowa Veterans Home to be used for the Home. Transfers $1,833,333 from the FY 2009 carryforward to the Medical Assistance Program for the annualization of the FY 2009 rebasing costs incurred in FY 2010. Requires the remaining carryforward to be used for the Home.
86 33	available for expenditure for the succeeding fiscal year	
86 34	pursuant to section 35D.18, subsection 5, shall be distributed	
86 35	to be used in the succeeding fiscal year in accordance with	
87 1	this lettered paragraph. The first $1,000,000 shall remain	
87 2	available to be used for the purposes of the Iowa veterans	
87 3	home. On or before October 15, 2009, the department of	DETAIL: It is estimated that the Home will carry forward $6,000,000 from FY 2009 in total prior to the specified requirements of use.
87 4	management shall transfer $1,833,333 to the appropriation for	

PG LN	House File 811	Explanation
87 5	the medical assistance program to be used for rebasing of	
87 6	hospital reimbursement under the medical assistance program.	
87 7	Any remaining funding shall be used for purposes of the Iowa	
87 8	veterans home.	
87 9	FEDERAL TEMPORARY ASSISTANCE FOR NEEDY FAMILIES	
87 10	BLOCK GRANT == FAMILY INVESTMENT PROGRAM	
87 11	Sec. 69. 2008 Iowa Acts, chapter 1187, section 5, is	CODE: Requires nonreversion of the TANF appropriation for the Family Investment Program (FIP) in the DHS to FY 2010.
87 12	amended by adding the following new unnumbered paragraph:	
87 13	NEW UNNUMBERED PARAGRAPH . Notwithstanding section 8.33,	DETAIL: This Section is effective on enactment.
87 14	moneys appropriated in this section that remain unencumbered	
87 15	or unobligated at the close of the fiscal year shall not	
87 16	revert but shall remain available for expenditure for the	
87 17	family investment program until the close of the succeeding	
87 18	fiscal year.	
87 19	MEDICAL ASSISTANCE	
87 20	Sec. 70. 2008 Iowa Acts, chapter 1187, section 9,	CODE: Decreases the FY 2009 Medicaid appropriation.
87 21	unnumbered paragraph 2, is amended to read as follows:	
87 22	For medical assistance reimbursement and associated costs	DETAIL: This is a decrease of $61,744,439 to reflect an across-the-board budget reduction and additional funds available through the federal American Reinvestment and Recovery Act of 2009.
87 23	as specifically provided in the reimbursement methodologies in	
87 24	effect on June 30, 2008, except as otherwise expressly	
87 25	authorized by law, including reimbursement for abortion	
87 26	services which shall be available under the medical assistance	
87 27	program only for those abortions which are medically	
87 28	necessary:	
87 29	..... $ ~~649,629,269~~	
87 30	587,884,830	
87 31	TRAINING FOR CHILD WELFARE SERVICES PROVIDERS	
87 32	Sec. 71. 2008 Iowa Acts, chapter 1187, section 9,	Allocates $250,000 to the Department of Human Services for training

PG LN	House File 811	Explanation
87 33	subsection 20, paragraph c, subparagraph (6), is amended to	of child welfare services providers. Permits unencumbered funds at the end of FY 2010 to carry forward for use in FY 2011.
87 34	read as follows:	
87 35	(6) For training for child welfare services providers,	
88 1	$250,000. The training shall be developed by the department	
88 2	in collaboration with the coalition for children and family	
88 3	services in Iowa. Notwithstanding section 8.33, moneys	
88 4	allocated in this subparagraph that remain unencumbered or	
88 5	unobligated at the close of the fiscal year shall not revert	
88 6	but shall remain available for expenditure for the purposes	
88 7	designated until the close of the succeeding fiscal year.	
88 8	EMERGENCY AND CHILDRENS MENTAL HEALTH SERVICE	
88 9	Sec. 72. 2008 Iowa Acts, chapter 1187, section 9,	CODE: Requires the DHS to revise projects in the Emergency Mental Health and Children's Mental Health System and extend them to a period of 24 months and utilize existing appropriations to fund the projects through FY 2011.
88 10	subsection 20, is amended by adding the following new	
88 11	paragraph:	
88 12	NEW PARAGRAPH . cc. The department shall revise the	
88 13	provisions for the projects to implement an emergency mental	
88 14	health crisis services system and a mental health services	
88 15	system for children and youth under paragraph "c",	
88 16	subparagraphs (1) and (2), in order for services to be	
88 17	provided under both of the projects for a period of at least	
88 18	24 months. Notwithstanding section 8.33, moneys allocated for	
88 19	the projects in paragraph "c" of this subsection that remain	
88 20	unencumbered or unobligated at the close of the fiscal year	
88 21	shall not revert but shall remain available for expenditure	
88 22	for the purposes designated until the close of the fiscal year	
88 23	that begins July 1, 2010.	
88 24	Sec. 73. 2008 Iowa Acts, chapter 1187, section 9, is	CODE: Specifies that the revised Medicaid appropriation in Section 70 of this Bill includes the across-the-board reduction made in Executive Order number 10.
88 25	amended by adding the following new subsection:	
88 26	NEW SUBSECTION . 25. The revised appropriation made in	
88 27	this section incorporates reductions made pursuant to	
88 28	executive order number 10 issued on December 22, 2008.	
88 29	STATE SUPPLEMENTARY ASSISTANCE	

PG LN	House File 811	Explanation
88 30	Sec. 74. 2008 Iowa Acts, chapter 1187, section 12, is amended by adding the following new subsection: NEW SUBSECTION . 4. Notwithstanding section 8.33, moneys appropriated in this section that remain unencumbered or unobligated at the close of the fiscal year shall remain available for expenditure for the state supplementary assistance program until the close of the succeeding fiscal year.	CODE: Requires nonreversion of FY 2009 State Supplementary Assistance Funds. DETAIL: The estimated carryforward from FY 2009 to FY 2010 is $500,000.
89 3	FAMILY SUPPORT SUBSIDY SLOTS	
89 4	Sec. 75. 2008 Iowa Acts, chapter 1187, section 19, is amended by adding the following new subsection: NEW SUBSECTION . 3. If at any time during the fiscal year, the amount of funding available for the family support subsidy program is reduced from the amount initially used to establish the figure for the number of family members for whom a subsidy is to be provided at any one time during the fiscal year, notwithstanding section 225C.38, subsection 2, the department shall revise the figure as necessary to conform to the amount of funding available.	Requires the Department to revise the funding available to participants in the Family Support Subsidy Program, if available funds are less than anticipated.
89 14	PREGNANCY COUNSELING	
89 15	Sec. 76. 2008 Iowa Acts, chapter 1187, section 30, is amended by adding the following new unnumbered paragraph: NEW UNNUMBERED PARAGRAPH . Notwithstanding section 8.33, moneys appropriated in this section that remain unencumbered or unobligated at the close of the fiscal year shall remain available for expenditure for the purpose designated until the close of the fiscal year beginning July 1, 2010.	CODE: Requires nonreversion of FY 2009 Pregnancy Counseling funds.
89 22	NURSING FACILITIES	
89 23	Sec. 77. 2008 Iowa Acts, chapter 1187, section 32,	CODE: Reduces the State funding cap for nursing facilities under the

PG LN	House File 811	Explanation
89 24	subsection 1, paragraph a, subparagraph (1), is amended to	Medicaid Program for FY 2009 by $26,885,298. The cap is reduced to reflect reduced State costs to reflect the 6.20% Federal Medical Assistance Match (FMAP).
89 25	read as follows:	
89 26	(1) For the fiscal year beginning July 1, 2008, the total	
89 27	state funding amount for the nursing facility budget shall not	
89 28	exceed ~~$183,367,323~~ $158,482,025 .	DETAIL: The federal American Recovery and Reinvestment Act of 2009 reduced State funds needed to fund nursing facilities by 6.20% beginning October 1, 2009. There is no change to the overall reimbursement rate for nursing facilities.
89 29	DEPARTMENT OF ELDER AFFAIRS == MATCHING FUNDS	
89 30	Sec. 78. 2008 Iowa Acts, chapter 1187, section 39, is	CODE: Permits the Department of Elder Affairs to carryforward $216,242 from the Senior Living Trust Fund to be used to match $1,337,965 of federal funds.
89 31	amended by adding the following new subsection:	
89 32	NEW SUBSECTION . 4. Notwithstanding section 8.33, of the	
89 33	funds appropriated in this section, $216,242 shall not revert	
89 34	at the close of the fiscal year, but shall remain available to	
89 35	provide matching funds for the senior nutrition programs and	DETAIL: The American Reinvestment and Recovery Act of 2009 provided additional funds to states for the Senior Nutrition Program and the Senior Internship Program and requires the State to provide 15.00% matching funds.
90 1	the senior internship program funded through the federal	
90 2	American Reinvestment and Recovery Act of 2009 for the period	
90 3	during which federal funding is available under the Act.	
90 4	ACCOUNT FOR HEALTH CARE TRANSFORMATION	
90 5	Sec. 79. 2008 Iowa Acts, chapter 1187, section 46, is	CODE: Repeals the transfer of $3,000,000 from the HCTA to the IowaCare Account.
90 6	amended to read as follows:	
90 7	~~Sec. 46. TRANSFER FROM ACCOUNT FOR HEALTH CARE~~	
90 8	~~TRANSFORMATION. There is transferred from the account for~~	
90 9	~~health care transformation created pursuant to section 249J.23~~	DETAIL: With additional federal revenue resulting from matching dollars from Polk County and the federal FMAP adjustment, the funds are no longer needed.
90 10	~~to the IowaCare account created in section 249J.24 a total of~~	
90 11	~~$3,000,000 for the fiscal year beginning July 1, 2008, and~~	
90 12	~~ending June 30, 2009.~~	
90 13	MEDICAL ASSISTANCE PROGRAM NONREVERSION	
90 14	Sec. 80. 2008 Iowa Acts, chapter 1187, section 50, is	CODE: Requires nonreversion of funds remaining in the Medical

PG LN	House File 811	Explanation
90 15	amended to read as follows:	Assistance Program through FY 2010.
90 16	SEC. 50. MEDICAL ASSISTANCE PROGRAM == ~~REVERSION TO SENIOR~~	
90 17	~~LIVING TRUST FUND~~ NONREVERSION FOR FY 2008=2009.	DETAIL: The federal American Reinvestment and Recovery Act of 2009 prohibits Medicaid stimulus funds from being deposited in a reserve or rainy day fund. This would keep any unspent funds in the Medicaid Program.
90 18	Notwithstanding section 8.33, if moneys appropriated for	
90 19	purposes of the medical assistance program for the fiscal year	
90 20	beginning July 1, 2008, and ending June 30, 2009, from the	
90 21	general fund of the state, the senior living trust fund, the	
90 22	healthy Iowans tobacco trust fund, the health care trust fund,	
90 23	and the property tax relief fund are in excess of actual	
90 24	expenditures for the medical assistance program and remain	
90 25	unencumbered or unobligated at the close of the fiscal year,	
90 26	the excess moneys shall not revert but shall ~~be transferred to~~	
90 27	~~the senior living trust fund created in section 249H.4~~ remain	
90 28	available for expenditure for the purposes of the medical	
90 29	assistance program until the close of the fiscal year	
90 30	beginning July 1, 2009 .	
90 31	ADDICTIVE DISORDERS == HEALTH CARE TRUST FUND	CODE: Requires nonreversion of the FY 2009 Health Care Trust Fund addictive disorders appropriation through FY 2010.
90 32	Sec. 81. 2008 Iowa Acts, chapter 1187, section 62,	
90 33	subsection 1, is amended by adding the following new	
90 34	paragraph:	DETAIL: This Section is effective on enactment.
90 35	NEW PARAGRAPH . d. Notwithstanding section 8.33, moneys	
91 1	appropriated in this subsection that remain unencumbered or	
91 2	unobligated at the close of the fiscal year shall not revert	
91 3	but shall remain available for expenditure for the purposes	
91 4	designated until the close of the succeeding fiscal year.	
91 5	VIETNAM CONFLICT VETERANS BONUS FUND	
91 6	Sec. 82. 2007 Iowa Acts, chapter 176, section 3,	CODE: Requires nonreversion of the FY 2008 appropriation for the Vietnam Conflict Veterans Bonus Fund through FY 2010.
91 7	unnumbered paragraph 3, as enacted by 2008 Iowa Acts, chapter	
91 8	1187, section 68, is amended to read as follows:	
91 9	Notwithstanding section 8.33, moneys appropriated in this	DETAIL: This Section is effective on enactment.
91 10	section that remain unencumbered or unobligated at the close	
91 11	of the fiscal year shall not revert but shall remain available	

