

Health and Human Services Appropriations Bill House File 1049

Last Action:

Final Action

May 14, 2025

An Act relating to and making appropriations to the Department of Veterans Affairs and the Department of Health and Human Services, and related provisions and appropriations, including Aging and Disability Services; Behavioral Health, Public Health, Community Access and Eligibility; the Medical Assistance Program, State Supplementary Assistance, Hawki, and other health-related programs; sex reassignment surgeries or associated procedures; Family Well-Being and Protection; State-Operated Specialty Care, Administration and Compliance; transfers, cash flows, and nonreversions; prior appropriations; the Beer and Liquor Control Fund, and the Behavioral Health Fund; report on nonreversion of moneys; emergency rules; and a Hospital Directed Payment Program; and including effective date and retroactive applicability provisions.

**Fiscal Services Division
Legislative Services Agency**

NOTES ON BILLS AND AMENDMENTS (NOBA)

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

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FUNDING SUMMARY

General Fund FY 2026: Appropriates a total of \$2,469.5 million from the General Fund and 4,163.0 full-time equivalent (FTE) positions to the Department of Health and Human Services (HHS), containing the Department of Veterans Affairs (DVA). This is an increase of \$255.9 million and a decrease of 263.9 FTE positions compared to estimated net FY 2025. For the HHS, General Fund FTE positions are now tracked through the same line items as federally funded FTE positions. Excluding federally funded FTE positions, the FTE positions appropriated in the Bill represent a decrease of 8.0 FTE positions compared to the previously authorized amount in 2024 Iowa Acts, [House File 2698](#) (FY 2025 Health and Human Services Appropriations Act).

Other Funds FY 2026: Appropriates a total of \$457.2 million from other funds. This is a decrease of \$11.2 million compared to estimated net FY 2025.

Standing General Fund Appropriations FY 2026: In addition to the appropriations in the Bill, the attached tracking includes the following standing General Fund appropriations totaling \$4.2 million that are automatically appropriated in statute:

- \$990,000 for the County Commissions of Veteran Affairs Fund.
- \$233,000 to the HHS for Child Abuse Prevention.
- \$224,000 to the HHS for the Center for Congenital and Inherited Disorders Central Registry.
- \$1.2 million for the Psychiatry Residency and Fellowship Program.
- \$425,000 to the HHS for Centers of Excellence.
- \$1 to the HHS for the Low-Income Home Energy Assistance Program (LIHEAP) Weatherization Assistance Program.
- \$1,400 to the HHS for the Commission of Inquiry.
- \$143,000 to the HHS for Nonresident Mental Illness Commitment.
- \$1.0 million to the HHS for the Behavioral Health Fund.

Standing Other Fund Appropriations FY 2026: In addition to the appropriations in the Bill, the attached tracking includes the following standing Other Fund appropriation estimates totaling \$151.1 million that are automatically appropriated in statute:

- \$150,000 from the Medicaid Fraud Fund to the HHS for Medicaid.
- \$151.0 million from the Health Care Trust Fund to the HHS for the Medical Assistance (Medicaid) Program.

NEW PROGRAMS, SERVICES, OR ACTIVITIES

Requires the HHS, by April 1, 2026, to develop a reimbursement methodology proposal for reimbursement of nursing facilities under the Medicaid program that includes a base-rate payment component, a quality assurance assessment pass-through component, and a quality assurance add-on component, which includes a fixed fee payment and a quality-based payment. Provides that the reimbursement methodology proposal must include recommendations developed by the HHS, in consultation with stakeholders including the Iowa Health Care Association and LeadingAge Iowa, for specific metrics the HHS will use to determine whether a nursing facility is eligible to receive all or a portion of the quality-based payment portion of the reimbursement to the nursing facility. Prohibits the total State expenditures for reimbursement of nursing facilities under the Medicaid program using the reimbursement methodology proposed in this Section of the Bill from exceeding the amount appropriated for this purpose for the applicable fiscal year.