PG LN	House File 811	Explanation
91 12	for expenditure for the purposes designated until the close of	
91 13	the ~~succeeding~~ fiscal year beginning July 1, 2009 .	
91 14	INJURED VETERANS GRANT PROGRAM	
91 15	Sec. 83. 2006 Iowa Acts, chapter 1184, section 5, as	CODE: Requires nonreversion of the FY 2007 Injured Veterans Grant Program appropriation through FY 2010.
91 16	enacted by 2007 Iowa Acts, chapter 203, section 1, subsection	
91 17	4, unnumbered paragraph 2, and amended by 2008 Iowa Acts,	
91 18	chapter 1187, section 69, is amended to read as follows:	DETAIL: This Section is effective on enactment.
91 19	Notwithstanding section 8.33, moneys appropriated in this	
91 20	subsection that remain unencumbered or unobligated at the	
91 21	close of the fiscal year shall not revert but shall remain	
91 22	available for expenditure for the purposes designated until	
91 23	the close of the fiscal year beginning July 1, ~~2008~~ 2009 .	
91 24	Sec. 84. 2008 Iowa Acts, chapter 1188, section 16, is	CODE: Decreases the FY 2010 appropriation to cover children under the Medical Assistance and hawk-i Programs. This is a decrease of $520,999 compared to the estimated net FY 2009 appropriation for a general reduction of 11.30%.
91 25	amended to read as follows:	
91 26	SEC. 16. MEDICAL ASSISTANCE, HAWK=I, AND HAWK=I EXPANSION	
91 27	PROGRAMS == COVERING CHILDREN == APPROPRIATION. There is	
91 28	appropriated from the general fund of the state to the	
91 29	department of human services for the designated fiscal years,	
91 30	the following amounts, or so much thereof as is necessary, for	
91 31	the purpose designated:	
91 32	To cover children as provided in this Act under the medical	
91 33	assistance, hawk=i, and hawk=i expansion programs and outreach	
91 34	under the current structure of the programs:	
91 35	FY 2008=2009 ..... $ 4,800,000	
92 1	FY 2009=2010 ..... $ ~~14,800,000~~	
92 2	4,207,001	
92 3	FY 2010=2011 ..... $ 24,800,000	
92 4	Sec. 85. CHILD CARE CREDIT FUND BALANCE TRANSFERRED.	Transfers money remaining in the Child Care Credit Fund to the State General Fund at the close of FY 2009.
92 5	Moneys in the child care credit fund that remain unencumbered	
92 6	or unobligated at the close of the fiscal year beginning July	
92 7	1, 2008, are transferred to the general fund of the state.	DETAIL: This Section is effective on enactment.

PG LN	House File 811	Explanation
92 8	Sec. 86. ADDICTIVE DISORDERS NONREVERSION DIRECTIVE. The authority provided in this division of this Act for nonreversion of the appropriations for addictive disorder conditions referenced in this section is limited to $1,000,000 and shall be realized by applying the authority to such appropriations in the following order until the limitation amount is reached: 1. The appropriation made from the healthy Iowans tobacco trust in 2008 Iowa Acts, chapter 1186, section 1. 2. The appropriation made from the health care trust fund in 2008 Iowa Acts, chapter 1187, section 62, subsection 1. 3. The appropriation made from the general fund of the state in 2008 Iowa Acts, chapter 1187, section 2, subsection 1.	Specifies the order of priority for carrying forward the remaining FY 2009 Addictive Disorders funds to FY 2010 totaling $1,000,000. This includes: • First from the Healthy Iowans Tobacco Trust Fund. • Second from the Health Care Trust Fund. • Third from the General Fund. DETAIL: This Section is effective on enactment.
92 22	Sec. 87. EFFECTIVE DATE. This division of this Act, being deemed of immediate importance, takes effect upon enactment.	Sections relating to the carryforward of funding are effective on enactment.
92 24	DIVISION VII HEPATITIS AWARENESS	
92 26	Sec. 88. Section 135.19, Code 2009, is amended to read as follows: 135.19 VIRAL HEPATITIS PROGRAM == AWARENESS, VACCINATIONS , AND TESTING == STUDY. 1. If sufficient funds are appropriated by the general assembly, the department shall establish and administer a viral hepatitis program. The goal of the program shall be to distribute information to citizens of this state who are at an increased risk for exposure to viral hepatitis regarding the higher incidence of hepatitis C exposure and infection among these populations, the dangers presented by the disease, and contacts for additional information and referrals. The program shall also make available hepatitis A and hepatitis B vaccinations, and hepatitis C testing.	CODE: Requires the DPH to consult with the Department of Veterans Affairs regarding the Hepatitis Awareness Program.

PG	LN	House File 811	Explanation
93	5	2. The department shall establish by rule a list of	
93	6	individuals by category who are at increased risk for viral	
93	7	hepatitis exposure. The list shall be consistent with	
93	8	recommendations developed by the centers for disease control,	
93	9	and shall be developed in consultation with the Iowa viral	
93	10	hepatitis task force and the Iowa department of veterans	
93	11	affairs . The department shall also establish by rule what	
93	12	information is to be distributed and the form and manner of	
93	13	distribution. The rules shall also establish a vaccination	
93	14	and testing program, to be coordinated by the department	
93	15	through local health departments and clinics and other	
93	16	appropriate locations .	
93	17	~~3. The department shall conduct a study to provide an~~	
93	18	~~epidemiological profile of hepatitis C and to assess its~~	
93	19	~~current and future impact on the state. The department shall~~	
93	20	~~submit a report to the members of the general assembly by~~	
93	21	~~January 1, 2008, regarding the results of the study, and shall~~	
93	22	~~include a status report regarding the development and~~	
93	23	~~distribution of viral hepatitis information, and the results~~	
93	24	~~of the vaccination and testing program.~~	
93	25	Sec. 89. Section 135.20, Code 2009, is repealed.	CODE: Repeals the Veterans Hepatitis C Awareness Program. Veterans are included in the Hepatitis Awareness Program in Section 135.19, Code of Iowa.
93	26	DIVISION VIII	
93	27	SENIOR LIVING COORDINATING UNIT	
93	28	Sec. 90. Section 231.58, Code 2009, is amended by striking	CODE: Eliminates the Senior Living Coordinating Unit. The Director of Elder Affairs is given the authority to convene a meeting with the Department of Public Health, Department of Human Services, and the Department of Inspections and Appeals to assist in the coordination of policy, services, and planning.
93	29	the section and inserting in lieu thereof the following:	
93	30	231.58 LONG=TERM LIVING COORDINATION.	
93	31	The director may convene meetings, as necessary, of the	
93	32	director and the directors of human services, public health,	
93	33	and inspections and appeals, to assist in the coordination of	
93	34	policy, service delivery, and long=range planning relating to	
93	35	the long=term living system and older Iowans in the state.	

PG	LN	House File 811	Explanation
94	1	The group may consult with individuals, institutions and	
94	2	entities with expertise in the area of the long=term living	
94	3	system and older Iowans, as necessary, to facilitate the	
94	4	group's efforts.	
94	5	Sec. 91. Section 249H.3, subsection 6, paragraph b, Code	CODE: Eliminates the Senior Living Coordinating Unit.
94	6	2009, is amended to read as follows:	
94	7	b. New construction for long=term care alternatives,	
94	8	excluding new construction of assisted=living programs or	
94	9	elder group homes, if ~~the senior living coordinating unit~~	
94	10	~~determines that~~ new construction is more cost=effective than	
94	11	the conversion of existing space.	
94	12	Sec. 92. Section 249H.3, subsection 8, paragraph b, Code	CODE: Eliminates the Senior Living Coordinating Unit.
94	13	2009, is amended to read as follows:	
94	14	b. New construction of an assisted=living program if	
94	15	existing nursing facility beds are no longer licensed and ~~the~~	
94	16	~~senior living coordinating unit determines that~~ new	
94	17	construction is more cost=effective than the conversion of	
94	18	existing space.	
94	19	Sec. 93. Section 249H.3, subsection 12, Code 2009, is	CODE: Eliminates the Senior Living Coordinating Unit.
94	20	amended by striking the subsection.	
94	21	Sec. 94. Section 249H.4, subsection 6, Code 2009, is	CODE: Eliminates the Senior Living Coordinating Unit.
94	22	amended by striking the subsection.	
94	23	Sec. 95. Section 249H.7, subsection 1, Code 2009, is	CODE: Eliminates the Senior Living Coordinating Unit.
94	24	amended to read as follows:	
94	25	1. ~~Beginning October 1, 2000, the~~ The department of elder	
94	26	affairs ~~, in consultation with the senior living coordinating~~	
94	27	~~unit,~~ shall use funds appropriated from the senior living	
94	28	trust fund for activities related to the design, maintenance,	
94	29	or expansion of home and community=based services for seniors,	

PG	LN	House File 811	Explanation
94	30	including but not limited to adult day services, personal	
94	31	care, respite, homemaker, chore, and transportation services	
94	32	designed to promote the independence of and to delay the use	
94	33	of institutional care by seniors with low and moderate	
94	34	incomes. At any time that moneys are appropriated, the	
94	35	department of elder affairs ~~, in consultation with the senior~~	
95	1	~~living coordinating unit,~~ shall disburse the funds to the area	
95	2	agencies on aging.	
95	3	Sec. 96. Section 249H.7, subsection 2, unnumbered	CODE: Eliminates the Senior Living Coordinating Unit.
95	4	paragraph 1, Code 2009, is amended to read as follows:	
95	5	The department of elder affairs shall adopt rules, in	
95	6	consultation with the ~~senior living coordinating unit and the~~	
95	7	area agencies on aging, pursuant to chapter 17A, to provide	
95	8	all of the following:	
95	9	Sec. 97. Section 249H.7, subsection 2, paragraph c, Code	CODE: Eliminates the Senior Living Coordinating Unit.
95	10	2009, is amended to read as follows:	
95	11	c. Other procedures the department of elder affairs deems	
95	12	necessary for the proper administration of this section ~~,~~	
95	13	~~including but not limited to the submission of progress~~	
95	14	~~reports, on a bimonthly basis, to the senior living~~	
95	15	~~coordinating unit~~ .	
95	16	Sec. 98. Section 249H.9, subsection 1, Code 2009, is	CODE: Eliminates the Senior Living Coordinating Unit.
95	17	amended to read as follows:	
95	18	1. The department of elder affairs and the area agencies	
95	19	on aging ~~, in consultation with the senior living coordinating~~	
95	20	~~unit,~~ shall create, on a county basis, a database directory of	
95	21	all health care and support services available to seniors.	
95	22	The department of elder affairs shall make the database	
95	23	electronically available to the public, and shall update the	
95	24	database on at least a monthly basis.	
95	25	Sec. 99. Section 249H.10, Code 2009, is amended to read as	CODE: Eliminates the Senior Living Coordinating Unit.

95 26 follows:
95 27 249H.10 CAREGIVER SUPPORT == ACCESS AND EDUCATION
95 28 PROGRAMS.
95 29 The department of human services and the department of
95 30 elder affairs ~~, in consultation with the senior living~~
95 31 ~~coordinating unit,~~ shall implement a caregiver support program
95 32 to provide access to respite care and to provide education to
95 33 caregivers in providing appropriate care to seniors and
95 34 persons with disabilities. The program shall be provided
95 35 through the area agencies on aging or other appropriate
96 1 agencies.

96 2 DIVISION IX
96 3 GAMBLING TREATMENT FUND ELIMINATION

96 4 Sec. 100. Section 8.57, subsection 6, paragraph e,
96 5 subparagraph (1), Code 2009, is amended to read as follows:
96 6 (1) Notwithstanding provisions to the contrary in sections
96 7 99D.17 and 99F.11, for the fiscal year beginning July 1, 2000,
96 8 and for each fiscal year thereafter, not more than a total of
96 9 ~~sixty~~ sixty=six million dollars shall be deposited in the
96 10 general fund of the state in any fiscal year pursuant to
96 11 sections 99D.17 and 99F.11. The next fifteen million dollars
96 12 of the moneys directed to be deposited in the general fund of
96 13 the state in a fiscal year pursuant to sections 99D.17 and
96 14 99F.11 shall be deposited in the vision Iowa fund created in
96 15 section 12.72 for the fiscal year beginning July 1, 2000, and
96 16 for each fiscal year through the fiscal year beginning July 1,
96 17 2019. The next five million dollars of the moneys directed to
96 18 be deposited in the general fund of the state in a fiscal year
96 19 pursuant to sections 99D.17 and 99F.11 shall be deposited in
96 20 the school infrastructure fund created in section 12.82 for
96 21 the fiscal year beginning July 1, 2000, and for each fiscal
96 22 year thereafter until the principal and interest on all bonds
96 23 issued by the treasurer of state pursuant to section 12.81 are
96 24 paid, as determined by the treasurer of state. The total

CODE: Increases the General Fund transfer from gambling proceeds from $60,000,000 per year to $66,000,000 per year. This reflects the action to fund gambling treatment programs from the General Fund and eliminate the same $6,000,000 transfer to the Gambling Treatment Program. The change does not impact the funding remaining for the Rebuild Iowa Infrastructure Fund.

NOTE: Section 26 of SF 376 (Revenue Bonding and I-JOBS Program Act) amends the allocation of the State Wagering Tax beginning in FY 2011 for the purpose of pledging $55,000,000 for debt service on revenue bonds.

PG	LN	House File 811	Explanation
96	25	moneys in excess of the moneys deposited in the general fund	
96	26	of the state, the vision Iowa fund, and the school	
96	27	infrastructure fund in a fiscal year shall be deposited in the	
96	28	rebuild Iowa infrastructure fund and shall be used as provided	
96	29	in this section, notwithstanding section 8.60.	
96	30	Sec. 101. Section 99D.7, subsection 22, Code 2009, is	CODE: Reflects the elimination of the Gambling Treatment Fund.
96	31	amended to read as follows:	
96	32	22. To require licensees to establish a process to allow a	
96	33	person to be voluntarily excluded for life from a racetrack	
96	34	enclosure and all other licensed facilities under this chapter	
96	35	and chapter 99F. The process established shall require that a	
97	1	licensee disseminate information regarding persons voluntarily	
97	2	excluded to all licensees under this chapter and chapter 99F.	
97	3	The state and any licensee under this chapter or chapter 99F	
97	4	shall not be liable to any person for any claim which may	
97	5	arise from this process. In addition to any other penalty	
97	6	provided by law, any money or thing of value that has been	
97	7	obtained by, or is owed to, a voluntarily excluded person by a	
97	8	licensee as a result of wagers made by the person after the	
97	9	person has been voluntarily excluded shall not be paid to the	
97	10	person but shall be ~~deposited into~~ credited to the ~~gambling~~	
97	11	~~treatment~~ general fund ~~created in section 135.150~~ of the	
97	12	state .	
97	13	Sec. 102. Section 99D.15, subsection 5, Code 2009, is	CODE: Reflects the elimination of the Gambling Treatment Fund.
97	14	amended by striking the subsection.	
97	15	Sec. 103. Section 99F.4, subsection 22, Code 2009, is	CODE: Reflects the elimination of the Gambling Treatment Fund.
97	16	amended to read as follows:	
97	17	22. To require licensees to establish a process to allow a	
97	18	person to be voluntarily excluded for life from an excursion	
97	19	gambling boat and all other licensed facilities under this	
97	20	chapter and chapter 99D. The process established shall	
97	21	require that a licensee disseminate information regarding	

PG LN	House File 811	Explanation
97 22	persons voluntarily excluded to all licensees under this	
97 23	chapter and chapter 99D. The state and any licensee under	
97 24	this chapter or chapter 99D shall not be liable to any person	
97 25	for any claim which may arise from this process. In addition	
97 26	to any other penalty provided by law, any money or thing of	
97 27	value that has been obtained by, or is owed to, a voluntarily	
97 28	excluded person by a licensee as a result of wagers made by	
97 29	the person after the person has been voluntarily excluded	
97 30	shall not be paid to the person but shall be ~~deposited into~~	
97 31	credited to the ~~gambling treatment~~ general fund ~~created in~~	
97 32	~~section 135.150~~ of the state .	
97 33	Sec. 104. Section 99F.11, subsection 3, paragraph c, Code	CODE: Reflects the elimination of the Gambling Treatment Fund.
97 34	2009, is amended by striking the paragraph.	
97 35	Sec. 105. Section 99G.39, subsection 1, Code 2009, is	CODE: Reflects the elimination of the Gambling Treatment Fund.
98 1	amended to read as follows:	
98 2	1. Upon receipt of any revenue, the chief executive	
98 3	officer shall deposit the moneys in the lottery fund created	
98 4	pursuant to section 99G.40. At least fifty percent of the	
98 5	projected annual revenue accruing from the sale of tickets or	
98 6	shares shall be allocated for payment of prizes to the holders	
98 7	of winning tickets. After the payment of prizes, the	
98 8	~~following shall be deducted from the authority's revenue prior~~	
98 9	~~to disbursement:~~	
98 10	~~a. An amount equal to one=half of one percent of the gross~~	
98 11	~~lottery revenue for the year shall be deposited in the~~	
98 12	~~gambling treatment fund created in section 135.150.~~	
98 13	~~b. The~~ expenses of conducting the lottery shall be	
98 14	deducted from the authority's revenue prior to disbursement .	
98 15	Expenses for advertising production and media purchases shall	
98 16	not exceed four percent of the authority's gross revenue for	
98 17	the year.	
98 18	Sec. 106. Section 135.150, Code 2009, is amended to read	CODE: Reflects the elimination of the Gambling Treatment Fund.
98 19	as follows:	Requires the DPH to continue the Gambling Treatment Program and

PG	LN	House File 811	Explanation
98	20	135.150 GAMBLING TREATMENT ~~FUND ==~~ PROGRAM == STANDARDS	report semi-annually to the Government Oversight Committee.
98	21	AND LICENSING.	
98	22	~~1. A gambling treatment fund is created in the state~~	
98	23	~~treasury under the control of the department. The fund~~	
98	24	~~consists of all moneys appropriated to the fund. However, if~~	
98	25	~~moneys appropriated to the fund in a fiscal year exceed six~~	
98	26	~~million dollars, the amount exceeding six million dollars~~	
98	27	~~shall be transferred to the rebuild Iowa infrastructure fund~~	
98	28	~~created in section 8.57. Moneys in the fund are appropriated~~	
98	29	~~to the department for the purposes described in this section.~~	
98	30	~~2.~~ 1. a. ~~Moneys appropriated to the department under~~	
98	31	~~this section shall be for the purpose of operating~~ The	
98	32	department shall operate a gambling treatment program ~~and~~	
98	33	~~shall be used for funding of administrative costs and~~ to	
98	34	provide programs which may include ~~,~~ but are not limited to ~~,~~	
98	35	outpatient and follow=up treatment for persons affected by	
99	1	problem gambling, rehabilitation and residential treatment	
99	2	programs, information and referral services, crisis call	
99	3	access, education and preventive services, and financial	
99	4	management and credit counseling services.	
99	5	b. A person shall not maintain or conduct a gambling	
99	6	treatment program funded ~~under this section~~ through the	
99	7	department unless the person has obtained a license for the	
99	8	program from the department. The department shall adopt rules	
99	9	to establish standards for the licensing and operation of	
99	10	gambling treatment programs under this section. The rules	
99	11	shall specify, but are not limited to specifying, the	
99	12	qualifications for persons providing gambling treatment	
99	13	services, standards for the organization and administration of	
99	14	gambling treatment programs, and a mechanism to monitor	
99	15	compliance with this section and the rules adopted under this	
99	16	section.	
99	17	~~3. Notwithstanding section 12C.7, subsection 2, interest~~	
99	18	~~or earnings on moneys deposited in the gambling treatment fund~~	
99	19	~~shall be credited to the gambling treatment fund.~~	
99	20	~~Notwithstanding section 8.33, moneys credited to the gambling~~	
99	21	~~treatment fund shall not revert to the fund from which~~	
99	22	~~appropriated at the close of a fiscal year.~~	

PG	LN	House File 811	Explanation
99	23	~~4.~~ 2. The department shall report semiannually to the	
99	24	legislative government oversight committees regarding the	
99	25	operation of the gambling treatment ~~fund and~~ program. The	
99	26	report shall include, but is not limited to, information on	
99	27	~~revenues and expenses related to the fund for the previous~~	
99	28	~~period, fund balances for the period, and~~ the moneys expended	
99	29	and grants awarded for operation of the gambling treatment	
99	30	program.	
99	31	Sec. 107. GAMBLING TREATMENT FUND BALANCE TRANSFERRED ==	Transfers the funds remaining in the Gambling Treatment Fund transfer to the State General Fund at the end of FY 2009.
99	32	EFFECTIVE DATE.	
99	33	1. Moneys in the gambling treatment fund that remain	DETAIL: This Section is effective on enactment.
99	34	unencumbered or unobligated at the close of the fiscal year	
99	35	beginning July 1, 2008, are transferred to the general fund of	FISCAL IMPACT: An estimated $500,000 will be transferred from the Gambling Treatment Fund to the General Fund.
100	1	the state.	
100	2	2. This section of this Act, being deemed of immediate	
100	3	importance, takes effect upon enactment.	
100	4	DIVISION X	
100	5	CHILD DEATH REVIEW TEAM	
100	6	Sec. 108. Section 135.43, subsection 1, Code 2009, is	CODE: Establishes the Child Death Review Team as part of the Office of the State Medical Examiner.
100	7	amended to read as follows:	
100	8	1. An Iowa child death review team is established as ~~an~~	
100	9	~~independent agency of state government~~ part of the office of	
100	10	the state medical examiner . The ~~Iowa department of public~~	
100	11	~~health~~ office of the state medical examiner shall provide	
100	12	staffing and administrative support to the team.	
100	13	Sec. 109. Section 135.43, subsection 2, unnumbered	CODE: Reflects the transfer of duties from the Department of Public Health to the Office of the State Medical Examiner regarding the Child Death Review Team.
100	14	paragraph 1, Code 2009, is amended to read as follows:	
100	15	The membership of the review team is subject to the	
100	16	provisions of sections 69.16 and 69.16A, relating to political	
100	17	affiliation and gender balance. Review team members who are	
100	18	not designated by another appointing authority shall be	

PG LN	House File 811	Explanation
100 19	appointed by the ~~director of public health~~ state medical	
100 20	examiner . Membership terms shall be for three years. A	
100 21	membership vacancy shall be filled in the same manner as the	
100 22	original appointment. The review team shall elect a	
100 23	chairperson and other officers as deemed necessary by the	
100 24	review team. The review team shall meet upon the call of the	
100 25	~~chairperson, upon the request of a state agency,~~ state medical	
100 26	examiner or as determined by the review team. The members of	
100 27	the team are eligible for reimbursement of actual and	
100 28	necessary expenses incurred in the performance of their	
100 29	official duties. The review team shall include the following:	
100 30	Sec. 110. Section 135.43, subsection 4, unnumbered	CODE: Reflects the transfer of duties from the Department of Public Health to the Office of the State Medical Examiner regarding the Child Death Review Team.
100 31	paragraph 1, Code 2009, is amended to read as follows:	
100 32	The review team shall develop protocols for a child	
100 33	fatality review committee, to be appointed by the ~~director~~	
100 34	state medical examiner on an ad hoc basis, to immediately	
100 35	review the child abuse assessments which involve the fatality	
101 1	of a child under age eighteen. The ~~director~~ state medical	
101 2	examiner shall appoint a medical examiner, a pediatrician, and	
101 3	a person involved with law enforcement to the committee.	
101 4	Sec. 111. Section 135.43, subsections 7 and 8, Code 2009,	CODE: Reflects the transfer of duties from the Department of Public Health to the Office of the State Medical Examiner regarding the Child Death Review Team.
101 5	are amended to read as follows:	
101 6	7. a. The state medical examiner, the Iowa department of	
101 7	public health , and the department of human services shall	
101 8	adopt rules providing for disclosure of information which is	
101 9	confidential under chapter 22 or any other provision of state	
101 10	law, to the review team for purposes of performing its child	
101 11	death and child abuse review responsibilities.	
101 12	b. A person in possession or control of medical,	
101 13	investigative, assessment, or other information pertaining to	
101 14	a child death and child abuse review shall allow the	
101 15	inspection and reproduction of the information by the	
101 16	~~department~~ office of the state medical examiner upon the	
101 17	request of the ~~department~~ office , to be used only in the	

101 18 administration and for the duties of the Iowa child death
101 19 review team. Except as provided for a report on a child
101 20 fatality by an ad hoc child fatality review committee under
101 21 subsection 4, information and records produced under this
101 22 section which are confidential under section 22.7 and chapter
101 23 235A, and information or records received from the
101 24 confidential records, remain confidential under this section.
101 25 A person does not incur legal liability by reason of releasing
101 26 information to the department as required under and in
101 27 compliance with this section.
101 28 8. Review team members and their agents are immune from
101 29 any liability, civil or criminal, which might otherwise be
101 30 incurred or imposed as a result of any act, omission,
101 31 proceeding, decision, or determination undertaken or
101 32 performed, or recommendation made as a review team member or
101 33 agent provided that the review team members or agents acted in
101 34 good faith and without malice in carrying out their official
101 35 duties in their official capacity. The ~~department~~ state
102 1 medical examiner shall adopt rules pursuant to chapter 17A to
102 2 administer this subsection. A complainant bears the burden of
102 3 proof in establishing malice or lack of good faith in an
102 4 action brought against review team members involving the
102 5 performance of their duties and powers under this section.