Page 18, Line 3

Establishes a Hospital Directed Payment Program and requires the HHS to submit any authorizing documentation necessary to the Centers for Medicare and Medicaid Services (CMS) for approval of the Program for any specific fiscal year.

Page 33, Line 28

MAJOR INCREASES/DECREASES/TRANSFERS OF EXISTING PROGRAMS

Department of Health and Human Services — Aging and Disability Services: Appropriates a total of \$19.2 million and 88.0 FTE positions from the General Fund. This is an increase of \$119,000 compared to estimated net FY 2025. Excluding federally funded FTE positions, this is an increase of 1.0 FTE position compared to the previously authorized amount in 2024 Iowa Acts, [House File 2698](#) (FY 2025 Health and Human Services Appropriations Act).

Page 2, Line 33

Department of Health and Human Services — Public Health: Appropriates a total of \$22.4 million and 348.6 FTE positions from the General Fund. This is a net decrease of \$98,000 compared to estimated net FY 2025. Excluding federally funded FTE positions, this is an increase of 62.6 FTE positions compared to the previously authorized amount in 2024 Iowa Acts, [House File 2698](#) (FY 2025 Health and Human Services Appropriations Act).

Page 5, Line 21

Creates a new allocation of \$20,000 from the Public Health appropriation in FY 2026 to be used to make radon test kits available, free of charge, to homeowners and renters in Iowa.

Page 7, Line 6

Creates a new allocation of \$2.3 million from the Public Health appropriation in FY 2026 to be used for Medicaid graduate medical education efforts as described in 2025 Iowa Acts, [House File 972](#) (Rural Health

Page 7, Line 11

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Care Bill).

Department of Health and Human Services — Community Access and Eligibility: Appropriates a total of \$68.5 million and 870.4 FTE positions from the General Fund. This is an increase of \$499,000 compared to estimated net FY 2025. Excluding federally funded FTE positions, this is a decrease of 77.6 FTE positions compared to the previously authorized amount in 2024 Iowa Acts, [House File 2698](#) (FY 2025 Health and Human Services Appropriations Act).

Page 7, Line 27

Department of Health and Human Services — Child Support Services: Appropriates a total of \$15.6 million and 464.0 FTE positions from the General Fund. This is an increase of \$210,000 compared to estimated net FY 2025. Excluding federally funded FTE positions, this is no change in FTE positions compared to the previously authorized amount in 2024 Iowa Acts, [House File 2698](#) (FY 2025 Health and Human Services Appropriations Act).

Page 9, Line 26

Temporary Assistance for Needy Families (TANF) Block Grant: Appropriates \$159.0 million for various HHS programs funded through the TANF Block Grant. This is an increase of \$15.0 million compared to estimated net FY 2025.

Page 10, Line 12

Department of Health and Human Services — Medical Assistance Program, State Supplementary Assistance (SSA), and Healthy and Well Kids in Iowa (Hawki) Program: Appropriates a total of \$1,903.6 million from the General Fund. This is a net increase of \$252.7 million compared to estimated net FY 2025 including the following:

Page 11, Line 34

- An increase of \$210.5 million for the expected Medicaid shortfall in FY 2026.
- An increase of \$20.0 million for nursing facility provider reimbursement rate rebasing.
- An increase of \$19.9 million for an expected Hawki shortfall in FY 2026.
- An increase of \$3.1 million for intermittent community-based services.
- An increase of \$2.1 million for a dental provider rate adjustment.
- An increase of \$420,000 for maternal health-related provider rate adjustments.
- An increase of \$331,000 for a personal needs allowance increase.
- An increase of \$100,000 for a prosthetics rate increase.
- A decrease of \$800,000 for nursing facility renovation and construction.
- A decrease of \$3.0 million due to an increased federal reimbursement rate for certified community behavioral health clinics.