102 6 Sec. 112. Section 691.6, Code 2009, is amended by adding
102 7 the following new subsection:
102 8 NEW SUBSECTION . 10. To provide staffing and support for
102 9 the child death review team and any child fatality review
102 10 committee under section 135.43.

CODE: Requires the State Medical Examiner to provide staffing and support for the Child Death Review Team.

102 11 Sec. 113. CHILD DEATH REVIEW TEAM RULES. The rules
102 12 adopted by the department of public health for purposes of the
102 13 child death review team under section 135.43 shall remain in
102 14 effect until replaced by rules adopted for purposes of that
102 15 section by the state medical examiner. Until replacement
102 16 rules are adopted, the office of the state medical examiner

Requires the Department of Public Health administrative rules for the Child Death Review Team to remain in effect until replacement rules are adopted by the Office of the State Medical Examiner.

PG LN	House File 811	Explanation
102 17	shall fulfill the duties assigned to the department of public	
102 18	health under the rules being replaced.	
102 19	DIVISION XI	
102 20	PUBLIC HEALTH MODERNIZATION	
102 21	Sec. 114. LEGISLATIVE FINDINGS AND INTENT == PURPOSE. The	Specifies Legislative intent for Iowa's Public Health System.
102 22	general assembly finds all of the following:	
102 23	1. A sound public health system is vital to the good	
102 24	health of all Iowans. Iowa's public health system reduces	
102 25	health care costs by promoting healthy behaviors, preventing	
102 26	disease and injury, and protecting the health of the	
102 27	population.	
102 28	2. The current foundation and organizational capacity for	
102 29	the governmental public health system does not allow for the	
102 30	equitable delivery of public health services. Governmental	
102 31	public health is provided by county boards of health, city	
102 32	boards of health, one district board of health, the state	
102 33	board of health, and the department. Varying degrees of	
102 34	authority, administration, and organizational capacity for	
102 35	providing public health services exist from community to	
103 1	community.	
103 2	3. The Iowa public health modernization Act will allow	
103 3	boards of health, designated local public health agencies, and	
103 4	the department to increase system capacity, improve the	
103 5	equitable delivery of public health services, address quality	
103 6	improvement, improve system performance, and provide a	
103 7	foundation to measure outcomes through a voluntary	
103 8	accreditation program. The Iowa public health modernization	
103 9	Act will assure the public of the availability of a basic	
103 10	level of public health service in every community.	
103 11	4. The Iowa public health modernization Act is the result	
103 12	of extensive collaboration among governmental public health	
103 13	entities, including local boards of health, local public	
103 14	health agencies, the department, and the state board of	
103 15	health; academia; and professional associations.	

PG LN	House File 811	Explanation
103 16	Sec. 115. NEW SECTION . 135A.1 SHORT TITLE.	CODE: Establishes Chapter 135A.1, Code of Iowa, as the Iowa Public Health Modernization Act.
103 17	This chapter shall be known and may be cited as the "Iowa	
103 18	Public Health Modernization Act".	
103 19	Sec. 116. NEW SECTION . 135A.2 DEFINITIONS.	CODE: Provides for definitions related to the Public Health Modernization Act.
103 20	As used in this chapter, unless the context otherwise	
103 21	requires, the following definitions apply:	
103 22	1. "Academic institution" means an institution of higher	
103 23	education in the state which grants undergraduate and	
103 24	postgraduate degrees and is accredited by a nationally	
103 25	recognized accrediting agency as determined by the United	
103 26	States secretary of education. For purposes of this	
103 27	definition, "accredited" means a certification of the quality	
103 28	of an institution of higher education.	
103 29	2. "Accrediting entity" means a legal, independent,	
103 30	nonprofit or governmental entity or entities approved by the	
103 31	state board of health for the purpose of accrediting	
103 32	designated local public health agencies and the department	
103 33	pursuant to the voluntary accreditation program developed	
103 34	under this chapter.	
103 35	3. "Administration" means the operational procedures,	
104 1	personnel and fiscal management systems, and facility	
104 2	requirements that must be in place for the delivery and	
104 3	assurance of public health services.	
104 4	4. "Committee" means the governmental public health	
104 5	evaluation committee as established in this chapter.	
104 6	5. "Communication and information technology" means the	
104 7	processes, procedures, and equipment needed to provide public	
104 8	information and transmit and receive information among public	
104 9	health entities and community partners; and applies to the	
104 10	procedures, physical hardware, and software required to	
104 11	transmit, receive, and process electronic information.	
104 12	6. "Council" means the governmental public health advisory	
104 13	council as established in this chapter.	
104 14	7. "Department" means the department of public health.	
104 15	8. "Designated local public health agency" means an entity	
104 16	that is either governed by or contractually responsible to a	

104 17 local board of health and designated by the local board to
104 18 comply with the Iowa public health standards for a
104 19 jurisdiction.
104 20 9. "Governance" means the functions and responsibilities
104 21 of the local boards of health and the state board of health to
104 22 oversee governmental public health matters.
104 23 10. "Governmental public health system" means the system
104 24 described in section 135A.6.
104 25 11. "Iowa public health standards" means the governmental
104 26 public health standards adopted by rule by the state board of
104 27 health.
104 28 12. "Local board of health" means a county or district
104 29 board of health.
104 30 13. "Organizational capacity" means the governmental
104 31 public health infrastructure that must be in place in order to
104 32 deliver public health services.
104 33 14. "Public health region" means, at a minimum, one of six
104 34 geographical areas approved by the state board of health for
104 35 the purposes of coordination, resource sharing, and planning
105 1 and to improve delivery of public health services.
105 2 15. "Public health services" means the basic public health
105 3 services that all Iowans should reasonably expect to be
105 4 provided by designated local public health agencies and the
105 5 department.
105 6 16. "Voluntary accreditation" means verification of a
105 7 designated local public health agency or the department that
105 8 demonstrates compliance with the Iowa public health standards
105 9 by an accrediting entity.
105 10 17. "Workforce" means the necessary qualified and
105 11 competent staff required to deliver public health services.

105 12 Sec. 117. NEW SECTION . 135A.3 GOVERNMENTAL PUBLIC HEALTH
105 13 SYSTEM MODERNIZATION == LEAD AGENCY.
105 14 1. The department is designated as the lead agency in this
105 15 state to administer this chapter.
105 16 2. The department, in collaboration with the governmental
105 17 public health advisory council and the governmental public

CODE: Establishes the Department of Public Health as the lead State agency to administer the Public Health Modernization Act.

105 18 health evaluation committee, shall coordinate implementation
105 19 of this chapter including but not limited to the voluntary
105 20 accreditation of designated local public health agencies and
105 21 the department in accordance with the Iowa public health
105 22 standards. Such implementation shall include evaluation of
105 23 and quality improvement measures for the governmental public
105 24 health system.

105 25 Sec. 118. NEW SECTION . 135A.4 GOVERNMENTAL PUBLIC HEALTH
105 26 ADVISORY COUNCIL.
105 27 1. A governmental public health advisory council is
105 28 established to advise the department and make policy
105 29 recommendations to the director of the department concerning
105 30 administration, implementation, and coordination of this
105 31 chapter and to make recommendations to the department
105 32 regarding the governmental public health system. The council
105 33 shall meet at a minimum of quarterly. The council shall
105 34 consist of no fewer than fifteen members and no greater than
105 35 twenty=three members. The members shall be appointed by the
106 1 director. The director may solicit and consider
106 2 recommendations from professional organizations, associations,
106 3 and academic institutions in making appointments to the
106 4 council.
106 5 2. Council members shall not be members of the
106 6 governmental public health evaluation committee.
106 7 3. Council members shall serve for a term of two years and
106 8 may be reappointed for a maximum of three consecutive terms.
106 9 Initial appointment shall be in staggered terms. Vacancies
106 10 shall be filled for the remainder of the original appointment.
106 11 4. The membership of the council shall satisfy all of the
106 12 following requirements:
106 13 a. One member who has expertise in injury prevention.
106 14 b. One member who has expertise in environmental health.
106 15 c. One member who has expertise in emergency preparedness.
106 16 d. One member who has expertise in health promotion and
106 17 chronic disease prevention.
106 18 e. One member who has epidemiological expertise in

CODE: Establishes the Governmental Public Health Advisory Council and provides for the Council's membership and responsibilities.

106 19 communicable and infectious disease prevention and control.
106 20 f. One member representing each of Iowa's six public
106 21 health regions who is an employee of a designated local public
106 22 health agency or member of a local board of health. Such
106 23 members shall include a minimum of one local public health
106 24 administrator and one physician member of a local board of
106 25 health.
106 26 g. Two members who are representatives of the department.
106 27 h. The director of the state hygienic laboratory at the
106 28 university of Iowa, or the director's designee.
106 29 i. At least one representative from academic institutions
106 30 which grant undergraduate and postgraduate degrees in public
106 31 health or other related health field and are accredited by a
106 32 nationally recognized accrediting agency as determined by the
106 33 United States secretary of education. For purposes of this
106 34 paragraph, "accredited" means a certification of the quality
106 35 of an institution of higher education.
107 1 j. Two members who serve on a county board of supervisors.
107 2 k. Four nonvoting, ex officio members who shall consist of
107 3 four members of the general assembly, two from the senate and
107 4 two from the house of representatives, with not more than one
107 5 member from each chamber being from the same political party.
107 6 The two senators shall be designated one member each by the
107 7 majority leader of the senate after consultation with the
107 8 president and by the minority leader of the senate. The two
107 9 representatives shall be designated one member each by the
107 10 speaker of the house of representatives after consultation
107 11 with the majority leader of the house of representatives and
107 12 by the minority leader of the house of representatives.
107 13 l. A member of the state board of health who shall be a
107 14 nonvoting, ex officio member.
107 15 5. The council may utilize other relevant public health
107 16 expertise when necessary to carry out its roles and
107 17 responsibilities.
107 18 6. The council shall do all of the following:
107 19 a. Advise the department and make policy recommendations
107 20 to the director of the department concerning administration,
107 21 implementation, and coordination of this chapter and the

107 22 governmental public health system.
107 23 b. Propose to the director public health standards that
107 24 should be utilized for voluntary accreditation of designated
107 25 local public health agencies and the department that include
107 26 but are not limited to the organizational capacity and public
107 27 health service components described in section 135A.6,
107 28 subsection 1, by October 1, 2009.
107 29 c. Recommend to the department an accrediting entity and
107 30 identify the roles and responsibilities for the oversight and
107 31 implementation of the voluntary accreditation of designated
107 32 local public health agencies and the department by January 2,
107 33 2010. This shall include completion of a pilot accreditation
107 34 process for one designated local public health agency and the
107 35 department by July 1, 2011.
108 1 d. Recommend to the director strategies to implement
108 2 voluntary accreditation of designated local public health
108 3 agencies and the department effective January 2, 2012.
108 4 e. Periodically review and make recommendations to the
108 5 department regarding revisions to the public health standards
108 6 pursuant to paragraph "b", as needed and based on reports
108 7 prepared by the governmental public health evaluation
108 8 committee pursuant to section 135A.5.
108 9 f. Review rules developed and adopted by the state board
108 10 of health under this chapter and make recommendations to the
108 11 department for revisions to further promote implementation of
108 12 this chapter and modernization of the governmental public
108 13 health system.
108 14 g. Form and utilize subcommittees as necessary to carry
108 15 out the duties of the council.

108 16 Sec. 119. NEW SECTION . 135A.5 GOVERNMENTAL PUBLIC HEALTH
108 17 EVALUATION COMMITTEE.
108 18 1. A governmental public health evaluation committee is
108 19 established to develop, implement, and evaluate the
108 20 governmental public health system and voluntary accreditation
108 21 program. The committee shall meet at least quarterly. The
108 22 committee shall consist of no fewer than eleven members and no

CODE: Establishes the Governmental Public Health Evaluation Committee and provides for the Committee's membership and responsibilities.