Creates a new allocation of \$3.1 million from the Medical Assistance appropriation in FY 2026 to expand the capacity of intermittent community-based services.

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Department of Health and Human Services — Health Program Operations: Appropriates a total of \$39.7 million and 82.0 FTE positions from the General Fund. This is an increase of \$75,000 compared to estimated net FY 2025. Excluding federally funded FTE positions, this is an increase of 1.0 FTE position compared to the previously authorized amount in 2024 Iowa Acts, [House File 2698](#) (FY 2025 Health and Human Services Appropriations Act). Page 13, Line 18

Creates a new allocation of \$2.1 million from the Medicaid allocation in FY 2026 to be used to increase Medicaid reimbursement rates for dentists. Page 17, Line 11

Creates a new allocation of \$420,000 from the Medicaid allocation in FY 2026 to be used to increase Medicaid reimbursement rates for maternal health providers. Page 17, Line 15

Creates a new allocation of \$100,000 from the Medicaid allocation in FY 2026 to be used to increase Medicaid reimbursement rates for prosthetics. Page 17, Line 19

Creates a new allocation of \$331,000 from the Medicaid allocation in FY 2026 to increase the monthly personal needs allowance Medicaid beneficiaries who are residents of nursing facilities, intermediate care facilities (ICFs) for persons with an intellectual disability, ICFs for persons with mental illness, or psychiatric medical institutions for children (PMICs). Page 19, Line 7

Increases the personal needs allowance for residents of certain facilities enrolled in Medicaid from \$50.00 to \$55.00. Page 19, Line 13

FISCAL IMPACT: Increasing the personal needs allowance by \$5.00 is estimated to cost approximately \$758,000. Of the cost, the federal government will pay \$427,000 and the State will pay \$331,000. Additionally, the HHS may incur approximately \$80,000 in Information Technology (IT) costs.

Department of Health and Human Services — Child Care Assistance: Appropriates a total of \$35.0 million and 53.0 FTE positions from the General Fund. This is an increase of \$16,000 compared to estimated net FY 2025. Excluding federally funded FTE positions, this is an increase of 15.0 FTE positions compared to the previously authorized amount in 2024 Iowa Acts, [House File 2698](#) (FY 2025 Health and Human Services Appropriations Act). Page 19, Line 34

Department of Health and Human Services — Early Intervention and Supports: Appropriates a total of \$35.3 million and 29.0 FTE positions from the General Fund. This is an increase of \$24,000 compared to Page 20, Line 21

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estimated net FY 2025. Excluding federally funded FTE positions, this is an increase of 4.0 FTE positions compared to the previously authorized amount in 2024 Iowa Acts, [House File 2698](#) (FY 2025 Health and Human Services Appropriations Act).

Department of Health and Human Services — Child Protective Services: Appropriates a total of \$165.6 million and 977.0 FTE positions from the General Fund. This is a net decrease of \$543,000 compared to estimated net FY 2025. Excluding federally funded FTE positions, this is no change in FTE positions compared to the previously authorized amount in 2024 Iowa Acts, [House File 2698](#) (FY 2025 Health and Human Services Appropriations Act).

Page 21, Line 10

Creates a new allocation of \$3.2 million from the Child Protective Services appropriation in FY 2026 to increase reimbursement rates for Qualified Residential Treatment Program (QRTP) providers.

Page 24, Line 12

Creates a new allocation of \$1.6 million from the Child Protective Services appropriation in FY 2026 to increase reimbursement rates for shelter care providers.

Page 24, Line 16

Department of Health and Human Services — State-Operated Specialty Care: Appropriates a total of \$102.3 million and 756.0 FTE positions from the General Fund. This is an increase of \$2.3 million compared to estimated net FY 2025. Excluding federally funded FTE positions, this is no change in FTE positions compared to the previously authorized amount in 2024 Iowa Acts, [House File 2698](#) (FY 2025 Health and Human Services Appropriations Act).