108 23 greater than thirteen members. The members shall be appointed
108 24 by the director of the department. The director may solicit
108 25 and consider recommendations from professional organizations,
108 26 associations, and academic institutions in making appointments
108 27 to the committee.
108 28 2. Committee members shall not be members of the
108 29 governmental public health advisory council.
108 30 3. Committee members shall serve for a term of two years
108 31 and may be reappointed for a maximum of three consecutive
108 32 terms. Initial appointment shall be in staggered terms.
108 33 Vacancies shall be filled for the remainder of the original
108 34 appointment.
108 35 4. The membership of the committee shall satisfy all of
109 1 the following requirements:
109 2 a. At least one member representing each of Iowa's six
109 3 public health regions. Each representative shall be an
109 4 employee or administrator of a designated local public health
109 5 agency or a member of a local board of health. Such members
109 6 shall be appointed to ensure expertise in the areas of
109 7 communicable and infectious diseases, environmental health,
109 8 injury prevention, healthy behaviors, and emergency
109 9 preparedness.
109 10 b. Two members who are representatives of the department.
109 11 c. A representative of the state hygienic laboratory at
109 12 the university of Iowa.
109 13 d. At least two representatives from academic institutions
109 14 which grant undergraduate and postgraduate degrees in public
109 15 health or other health=related fields.
109 16 e. At least one economist who has demonstrated experience
109 17 in public health, health care, or a health=related field.
109 18 f. At least one research analyst.
109 19 5. The committee may utilize other relevant public health
109 20 expertise when necessary to carry out its roles and
109 21 responsibilities.
109 22 6. The committee shall do all of the following:
109 23 a. Develop and implement processes for evaluation of the
109 24 governmental public health system and the voluntary
109 25 accreditation program.

PG LN	House File 811	Explanation
109 26	b. Collect and report baseline information for	
109 27	organizational capacity and public health service delivery	
109 28	based on the Iowa public health standards prior to	
109 29	implementation of the voluntary accreditation program on	
109 30	January 2, 2012.	
109 31	c. Evaluate the effectiveness of the accrediting entity	
109 32	and the voluntary accreditation process.	
109 33	d. Evaluate the appropriateness of the Iowa public health	
109 34	standards and develop measures to determine reliability and	
109 35	validity.	
110 1	e. Determine what process and outcome improvements in the	
110 2	governmental public health system are attributable to	
110 3	voluntary accreditation.	
110 4	f. Assure that the evaluation process is capturing data to	
110 5	support key research in public health system effectiveness and	
110 6	health outcomes.	
110 7	g. Annually submit a report to the department by July 1.	
110 8	h. Form and utilize subcommittees as necessary to carry	
110 9	out the duties of the committee.	
110 10	Sec. 120. NEW SECTION . 135A.6 GOVERNMENTAL PUBLIC HEALTH	CODE: Provides for the components and entities included in the Governmental Public Health System.
110 11	SYSTEM.	
110 12	1. The governmental public health system, in accordance	
110 13	with the Iowa public health standards, shall include but not	
110 14	be limited to the following organizational capacity components	
110 15	and public health service components:	
110 16	a. Organizational capacity components shall include all of	
110 17	the following:	
110 18	(1) Governance.	
110 19	(2) Administration.	
110 20	(3) Communication and information technology.	
110 21	(4) Workforce.	
110 22	(5) Community assessment and planning. This component	
110 23	consists of collaborative data collection and analysis for the	
110 24	completion of population=based community health assessments	
110 25	and community health profiles and the process of developing	
110 26	improvement plans to address the community health needs and	

110 27 identified gaps in public health services.
110 28 (6) Evaluation.
110 29 b. Public health service components shall include all of
110 30 the following:
110 31 (1) Prevention of epidemics and the spread of disease.
110 32 This component includes the surveillance, detection,
110 33 investigation, and prevention and control measures that
110 34 prevent, reduce, or eliminate the spread of infectious
110 35 disease.
111 1 (2) Protection against environmental hazards. This
111 2 component includes activities that reduce or eliminate the
111 3 risk factors detrimental to the public's health within the
111 4 natural or man=made environment.
111 5 (3) Prevention of injuries. This component includes
111 6 activities that facilitate the prevention, reduction, or
111 7 elimination of intentional and unintentional injuries.
111 8 (4) Promotion of healthy behaviors. This component
111 9 includes activities to assure services that promote healthy
111 10 behaviors to prevent chronic disease and reduce illness.
111 11 (5) Preparation for, response to, and recovery from public
111 12 health emergencies. This component includes activities to
111 13 prepare the public health system and community partners to
111 14 respond to public health threats, emergencies, and disasters
111 15 and to assist in the recovery process.
111 16 2. The governmental public health system shall include but
111 17 not be limited to the following entities:
111 18 a. Local boards of health.
111 19 b. State board of health.
111 20 c. Designated local public health agencies.
111 21 d. The department.

111 22 Sec. 121. NEW SECTION . 135A.7 GOVERNMENTAL PUBLIC HEALTH
111 23 SYSTEM AND ACCREDITATION DATA COLLECTION SYSTEM.
111 24 1. The department shall establish and maintain a
111 25 governmental public health system and an accreditation data
111 26 collection system by which the state board of health, the
111 27 director, the department, the council, and the committee may

CODE: Implements the Governmental Public Health System and Accreditation Data Collection System to facilitate communication between State and local entities.

111 28 monitor the implementation and effectiveness of the
111 29 governmental public health system based on the Iowa public
111 30 health standards.
111 31 2. Notwithstanding section 22.7 or any other provision of
111 32 law, local boards of health shall provide to the department
111 33 and the accrediting entity upon request all data and
111 34 information necessary to determine the local board's capacity
111 35 to comply with the Iowa public health standards, including but
112 1 not limited to data and information regarding governance,
112 2 administration, communication and information technology,
112 3 workforce, personnel, staffing, budget, contracts, and other
112 4 program and agency information.
112 5 3. The department may share any data or information
112 6 collected pursuant to this section with the council or the
112 7 committee as necessary to perform the duties of the council
112 8 and committee. Data and information provided to the
112 9 department under this section which are confidential pursuant
112 10 to section 22.7, subsection 2, 11, or 50, section 139A.3, or
112 11 other provision of law, remain confidential and shall not be
112 12 released by the department, the council, or the committee.
112 13 4. During the pendency of the accreditation process, all
112 14 accreditation files and reports prepared for or maintained by
112 15 the accrediting entity are confidential and are not subject to
112 16 discovery, subpoena, or other means of legal compulsion for
112 17 their release. After the accrediting entity has issued its
112 18 recommendation or report only the preliminary drafts of the
112 19 recommendation or report, and records otherwise confidential
112 20 pursuant to chapter 22 or other provision of state or federal
112 21 law, shall remain confidential and are not subject to
112 22 discovery, subpoena, or other means of legal compulsion for
112 23 their release.
112 24 5. To the extent possible, activities under this section
112 25 shall be coordinated with other health data collection systems
112 26 including those maintained by the department.

112 27 Sec. 122. NEW SECTION . 135A.8 GOVERNMENTAL PUBLIC HEALTH
112 28 SYSTEM FUND.

CODE: Establishes the Governmental Public Health System Fund in the State Treasury under the control of the Department of Public

PG LN	House File 811	Explanation
112 29	1. The department is responsible for the funding of the	Health. Funds deposited in the Fund are used to implement the Public Health Modernization Act.
112 30	administrative costs for implementation of this chapter. A	
112 31	governmental public health system fund is created as a	
112 32	separate fund in the state treasury under the control of the	
112 33	department. The fund shall consist of moneys obtained from	
112 34	any source, including the federal government, unless otherwise	
112 35	prohibited by law or the entity providing the funding. Moneys	
113 1	deposited in the fund are appropriated to the department for	
113 2	the public health purposes specified in this chapter. Moneys	
113 3	in the fund shall not be transferred, used, obligated,	
113 4	appropriated, or otherwise encumbered except as provided in	
113 5	this section. Notwithstanding section 8.33, moneys in the	
113 6	governmental public health system fund at the end of the	
113 7	fiscal year shall not revert to any other fund but shall	
113 8	remain in the fund for subsequent fiscal years.	
113 9	2. The fund is established to assist local boards of	
113 10	health and the department with the provision of governmental	
113 11	public health system organizational capacity and public health	
113 12	service delivery and to achieve and maintain voluntary	
113 13	accreditation in accordance with the Iowa public health	
113 14	standards. At least seventy percent of the funds shall be	
113 15	made available to local boards of health and up to thirty	
113 16	percent of the funds may be utilized by the department.	
113 17	3. Moneys in the fund may be allocated by the department	
113 18	to a local board of health for organizational capacity and	
113 19	service delivery. Such allocation may be made on a matching,	
113 20	dollar=for=dollar basis for the acquisition of equipment, or	
113 21	by providing grants to achieve and maintain voluntary	
113 22	accreditation in accordance with the Iowa public health	
113 23	standards.	
113 24	4. A local board of health seeking matching funds or	
113 25	grants under this section shall apply to the department. The	
113 26	state board of health shall adopt rules concerning the	
113 27	application and award process for the allocation of moneys in	
113 28	the fund and shall establish the criteria for the allocation	
113 29	of moneys in the fund if the moneys are insufficient to meet	
113 30	the needs of local boards of health.	

PG LN	House File 811	Explanation
113 31	Sec. 123. NEW SECTION . 135A.9 RULES.	CODE: Designates the State Board of Health as the entity to create administrative rules to implement the Public Health Modernization Act.
113 32	The state board of health shall adopt rules pursuant to	
113 33	chapter 17A to implement this chapter which shall include but	
113 34	are not limited to the following:	
113 35	1. Incorporation of the Iowa public health standards	
114 1	recommended to the department pursuant to section 135A.5,	
114 2	subsection 6.	
114 3	2. A voluntary accreditation process to begin no later	
114 4	than January 2, 2012, for designated local public health	
114 5	agencies and the department.	
114 6	3. Rules relating to the operation of the governmental	
114 7	public health advisory council.	
114 8	4. Rules relating to the operation of the governmental	
114 9	public health system evaluation committee.	
114 10	5. The application and award process for governmental	
114 11	public health system fund moneys.	
114 12	6. Rules relating to data collection for the governmental	
114 13	public health system and the voluntary accreditation program.	
114 14	7. Rules otherwise necessary to implement the chapter.	
114 15	Sec. 124. NEW SECTION . 135A.10 PROHIBITED ACTS ==	CODE: Establishes a civil penalty if a local board of health or local public health agency fraudulently claims to be accredited.
114 16	FRAUDULENTLY CLAIMING ACCREDITATION == CIVIL PENALTY.	
114 17	A local board of health or local public health agency that	
114 18	imparts or conveys, or causes to be imparted or conveyed,	
114 19	information claiming that it is accredited pursuant to this	
114 20	chapter or that uses any other term to indicate or imply it is	
114 21	accredited without being accredited under this chapter is	
114 22	subject to a civil penalty not to exceed one thousand dollars	
114 23	per day for each offense. However, nothing in this chapter	
114 24	shall be construed to restrict a local board of health or	
114 25	local public health agency from providing any services for	
114 26	which it is duly authorized.	
114 27	Sec. 125. NEW SECTION . 135A.11 IMPLEMENTATION.	CODE: The Department of Public Health may only implement the Public Health Modernization Act as funding becomes available.
114 28	The department shall implement this chapter only to the	
114 29	extent that funding is available.	

PG LN	House File 811	Explanation
		DETAIL: A total of $161,349 is appropriated to the Governmental Public Health System Fund in this Bill for FY 2010.
114 30	Sec. 126. EFFECTIVE DATE. This division of this Act, being deemed of immediate importance, takes effect upon enactment.	Division XI is effective on enactment.
114 33	DIVISION XII IOWACARE == NONPARTICIPATING PROVIDER == REIMBURSEMENT	
115 1	Sec. 127. NEW SECTION . 249J.24A NONPARTICIPATING PROVIDER REIMBURSEMENT FOR COVERED SERVICES == REIMBURSEMENT FUND. 1. A nonparticipating provider may be reimbursed for covered expansion population services provided to an expansion population member by a nonparticipating provider, if the nonparticipating provider contacts the appropriate participating provider prior to providing covered services to verify consensus regarding one of the following courses of action: a. If the nonparticipating provider and the participating provider agree that the medical status of the expansion population member indicates it is medically possible to postpone provision of services, the nonparticipating provider shall direct the expansion population member to the appropriate participating provider for services. b. If the nonparticipating provider and the participating provider agree that the medical status of the expansion population member indicates it is not medically possible to postpone provision of services, the nonparticipating provider shall provide medically necessary services. c. If the nonparticipating provider and the participating provider agree that transfer of the expansion population member is not possible due to lack of available inpatient	CODE: Adds provisions to the IowaCare Program to reimburse nonparticipating providers if they meet certain criteria.