Page 24, Line 30

Department of Health and Human Services — Accountability, Compliance, and Program Integrity: Appropriates a total of \$21.9 million and 409.0 FTE positions from the General Fund. This is a net decrease of \$452,000 compared to estimated net FY 2025. Excluding federally funded FTE positions, this is a decrease of 14.0 FTE positions compared to the previously authorized amount in 2024 Iowa Acts, [House File 2698](#) (FY 2025 Health and Human Services Appropriations Act).

Page 25, Line 27

CHANGES TO PRIOR APPROPRIATIONS

Allows any unexpended funds appropriated in 2024 Iowa Acts, [House File 2698](#) (FY 2025 Health and Human Services Appropriations Act), for FY 2025 from the General Fund for the Thrive Iowa Program to remain available for expenditure.

Page 29, Line 24

Allows any unencumbered or unobligated funds appropriated in 2024 Iowa Acts, [House File 2698](#) (FY 2025 Health and Human Services Appropriations Act), from the General Fund for Community Access and Eligibility in FY 2025 to remain available for expenditure until the close of FY 2026.

Page 30, Line 5

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Allows any unencumbered or unobligated funds appropriated in 2024 Iowa Acts, [House File 2698](#) (FY 2025 Health and Human Services Appropriations Act), from the General Fund for the More Options for Maternal Support (MOMS) Program in FY 2025 to remain available for expenditure until the close of FY 2026. Page 30, Line 20

Allows any unencumbered or unobligated funds appropriated in 2024 Iowa Acts, [House File 2698](#) (FY 2025 Health and Human Services Appropriations Act), from the General Fund for Child Protective Services in FY 2025 to remain available for expenditure until the close of FY 2026. Page 30, Line 32

Amends 2024 Iowa Acts, [House File 2698](#) (FY 2025 Health and Human Services Appropriations Act), to replace the standing appropriation under Iowa Code section [123.17](#)(5) for the Comprehensive Substance Use Disorder Program with the appropriation in Division III of the Act for FY 2025. Page 31, Line 13

FISCAL IMPACT: This is a decrease of \$2.0 million to the HHS for FY 2025.

Amends 2024 Iowa Acts, [House File 2673](#) (Behavioral Health Service System Act), to decrease the standing appropriation from the General Fund to the HHS from the 7.0% of the liquor sales for the Behavioral Health Fund from \$2.0 million to \$1.0 million beginning in FY 2026. Page 31, Line 22

STUDIES AND INTENT

Emergency Rules

Requires the HHS to adopt emergency administrative rules to comply with federal requirements or to implement the Bill. The rules are required to be effective immediately upon filing or on a later effective date specified in the rules. Page 32, Line 24

Intent

Specifies that it is the intent of the General Assembly to provide sufficient funding for the State Child Care Assistance (CCA) Program in FY 2026 to avoid the establishment of a waiting list. Page 20, Line 10

Prohibits a district or juvenile court from ordering any service that is a charge to the State if there are insufficient funds to pay for the service. Page 22, Line 17

Nonreversion

Requires federal moneys received in FY 2026 because of the expenditure of State funds in a previous year to be used for Child Protective Services. Allows any unencumbered or unobligated funds to remain available Page 22, Line 1

for expenditure through FY 2027.

Allows any unencumbered or unobligated funds appropriated for the Family Development and Self-Sufficiency (FaDSS) Program in FY 2026 to remain available for FY 2027. Page 27, Line 26

Allows any unencumbered or unobligated funds appropriated from the General Fund, the Quality Assurance Trust Fund (QATF), and the Hospital Health Care Access Trust Fund (HHCAT) to the HHS in FY 2026 for the Medicaid Program to remain available for FY 2027. Page 27, Line 35

Allows any unencumbered or unobligated funds appropriated from the General Fund to the HHS for State-Operated Specialty Care in FY 2026 to remain available for subsequent fiscal years. Page 28, Line 11