PG LN	House File 811	Explanation
115 25	capacity, the nonparticipating provider shall provide	
115 26	medically necessary services.	
115 27	d. If the medical status of the expansion population	
115 28	member indicates a medical emergency and the nonparticipating	
115 29	provider is not able to contact the appropriate participating	
115 30	provider prior to providing medically necessary services, the	
115 31	nonparticipating provider shall document the medical emergency	
115 32	and inform the appropriate participating provider immediately	
115 33	after the member has been stabilized of any covered services	
115 34	provided.	
115 35	2. a. If the nonparticipating provider meets the	CODE: Requires providers to be reimbursed through the Nonparticipating Provider Reimbursement Fund under the rates and policies of the Medicaid Program, if all requirements are met. Reimbursement is subject to available moneys in the Fund and is to be made only for active IowaCare members at the time services are provided.
116 1	requirements specified in subsection 1, the nonparticipating	
116 2	provider shall be reimbursed for covered expansion population	
116 3	services provided to the expansion population member through	
116 4	the nonparticipating provider reimbursement fund in accordance	
116 5	with rules adopted by the department of human services.	
116 6	However, any funds received from participating providers,	
116 7	appropriated to participating providers, or deposited in the	
116 8	IowaCare account pursuant to section 249J.24, shall not be	
116 9	transferred or appropriated to the nonparticipating provider	
116 10	reimbursement fund or otherwise used to reimburse	
116 11	nonparticipating providers.	
116 12	b. Reimbursement of nonparticipating providers under this	
116 13	section shall be based on the reimbursement rates and policies	
116 14	applicable to the nonparticipating provider under the full	
116 15	benefit medical assistance program, subject to the	
116 16	availability of funds in the nonparticipating provider	
116 17	reimbursement fund and subject to the appropriation of moneys	
116 18	in the fund to the department.	
116 19	c. The department shall reimburse the nonparticipating	
116 20	provider only if the recipient of the services is an expansion	
116 21	population member with active eligibility status at the time	
116 22	the services are provided.	
116 23	3. a. A nonparticipating provider reimbursement fund is	CODE: Creates a Nonparticipating Provider Reimbursement Fund

PG LN	House File 811	Explanation
116 24	created in the state treasury under the authority of the	under the authority of the Department of Human Services and specifies when and how the funds may be used.
116 25	department. Moneys designated for deposit in the fund that	
116 26	are received from sources including but not limited to	
116 27	appropriations from the general fund of the state, grants, and	
116 28	contributions, shall be deposited in the fund. However, any	
116 29	funds received from participating providers, appropriated to	
116 30	participating providers, or deposited in the IowaCare account	
116 31	pursuant to section 249J.24 shall not be transferred or	
116 32	appropriated to the nonparticipating provider reimbursement	
116 33	fund or otherwise used to reimburse nonparticipating	
116 34	providers.	
116 35	b. Moneys in the fund shall be separate from the general	
117 1	fund of the state and shall not be considered part of the	
117 2	general fund of the state. The moneys deposited in the fund	
117 3	are not subject to section 8.33 and shall not be transferred,	
117 4	used, obligated, appropriated, or otherwise encumbered, except	
117 5	to provide for the purposes specified in this section.	
117 6	Notwithstanding section 12C.7, subsection 2, interest or	
117 7	earnings on moneys deposited in the fund shall be credited to	
117 8	the fund.	
117 9	c. Moneys deposited in the fund shall be used only to	
117 10	reimburse nonparticipating providers who provide covered	
117 11	services to expansion population members if no other third	
117 12	party is liable for reimbursement and as specified in	
117 13	subsection 1.	
117 14	d. The department shall attempt to maximize receipt of	
117 15	federal matching funds under the medical assistance program	
117 16	for covered services provided under this section if such	
117 17	attempt does not directly or indirectly limit the federal	
117 18	funds available to participating providers.	
117 19	4. For the purposes of this section, "nonparticipating	CODE: Defines Nonparticipating Provider under the IowaCare Program.
117 20	provider" means a hospital licensed pursuant to chapter 135B	
117 21	that is not a member of the expansion population provider	
117 22	network as specified in section 249J.7.	
117 23	Sec. 128. NONPARTICIPATING PROVIDER REIMBURSEMENT FOR	Requires the Department of Human Services to include

PG LN	House File 811	Explanation
117 24	COVERED SERVICES == IOWACARE PROGRAM WAIVER RENEWAL.	reimbursement of nonparticipating providers in any continuation of the IowaCare Waiver if the provider meets certain criteria.
117 25	1. Beginning July 1, 2010, the department of human	
117 26	services shall include in any medical assistance program	
117 27	waiver relating to the continuation of the IowaCare program	
117 28	pursuant to chapter 249J, provisions for reimbursement of	
117 29	covered expansion population services provided to an expansion	
117 30	population member by a nonparticipating provider subject to	
117 31	all of the following:	
117 32	a. A nonparticipating provider may be reimbursed if the	
117 33	nonparticipating provider contacts the appropriate	
117 34	participating provider prior to providing covered services to	
117 35	verify consensus regarding one of the following courses of	
118 1	action:	
118 2	(1) If the nonparticipating provider and the participating	
118 3	provider agree that the medical status of the expansion	
118 4	population member indicates it is medically possible to	
118 5	postpone provision of services, the nonparticipating provider	
118 6	shall direct the expansion population member to the	
118 7	appropriate participating provider for services.	
118 8	(2) If the nonparticipating provider and the participating	
118 9	provider agree that the medical status of the expansion	
118 10	population member indicates it is not medically possible to	
118 11	postpone provision of services, the nonparticipating provider	
118 12	shall provide medically necessary services.	
118 13	(3) If the nonparticipating provider and the participating	
118 14	provider agree that transfer of the expansion population	
118 15	member is not possible due to lack of available inpatient	
118 16	capacity, the nonparticipating provider shall provide	
118 17	medically necessary services.	
118 18	(4) If the medical status of the expansion population	
118 19	member indicates a medical emergency and the nonparticipating	
118 20	provider is not able to contact the appropriate participating	
118 21	provider prior to providing medically necessary services, the	
118 22	nonparticipating provider shall document the medical emergency	
118 23	and inform the appropriate participating provider immediately	
118 24	after the member has been stabilized of any covered services	
118 25	provided.	
118 26	b. Reimbursement of a nonparticipating provider shall be	

PG LN	House File 811	Explanation
118 27	based on the reimbursement rates and policies applicable to	
118 28	the nonparticipating provider under the full benefit medical	
118 29	assistance program, subject to the availability and	
118 30	appropriation of funds to the department for such purpose.	
118 31	c. Reimbursement shall be made to a nonparticipating	
118 32	provider only if the recipient of the services is an expansion	
118 33	population member with active eligibility status at the time	
118 34	the services are provided.	
118 35	d. For the purposes of this section, "nonparticipating	
119 1	provider" means a hospital licensed pursuant to chapter 135B	
119 2	that is not a member of the expansion population provider	
119 3	network as specified in section 249J.7.	
119 4	2. Notwithstanding the requirement of this section	CODE: Notwithstands the requirements of this Section if the Department, in consultation with the Governor, determines that the requirement would adversely affect the Program.
119 5	directing the department of human services to include	
119 6	provisions for reimbursement of covered services provided to	
119 7	an expansion population member by a nonparticipating provider	
119 8	under any medical assistance program waiver relating to the	
119 9	continuation of the IowaCare program beginning July 1, 2010,	
119 10	if the department of human services in consultation with the	
119 11	governor determines that such requirement would adversely	
119 12	affect continuation of or would reduce the amount of funding	
119 13	available for the IowaCare waiver, the department shall not	
119 14	include such provisions in the IowaCare waiver.	
119 15	DIVISION XIII	
119 16	MISCELLANEOUS STATUTORY CHANGES	
119 17	Sec. 129. NEW SECTION . 157.3B EXAMINATION INFORMATION.	Permits certain examination results to be available to the Board of Cosmetology Arts and Sciences for purposes of verifying national data.
119 18	Notwithstanding section 147.21, individual pass or fail	
119 19	examination results made available from the authorized	
119 20	national testing agency to the board may be disclosed to the	
119 21	board=approved education program from which the applicant for	
119 22	licensure graduated for purposes of verifying accuracy of	
119 23	national data and reporting aggregate licensure examination	

PG LN	House File 811	Explanation
119 24	results as required for a program's continued accreditation.	
119 25	Sec. 130. Section 234.12A, subsection 1, Code 2009, is	CODE: Eliminates the $0.07 fee paid to retailers for the Supplemental Nutrition Assistance Program.
119 26	amended to read as follows:	
119 27	1. The department of human services shall maintain an	DETAIL: This is estimated to save the State $690,726 in FY 2010.
119 28	electronic benefits transfer program utilizing electronic	
119 29	funds transfer systems for the food assistance program. The	
119 30	electronic benefits transfer program implemented under this	
119 31	section ~~shall at a minimum provide for all of the following:~~	
119 32	~~a. A retailer~~ shall not ~~be required~~ require a retailer to	
119 33	make cash disbursements or to provide, purchase, or upgrade	
119 34	electronic funds transfer system equipment as a condition of	
119 35	participation in the program.	
120 1	~~b. A retailer providing electronic funds transfer system~~	
120 2	~~equipment for transactions pursuant to the program shall be~~	
120 3	~~reimbursed seven cents for each approved transaction pursuant~~	
120 4	~~to the program utilizing the retailer's equipment.~~	
120 5	~~c. A retailer that provides electronic funds transfer~~	
120 6	~~system equipment for transactions pursuant to the program and~~	
120 7	~~who makes cash disbursements pursuant to the program utilizing~~	
120 8	~~the retailer's equipment shall be paid a fee of seven cents by~~	
120 9	~~the department for each cash disbursement transaction by the~~	
120 10	~~retailer.~~	
120 11	Sec. 131. Section 237B.1, subsection 3, Code 2009, is	CODE: Requires the DHS to apply criminal and abuse registry background check requirements for owners and operators of children centers. Includes staff and other persons that may have contact with the children. Requires the background check requirements to be substantially equivalent to those of a child foster care facility provider.
120 12	amended to read as follows:	
120 13	3. In establishing the initial and subsequent standards,	
120 14	the department of human services shall review other	
120 15	certification and licensing standards applicable to the	
120 16	centers. The standards established by the department shall be	
120 17	broad facility standards for the protection of children's	
120 18	safety. The department shall also apply criminal and abuse	
120 19	registry background check requirements for the persons who	
120 20	own, operate, staff, participate in, or otherwise have contact	
120 21	with the children receiving services from a children's center.	
120 22	The background check requirements shall be substantially	

PG LN	House File 811	Explanation
120 23	equivalent to those applied under chapter 237 for a child	
120 24	foster care facility provider. The department of human	
120 25	services shall not establish program standards or other	
120 26	requirements under this section involving program development	
120 27	or oversight of the programs provided to the children served	
120 28	by children's centers.	
120 29	Sec. 132. Section 249A.3, subsection 14, Code 2009, is	CODE: Makes federally required changes to continuous eligibility provisions for Medicaid children to the Code of Iowa.
120 30	amended to read as follows:	
120 31	14. Once initial ongoing eligibility for ~~the family~~	
120 32	medical assistance ~~program=related medical assistance~~ is	
120 33	determined for a child ~~described~~ under ~~subsection 1, paragraph~~	
120 34	~~"b", "f", "g", "j", "k", "l", or "n" or under subsection 2,~~	
120 35	~~paragraph "e", "f", or "h"~~ the age of nineteen , the department	
121 1	shall provide continuous eligibility for a period of up to	
121 2	twelve months regardless of changes in family circumstances ,	
121 3	until the child's next annual review of eligibility under the	
121 4	medical assistance program, ~~if the child would otherwise be~~	
121 5	~~determined ineligible due to excess countable income but~~	
121 6	~~otherwise remains eligible~~ with the exception of the following	
121 7	children:	
121 8	a. A newborn child of a medical assistance=eligible woman .	
121 9	b. A child whose eligibility was determined under the	
121 10	medically needy program.	
121 11	c. A child who is eligible under a state=only funded	
121 12	program.	
121 13	d. A child who is no longer an Iowa resident.	
121 14	e. A child who is incarcerated in a jail or other	
121 15	correctional institution.	
121 16	Sec. 133. CHILD SUPPORT ENFORCEMENT INFORMATION. The	CODE: Repeals portions of SF 319 (FY 2010 Child Support Omnibus Bill) to reflect recent changes in federal regulations.
121 17	sections of 2009 Iowa Acts, Senate File 319, amending section	
121 18	252B.5, subsection 9, paragraph b, unnumbered paragraph 1;	
121 19	section 252B.9, subsection 2, unnumbered paragraph 1; section	
121 20	252B.9, subsection 2, paragraph a; section 252B.9, subsection	
121 21	2, paragraph b, unnumbered paragraph 1; section 252B.9,	