Allows any unencumbered or unobligated funds appropriated from the General Fund to the HHS for the Iowa Commission on Volunteer Services in FY 2026 to remain available for subsequent fiscal years. Page 28, Line 21

Allows any unencumbered or unobligated funds appropriated from the General Fund to the HHS for rural psychiatric residencies in FY 2026 to remain available for FY 2027. Page 28, Line 29

Allows any unencumbered or unobligated funds appropriated from the General Fund to the HHS for adoption subsidy payments or post-adoption services in FY 2026 to remain available for FY 2027. Page 29, Line 2

Allows any unencumbered or unobligated funds appropriated from the General Fund to the HHS for Child Protective Services in FY 2026 to remain available for FY 2027. Page 29, Line 12

Required Reports

Requires the Iowa Veterans Home (IVH) to submit a monthly expenditure report to the General Assembly. Page 2, Line 22

Requires the HHS to report any transfers made for purposes of continuing alignment efforts, maximizing federal support, and the implementation and administration of services to the General Assembly. Page 26, Line 22

Requires the HHS to report the expenditure of any moneys for which nonreversion authorization was provided for FY 2025 to the General Assembly on a quarterly basis beginning October 1, 2025. Page 32, Line 16

Requires the HHS to report to the General Assembly and the DOM at least 30 calendar days prior to submitting administrative rules that have a fiscal impact that was not addressed in the budget process. Page 32, Line 34

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Prohibits FY 2026 moneys allocated for Medicaid from being used for reimbursement for sex reassignment surgery or associated procedures, including hormone therapy or other medical interventions intended to alter primary or secondary sex characteristics related to an individual's gender dysphoria diagnosis. Specifies that the Section does not prohibit Medicaid reimbursement for services not described in the Section that are otherwise covered under Medicaid. Requires the HHS to adopt administrative rules to administer this Section.

Page 15, Line 29

EFFECTIVE DATE

Specifies that Division XI of the Bill related to prior appropriations for FY 2025 takes effect upon enactment and applies retroactively to July 1, 2024.

Page 31, Line 7

Specifies that Division XII of the Bill related to the Beer and Liquor Control Fund standing appropriation takes effect upon enactment and applies retroactively to July 1, 2024.

Page 32, Line 10

House File 1049 provides for the following changes to the Code of Iowa.

Page #	Line #	Bill Section	Action	Code Section
15	29	14	New	249A.14
19	13	19	Amend	249A.30A
33	13	40	New	249O.1
33	28	41	New	249O.2

2 1 DIVISION I
 2 2 DEPARTMENT OF VETERANS AFFAIRS — FY 2025-2026
 2 3 Section 1. DEPARTMENT OF VETERANS AFFAIRS. There is
 2 4 appropriated from the general fund of the state to the
 2 5 department of veterans affairs for the fiscal year beginning
 2 6 July 1, 2025, and ending June 30, 2026, the following amounts,
 2 7 or so much thereof as is necessary, to be used for the purposes
 2 8 designated:

2 9 1. DEPARTMENT OF VETERANS AFFAIRS ADMINISTRATION
 2 10 For salaries, support, maintenance, and miscellaneous
 2 11 purposes, and for not more than the following full-time
 2 12 equivalent positions:
 2 13 \$ 1,369,205
 2 14 FTEs 15.00

General Fund appropriation to the Department of Veterans Affairs (DVA).

DETAIL: This is no change in funding and an increase of 4.00 full-time equivalent (FTE) positions compared to estimated net FY 2025. The increase of 4.00 FTE positions is to restore the FTE positions to the previously authorized amount in [House File 2698](#) (FY 2025 Health and Human Services Appropriations Act).

2 15 2. IOWA VETERANS HOME
 2 16 For salaries, support, maintenance, and miscellaneous
 2 17 purposes:
 2 18 \$ 8,145,736

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

DETAIL: This is no change in funding compared to estimated net FY 2025.