PG LN	House File 811	Explanation
121 22	subsection 2, paragraph b, subparagraph (1); section 252B.9,	
121 23	subsection 3, paragraphs e and g; section 252B.9A, subsection	
121 24	1; section 252G.5, subsections 2 and 3; section 598.22,	
121 25	subsection 3; and section 598.26, subsection 1, Code 2009, and	
121 26	providing for such amendments' effective date, are repealed.	
121 27	Sec. 134. EFFECTIVE DATE == RETROACTIVE APPLICABILITY.	The Section relating to Medicaid continuous eligibility is effective on enactment and retroactive to July 1, 2008.
121 28	The section of this division of this Act amending section	
121 29	249A.3, subsection 14, being deemed of immediate importance,	
121 30	takes effect upon enactment and is retroactively applicable to	
121 31	July 1, 2008.	
121 32	Sec. 135. EXCHANGE OF ELECTRONIC INDIVIDUALLY IDENTIFIABLE	Requires the Executive Committee of the Electronic Health Information Advisory Council to review barriers in State law related to electronic health records and to submit proposals to the Governor and the General Assembly by December 15, 2009.
121 33	HEALTH INFORMATION. The executive committee of the electronic	
121 34	health information advisory council created in section	
121 35	135.156, with the technical assistance of the advisory council	
122 1	and the support of the department of public health, shall	
122 2	review the electronic exchange of individually identifiable	
122 3	health information by health care providers for the purpose of	
122 4	treatment with the goal of facilitating informed treatment	
122 5	decisions and providing higher quality and safer care, while	
122 6	protecting the privacy of patients and the security and	
122 7	confidentiality of patient information. Following the review,	
122 8	the executive committee shall report the results of its review	
122 9	and recommendations, including any proposed changes in state	
122 10	law and rules relating to such information exchange, to the	
122 11	governor and the general assembly no later than December 15,	
122 12	2009.	
122 13	Sec. 136. EFFECTIVE DATE == RETROACTIVE APPLICABILITY.	This Section repealing certain sections of SF 319 regarding child support enforcement is effective on enactment and retroactive to March 23, 2009.
122 14	The section of this division of this Act relating to child	
122 15	support enforcement information by repealing sections of 2009	
122 16	Iowa Acts, Senate File 319, as enacted, being deemed of	
122 17	immediate importance, takes effect upon enactment, and is	
122 18	retroactively applicable to March 23, 2009.	

PG LN	House File 811	Explanation
122 19	Sec. 137. CODE EDITOR DIRECTIVE == INTENT.	Directs the Code Editor to change any references from the Department of Elder Affairs to the Department on Aging.
122 20	1. References in this Act to the department of elder	
122 21	affairs mean the department on aging in accordance with 2009	
122 22	Iowa Acts, Senate File 204, as enacted, unless a contrary	
122 23	intent is clearly evident.	
122 24	2. The Iowa Code editor is directed to make conforming	
122 25	changes, as appropriate, to codified provisions of this Act to	
122 26	reflect the provisions of 2009 Iowa Acts, Senate File 204, as	
122 27	enacted, including but not limited to replacing the words	
122 28	"department of elder affairs" with the words "department on	
122 29	aging".	
122 30	Sec. 138. Sections 237A.28 and 422.100, Code 2009, are	CODE: Repeals Sections relating to the elimination of the Child Care Tax Credit. Funding is provided in the child care subsidy appropriation.
122 31	repealed.	
122 32	HF 811	
122 33	pf/cm/25	

Summary Data

General Fund

	Estimated Net FY 2009	Supp-Final Act. FY 2009	Final Action FY 2010	FY 2010 Final vs. Est. Net FY 2009	Page and Line #
	(1)	(2)	(3)	(4)	(5)
Health and Human Services	$ 1,224,577,120	$ -52,000,000	$ 1,249,658,725	$ 25,081,605	
Unassigned Standings	125,686,000	0	117,796,000	-7,890,000	
Grand Total	$ 1,350,263,120	$ -52,000,000	$ 1,367,454,725	$ 17,191,605	

Health and Human Services

General Fund

	Estimated Net FY 2009 (1)	Supp-Final Act. FY 2009 (2)	Final Action FY 2010 (3)	FY 2010 Final vs. Est. Net FY 2009 (4)	Page and Line # (5)
Elder Affairs, Dept. of					
Elder Affairs, Dept. of					
Aging Programs	$ 5,274,444	$ 0	$ 4,958,230	$ -316,214	PG 1 LN 10
Total Elder Affairs, Dept. of	$ 5,274,444	$ 0	$ 4,958,230	$ -316,214	
Public Health, Dept. of					
Public Health, Dept. of					
Addictive Disorders	$ 3,035,917	$ 0	$ 28,652,500	$ 25,616,583	PG 3 LN 27
Healthy Children and Families	2,584,835	0	2,249,167	-335,668	PG 6 LN 20
Chronic Conditions	2,162,652	0	2,756,236	593,584	PG 7 LN 14
Community Capacity	1,694,329	0	4,116,847	2,422,518	PG 8 LN 6
Elderly Wellness	9,095,475	0	8,345,779	-749,696	PG 9 LN 3
Environmental Hazards	721,737	0	1,000,391	278,654	PG 9 LN 12
Infectious Diseases	2,795,546	0	1,630,661	-1,164,885	PG 9 LN 23
Public Protection	3,115,215	0	3,569,986	454,771	PG 9 LN 29
Resource Management	1,194,098	0	1,062,517	-131,581	PG 10 LN 20
Prevention and Chronic Care Management	192,093	0	0	-192,093	
Medical Home System	166,790	0	0	-166,790	
Healthy Communities Initiative	892,941	0	0	-892,941	
Gov. Council on Physical Fitness and Nutrition	110,418	0	0	-110,418	
Iowa Health Information Technology System	191,995	0	0	-191,995	
Health Care Access	175,555	0	0	-175,555	
Total Public Health, Dept. of	$ 28,129,596	$ 0	$ 53,384,084	$ 25,254,488	
Human Services, Dept. of					
General Administration					
General Administration	$ 16,848,360	$ 0	$ 15,252,523	$ -1,595,837	PG 48 LN 26
Field Operations					
Child Support Recoveries	$ 15,082,461	$ 0	$ 13,420,460	$ -1,662,001	PG 20 LN 17
Field Operations	69,234,591	0	63,032,831	-6,201,760	PG 48 LN 13
Total Field Operations	$ 84,317,052	$ 0	$ 76,453,291	$ -7,863,761	
Toledo Juvenile Home					
Toledo Juvenile Home	$ 7,591,274	$ 0	$ 6,754,759	$ -836,515	PG 32 LN 27

Health and Human Services

General Fund

	Estimated Net FY 2009	Supp-Final Act. FY 2009	Final Action FY 2010	FY 2010 Final vs. Est. Net FY 2009	Page and Line #
	(1)	(2)	(3)	(4)	(5)
Eldora Training School					
Eldora Training School	$ 12,045,087	$ 0	$ 10,717,787	$ -1,327,300	PG 32 LN 32
Cherokee CCUSO					
Civil Commit. Unit for Sex Offenders	$ 6,701,758	$ 0	$ 6,860,204	$ 158,446	PG 47 LN 25
Cherokee					
Cherokee MHI	$ 6,109,285	$ 0	$ 5,436,076	$ -673,209	PG 42 LN 10
Clarinda					
Clarinda MHI	$ 7,298,531	$ 0	$ 6,227,335	$ -1,071,196	PG 42 LN 16
Independence					
Independence MHI	$ 10,693,858	$ 0	$ 9,503,567	$ -1,190,291	PG 42 LN 22
Mt Pleasant					
Mt Pleasant MHI	$ 2,023,008	$ 0	$ 1,795,552	$ -227,456	PG 42 LN 28
Glenwood					
Glenwood Resource Center	$ 18,903,764	$ 0	$ 17,620,487	$ -1,283,277	PG 43 LN 30
Woodward					
Woodward Resource Center	$ 12,561,726	$ 0	$ 10,929,200	$ -1,632,526	PG 43 LN 33

Health and Human Services

General Fund

	Estimated Net FY 2009 (1)	Supp-Final Act. FY 2009 (2)	Final Action FY 2010 (3)	FY 2010 Final vs. Est. Net FY 2009 (4)	Page and Line # (5)
Assistance					
Family Investment Program/JOBS	$ 42,060,901	$ 0	$ 34,592,700	$ -7,468,201	PG 18 LN 21
Medical Assistance	645,302,330	-52,000,000	677,613,847	32,311,517	PG 21 LN 25
Health Insurance Premium Payment	570,924	0	508,011	-62,913	PG 28 LN 1
Medical Contracts	13,953,067	0	13,651,503	-301,564	PG 28 LN 13
State Children's Health Ins. (hawk-i)	13,660,852	0	14,629,830	968,978	PG 29 LN 20
State Supplementary Assistance	18,332,214	0	18,412,646	80,432	PG 28 LN 23
Child Care Assistance	40,483,732	0	37,974,472	-2,509,260	PG 30 LN 1
Child and Family Services	88,971,729	0	90,591,451	1,619,722	PG 33 LN 7
Adoption Subsidy	33,656,339	0	34,883,674	1,227,335	PG 39 LN 32
Family Support Subsidy	1,907,312	0	1,697,137	-210,175	PG 41 LN 7
Conners Training	41,984	0	37,358	-4,626	PG 41 LN 29
MI/MR/DD State Cases	13,067,178	0	11,446,288	-1,620,890	PG 44 LN 35
MH/DD Community Services	18,017,890	0	15,790,111	-2,227,779	PG 46 LN 1
MH/DD Growth Factor	54,081,310	0	54,108,770	27,460	PG 72 LN 21
Volunteers	105,717	0	94,067	-11,650	PG 49 LN 24
Medical Assistance, Hawk-i, Hawk-i Expansion	4,728,000	0	4,207,001	-520,999	PG 91 LN 24
Family Planning	738,750	0	10,000	-728,750	PG 49 LN 31
Pregnancy Counseling	197,000	0	100,000	-97,000	PG 50 LN 11
Total Assistance	$ 989,877,229	$ -52,000,000	$ 1,010,348,866	$ 20,471,637	
Total Human Services, Dept. of	$ 1,174,970,932	$ -52,000,000	$ 1,177,899,647	$ 2,928,715	
Veterans Affairs, Dept. of					
Veterans Affairs, Dept. of					
General Administration	$ 1,199,329	$ 0	$ 1,067,170	$ -132,159	PG 11 LN 3
Iowa Veterans Home	14,391,435	0	11,326,650	-3,064,785	PG 11 LN 10
Veterans County Grants	585,599	0	1,000,000	414,401	PG 12 LN 4
War Orphans Educational Assistance	25,785	0	22,944	-2,841	PG 11 LN 34
Total Veterans Affairs, Dept. of	$ 16,202,148	$ 0	$ 13,416,764	$ -2,785,384	
Total Health and Human Services	$ 1,224,577,120	$ -52,000,000	$ 1,249,658,725	$ 25,081,605	

Unassigned Standings

General Fund

	Estimated Net FY 2009 (1)	Supp-Final Act. FY 2009 (2)	Final Action FY 2010 (3)	FY 2010 Final vs. Est. Net FY 2009 (4)	Page and Line # (5)
Treasurer of State					
Treasurer of State					
Health Care Trust Fund Transfer	$ 125,686,000	$ 0	$ 117,796,000	$ -7,890,000	
Total Treasurer of State	$ 125,686,000	$ 0	$ 117,796,000	$ -7,890,000	
Total Unassigned Standings	$ 125,686,000	$ 0	$ 117,796,000	$ -7,890,000	

Summary Data

Other Funds

	Estimated Net FY 2009 (1)	Supp-Final Act. FY 2009 (2)	Final Action FY 2010 (3)	FY 2010 Final vs. Est. Net FY 2009 (4)	Page and Line # (5)
Health and Human Services	$ 551,122,941	$ 6,000,000	$ 438,097,569	$ -113,025,372	
Grand Total	$ 551,122,941	$ 6,000,000	$ 438,097,569	$ -113,025,372	

Health and Human Services

Other Funds

	Estimated Net FY 2009 (1)	Supp-Final Act. FY 2009 (2)	Final Action FY 2010 (3)	FY 2010 Final vs. Est. Net FY 2009 (4)	Page and Line # (5)
Elder Affairs, Dept. of					
Elder Affairs, Dept. of					
Case Management Systems - HCTA	$ 0	$ 0	$ 200,000	$ 200,000	PG 71 LN 11
Elder Affairs Operations-SLTF	8,486,698	0	8,486,698	0	PG 63 LN 21
Total Elder Affairs, Dept. of	$ 8,486,698	$ 0	$ 8,686,698	$ 200,000	
Public Health, Dept. of					
Public Health, Dept. of					
Ad. Dis.-Substance Abuse Treatment-GTF	$ 2,215,000	$ 0	$ 0	$ -2,215,000	
Ad. Dis.-Gambling Treatment Prog.-GTF	5,068,101	0	0	-5,068,101	
Ad. Dis.-Tobacco Use Prev.-HITT	6,928,265	0	0	-6,928,265	
Ad. Dis.-Sub. Abuse Treatment-HITT	13,800,000	0	0	-13,800,000	
Ad. Dis.-Sub. Abuse Prev. for Kids-HITT	1,050,000	0	0	-1,050,000	
Chr. Con-PKU Assistance-HITT	100,000	0	0	-100,000	
Chr. Con.-Iowa Stillbirth Eval.-HITT	26,000	0	0	-26,000	
Chr. Con.-AIDS Drug Assist. Prog.-HITT	275,000	0	0	-275,000	
Healthy Iowans 2010-HITT	2,509,960	0	0	-2,509,960	
Epilepsy Education-HITT	100,000	0	0	-100,000	
Addictive Disorders-HCTF	3,195,164	0	2,748,692	-446,472	PG 78 LN 13
Healthy Children and Families-HCTF	667,700	0	493,574	-174,126	PG 79 LN 11
Chronic Conditions-HCTF	1,164,181	0	999,219	-164,962	PG 79 LN 33
Community Capacity-HCTF	2,790,000	0	2,720,507	-69,493	PG 80 LN 12
Total Public Health, Dept. of	$ 39,889,371	$ 0	$ 6,961,992	$ -32,927,379	

Health and Human Services

Other Funds

	Estimated Net FY 2009 (1)	Supp-Final Act. FY 2009 (2)	Final Action FY 2010 (3)	FY 2010 Final vs. Est. Net FY 2009 (4)	Page and Line # (5)
Human Services, Dept. of					
General Administration					
FIP-TANF	$ 26,101,513	$ 0	$ 28,606,513	$ 2,505,000	PG 12 LN 28
Promise Jobs-TANF	13,334,528	0	13,084,528	-250,000	PG 12 LN 32
FaDSS-TANF	2,998,675	0	2,998,675	0	PG 13 LN 12
Field Operations-TANF	18,507,495	0	18,507,495	0	PG 13 LN 23
General Administration-TANF	3,744,000	0	3,744,000	0	PG 13 LN 25
Local Admin. Cost-TANF	2,189,830	0	2,189,830	0	PG 13 LN 27
State Day Care-TANF	18,986,177	0	18,986,177	0	PG 13 LN 29
MH/DD Comm. Services-TANF	4,894,052	0	4,894,052	0	PG 14 LN 15
Child & Family Services-TANF	32,084,430	0	32,084,430	0	PG 14 LN 18
Child Abuse Prevention-TANF	250,000	0	250,000	0	PG 14 LN 20
Training & Technology-TANF	1,037,186	0	1,037,186	0	PG 15 LN 5
HOPES - Transfer to DPH-TANF	200,000	0	200,000	0	PG 15 LN 9
0-5 Children-TANF	7,350,000	0	7,350,000	0	PG 15 LN 13
Child Support Recovery-TANF	200,000	0	0	-200,000	
Child Care Direct Assistance-TANF	8,900,000	0	6,845,000	-2,055,000	PG 13 LN 29
Total General Administration	$ 140,777,886	$ 0	$ 140,777,886	$ 0	

Health and Human Services

Other Funds

	Estimated Net FY 2009 (1)	Supp-Final Act. FY 2009 (2)	Final Action FY 2010 (3)	FY 2010 Final vs. Est. Net FY 2009 (4)	Page and Line # (5)
Assistance					
Pregnancy Prevention-TANF	$ 1,930,067	$ 0	$ 1,930,067	$ 0	PG 14 LN 22
Medical Supplemental-SLTF	111,753,195	0	39,084,483	-72,668,712	PG 66 LN 1
Medical Contracts-Pharm. Settlement	1,323,833	0	1,323,833	0	PG 66 LN 15
Broadlawns Hospital-ICA	40,000,000	6,000,000	46,000,000	6,000,000	PG 68 LN 18
State Hospital-Cherokee-ICA	3,164,766	0	0	-3,164,766	
State Hospital-Clarinda-ICA	687,779	0	0	-687,779	
State Hospital-Independence-ICA	3,146,494	0	0	-3,146,494	
State Hospital-Mt Pleasant-ICA	2,000,961	0	0	-2,000,961	
Medical Examinations-HCTA	556,800	0	556,800	0	PG 70 LN 2
Medical Information Hotline-HCTA	150,000	0	100,000	-50,000	PG 70 LN 6
Health Partnership Activities-HCTA	900,000	0	600,000	-300,000	PG 70 LN 9
Audits, Perf. Eval., Studies-HCTA	400,000	0	125,000	-275,000	PG 70 LN 12
IowaCare Admin. Costs-HCTA	1,132,412	0	1,132,412	0	PG 70 LN 15
Dental Home for Children-HCTA	1,000,000	0	1,000,000	0	PG 70 LN 17
Mental Health Trans. Pilot-HCTA	250,000	0	0	-250,000	
MH/DD Workforce Development-HCTA	500,000	0	50,000	-450,000	PG 70 LN 22
Medical Assistance-HCTF	114,943,296	0	111,834,156	-3,109,140	PG 83 LN 17
MH/MR/DD Growth-HCTF	7,592,099	0	0	-7,592,099	
General Administration-HITT	274,000	0	0	-274,000	
POS Provider Increase-HITT	146,750	0	0	-146,750	
Other Service Providers Inc.-HITT	182,381	0	0	-182,381	
Child and Family Services-HITT	3,786,677	0	0	-3,786,677	
Broadlawns Admin-HCTA	230,000	0	290,000	60,000	PG 70 LN 29
MH PTRF Medical Asst.	624,000	0	0	-624,000	
Medical Contracts - HCTA	0	0	1,300,000	1,300,000	PG 70 LN 27
Total Assistance	$ 296,675,510	$ 6,000,000	$ 205,326,751	$ -91,348,759	
Total Human Services, Dept. of	$ 437,453,396	$ 6,000,000	$ 346,104,637	$ -91,348,759	
Regents, Board of					
Regents, Board of					
BOR UIHC - IowaCares Expansion Population	$ 35,969,365	$ 0	$ 47,020,131	$ 11,050,766	PG 67 LN 31
BOR UIHC - IowaCares	27,284,584	0	27,284,584	0	PG 66 LN 25
Total Regents, Board of	$ 63,253,949	$ 0	$ 74,304,715	$ 11,050,766	

Health and Human Services

Other Funds

	Estimated Net FY 2009 (1)	Supp-Final Act. FY 2009 (2)	Final Action FY 2010 (3)	FY 2010 Final vs. Est. Net FY 2009 (4)	Page and Line # (5)
Inspections & Appeals, Dept. of					
Inspections and Appeals, Dept. of					
Assisted Living/Adult Day Care-SLTF	$ 1,339,527	$ 0	$ 1,339,527	$ 0	PG 65 LN 9
Total Inspections & Appeals, Dept. of	$ 1,339,527	$ 0	$ 1,339,527	$ 0	
Iowa Finance Authority					
Iowa Finance Authority					
Rent Subsidy Program-SLTF	$ 700,000	$ 0	$ 700,000	$ 0	PG 65 LN 19
Total Iowa Finance Authority	$ 700,000	$ 0	$ 700,000	$ 0	
Total Health and Human Services	$ 551,122,941	$ 6,000,000	$ 438,097,569	$ -113,025,372	

Summary Data

FTE

	Estimated Net FY 2009	Supp-Final Act. FY 2009	Final Action FY 2010	FY 2010 Final vs. Est. Net FY 2009	Page and Line #
	(1)	(2)	(3)	(4)	(5)
Health and Human Services	7,127.55	20.76	6,990.71	-136.84	
Grand Total	7,127.55	20.76	6,990.71	-136.84	

Health and Human Services

FTE

	Estimated Net FY 2009 (1)	Supp-Final Act. FY 2009 (2)	Final Action FY 2010 (3)	FY 2010 Final vs. Est. Net FY 2009 (4)	Page and Line # (5)
Elder Affairs, Dept. of					
Elder Affairs, Dept. of					
Aging Programs	40.50	0.00	37.50	-3.00	PG 1 LN 10
Total Elder Affairs, Dept. of	40.50	0.00	37.50	-3.00	
Public Health, Dept. of					
Public Health, Dept. of					
Addictive Disorders	6.00	0.00	18.00	12.00	PG 3 LN 27
Healthy Children and Families	16.00	0.00	14.00	-2.00	PG 6 LN 20
Chronic Conditions	5.00	0.00	3.00	-2.00	PG 7 LN 14
Community Capacity	12.00	0.00	21.00	9.00	PG 8 LN 6
Environmental Hazards	2.00	0.00	4.50	2.50	PG 9 LN 12
Infectious Diseases	7.00	0.00	5.00	-2.00	PG 9 LN 23
Public Protection	128.00	0.00	130.00	2.00	PG 9 LN 29
Resource Management	10.00	0.00	10.00	0.00	PG 10 LN 20
Ad. Dis.-Gambling Treatment Prog.-GTF	2.95	0.00	0.00	-2.95	
Ad. Dis.-Tobacco Use Prev.-HITT	7.00	0.00	0.00	-7.00	
Healthy Iowans 2010-HITT	4.00	0.00	0.00	-4.00	
Addictive Disorders-HCTF	5.00	0.00	0.00	-5.00	PG 78 LN 13
Healthy Children and Families-HCTF	1.00	0.00	0.00	-1.00	PG 79 LN 11
Chronic Conditions-HCTF	1.00	0.00	0.00	-1.00	PG 79 LN 33
Community Capacity-HCTF	6.00	0.00	0.00	-6.00	PG 80 LN 12
Total Public Health, Dept. of	212.95	0.00	205.50	-7.45	
Human Services, Dept. of					
General Administration					
General Administration	407.50	0.00	354.33	-53.17	PG 48 LN 26
Field Operations					
Child Support Recoveries	515.00	0.00	520.00	5.00	PG 20 LN 17
Field Operations	2,130.68	0.00	2,000.13	-130.55	PG 48 LN 13
Total Field Operations	2,645.68	0.00	2,520.13	-125.55	
Toledo Juvenile Home					
Toledo Juvenile Home	126.00	0.00	125.00	-1.00	PG 32 LN 27

Health and Human Services

FTE

	Estimated Net FY 2009	Supp-Final Act. FY 2009	Final Action FY 2010	FY 2010 Final vs. Est. Net FY 2009	Page and Line #
	(1)	(2)	(3)	(4)	(5)
Eldora Training School					
Eldora Training School	202.70	0.00	202.70	0.00	PG 32 LN 32
Cherokee CCUSO					
Civil Commit. Unit for Sex Offenders	94.50	0.00	105.50	11.00	PG 47 LN 25
Cherokee					
Cherokee MHI	210.00	0.00	205.00	-5.00	PG 42 LN 10
Clarinda					
Clarinda MHI	114.95	0.00	114.95	0.00	PG 42 LN 16
Independence					
Independence MHI	287.66	0.00	287.85	0.19	PG 42 LN 22
Mt Pleasant					
Mt Pleasant MHI	116.44	0.00	116.44	0.00	PG 42 LN 28
Glenwood					
Glenwood Resource Center	938.88	0.00	947.24	8.36	PG 43 LN 30
Woodward					
Woodward Resource Center	733.64	0.00	737.16	3.52	PG 43 LN 33
Assistance					
Family Investment Program/JOBS	0.00	0.00	16.50	16.50	PG 18 LN 21
Health Insurance Premium Payment	21.00	0.00	19.00	-2.00	PG 28 LN 1
Medical Contracts	6.00	0.00	6.00	0.00	PG 28 LN 13
Total Assistance	27.00	0.00	41.50	14.50	
Total Human Services, Dept. of	5,904.95	0.00	5,757.80	-147.15	
Veterans Affairs, Dept. of					
Veterans Affairs, Dept. of					
General Administration	17.20	0.00	17.20	0.00	PG 11 LN 3
Iowa Veterans Home	951.95	20.76	972.71	20.76	PG 11 LN 10
Total Veterans Affairs, Dept. of	969.15	20.76	989.91	20.76	
Total Health and Human Services	7,127.55	20.76	6,990.71	-136.84	