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

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

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

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

2 24 3. HOME OWNERSHIP ASSISTANCE PROGRAM
 2 25 For transfer to the Iowa finance authority for the
 2 26 continuation of the home ownership assistance program for
 2 27 persons who are or were eligible members of the armed forces
 2 28 of the United States or eligible service members pursuant to
 2 29 section 16.54:
 2 30 \$ 2,200,000

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

DETAIL: This is no change in funding compared to estimated net FY 2025. Under the Program, a \$5,000 grant is available to a service member for down payment and closing costs toward the purchase of a new home in the State of Iowa. The home must be a primary residence, and this is a once-in-a-lifetime grant.

2 31 DIVISION II
2 32 AGING AND DISABILITY SERVICES — FY 2025-2026

2 33 Sec. 2. DEPARTMENT OF HEALTH AND HUMAN SERVICES — AGING

2 34 AND DISABILITY SERVICES. There is appropriated from the
2 35 general fund of the state to the department of health and human
3 1 services for the fiscal year beginning July 1, 2025, and ending
3 2 June 30, 2026, the following amount, or so much thereof as is
3 3 necessary, to be used for the purposes designated:

3 4 For aging programs for the department of health and human
3 5 services and area agencies on aging to provide citizens of
3 6 Iowa who are 60 years of age and older with case management;
3 7 for Iowa’s aging and disabilities resource centers; for the
3 8 return to community program; for the purposes of chapter 231E;
3 9 to administer the prevention of elder abuse, neglect, and
3 10 exploitation program pursuant to section 231.56A, in accordance
3 11 with the requirements of the federal Older Americans Act of
3 12 1965, 42 U.S.C. §3001 et seq., as amended; for the operation
3 13 of the dependent adult abuse services program pursuant to
3 14 chapter 235B; for other services which may include but are not
3 15 limited to adult day care, respite care, chore, information
3 16 and assistance, and material aid; for information and options
3 17 counseling for persons with disabilities; and for salaries,
3 18 support, administration, maintenance, and miscellaneous
3 19 purposes, and for not more than the following full-time
3 20 equivalent positions:

3 21	..... \$	19,208,180
3 22	..... FTEs	88.00

3 23 1. Moneys appropriated in this section may be used to
3 24 supplement federal moneys received under federal regulations.
3 25 To receive moneys appropriated in this section, a local area
3 26 agency on aging shall match the moneys with moneys from other
3 27 sources according to rules adopted by the department. Moneys
3 28 appropriated in this section may be used for services not
3 29 specifically enumerated in this section only if approved by the
3 30 department as part of an area agency on aging’s area plan.

3 31 2. Of the moneys appropriated in this section, \$949,282
3 32 shall be used for the family support center component of the
3 33 comprehensive family support program under section 225C.47.

General Fund appropriation to the HHS — Aging and Disability Services for FY 2026.

DETAIL: This is an increase of \$119,466 compared to estimated net FY 2025 for general operating expenses. Excluding federally funded FTE positions, this is an increase in 1.00 FTE position compared to the previously authorized amount in 2024 Iowa Acts, [House File 2698](#) (FY 2025 Health and Human Services Appropriations Act), due to the restructuring of FTE positions within the HHS. The Division of Aging and Disability Services works with Iowa’s Area Agencies on Aging (AAAs) and Aging and Disability Resource Centers to provide supports and services to individuals aged 60 years old and older and individuals with disabilities through programs and initiatives that improve access to affordable, high-quality, long-term living and community supports.

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

Allocates \$949,282 to the HHS to continue the Children at Home Program. The HHS has existing statewide coordinated intake for family support services through the Division of Health Promotion and Chronic Disease Prevention.

DETAIL: This is no change in funding compared to the estimated net FY 2025 allocation.

3 34 3. Of the moneys appropriated in this section, \$33,632 shall
3 35 be used to build community capacity through the coordination
4 1 and provision of training opportunities in accordance with the
4 2 consent decree of Conner v.Branstad, No.4-86-CV-30871 (S.D.
4 3 Iowa, July 15, 1994).

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

DETAIL: This is no change in funding compared to estimated net FY 2025. The funds are used for training purposes to comply with the [Conner v. Branstad](#) consent decree mandating placement of persons with developmental disabilities in the least restrictive setting possible.

4 4 DIVISION III
4 5 BEHAVIORAL HEALTH — FY 2025-2026

4 6 Sec. 3. DEPARTMENT OF HEALTH AND HUMAN SERVICES —
4 7 BEHAVIORAL HEALTH. There is appropriated from the general fund
4 8 of the state to the department of health and human services for
4 9 the fiscal year beginning July 1, 2025, and ending June 30,
4 10 2026, the following amount, or so much thereof as is necessary,
4 11 to be used for the purposes designated:

General Fund appropriation to the HHS — Behavioral Health for FY 2026.

4 12 For behavioral health prevention, treatment, and recovery
4 13 efforts to reduce the prevalence of the use of, provide
4 14 treatment for, and support recovery from alcohol, tobacco, and
4 15 substance use and misuse, problem gambling, and other addictive
4 16 behaviors. Activities shall align with accepted best practice
4 17 guidance standards for behavioral health including those
4 18 published by the centers for disease control and prevention of
4 19 the United States department of health and human services, and
4 20 the substance abuse and mental health services administration
4 21 of the United States department of health and human services,
4 22 for health promotion; universal, selective, and indicated
4 23 prevention; treatment; and recovery services and supports; and
4 24 shall include a 24-hour helpline, public information resources,
4 25 professional training, youth prevention, program evaluation,
4 26 and efforts at the state and local levels, and for not more
4 27 than the following full-time equivalent positions:

DETAIL: This is an increase of \$42,007 compared to estimated net FY 2025 for general operating expenses. Excluding federally funded FTE positions, this is no change in FTE positions compared to the previously authorized amount in 2024 Iowa Acts, [House File 2698](#) (FY 2025 Health and Human Services Appropriations Act). The Division of Behavioral Health works to provide prevention, treatment, and recovery services related to mental health and addictive disorders. 2024 Iowa Acts, [House File 2673](#) (Behavioral Health Service System Act), established a Behavioral Health Service System that will operate within the Division of Behavioral Health that goes into effect on July 1, 2025 (FY 2026).

4 28 \$ 24,442,121
4 29 FTEs 71.00

4 30 1. Of the moneys appropriated in this section, \$300,000

Allocates \$300,000 for the Children's Behavioral Health System.

4 31 shall be used to support the work of the children’s behavioral
 4 32 health system including evidence-based behavioral health
 4 33 prevention, treatment, and recovery services and supports for
 4 34 children and their families pursuant to the intent specified in
 4 35 section 225C.6B, subsection 1.

DETAIL: This is no change in funding compared to the estimated net FY 2025 allocation.

5 1 2. Of the moneys appropriated in this section, \$950,000
 5 2 shall be used for an integrated substance use disorder managed
 5 3 care system. The department shall maintain the level of mental
 5 4 health and substance use disorder treatment services provided
 5 5 by the managed care contractors, and shall take the steps
 5 6 necessary to continue the federal waivers as needed to maintain
 5 7 the level of services.

Allocates \$950,000 for continuation of the Managed Substance Abuse Treatment Program.

DETAIL: This is no change in funding compared to the estimated net FY 2025 allocation.

5 8 Sec. 4. DEPARTMENT OF HEALTH AND HUMAN SERVICES — SPORTS
 5 9 WAGERING RECEIPTS FUND. There is appropriated from the
 5 10 sports wagering receipts fund created in section 8.571, to the
 5 11 department of health and human services for the fiscal year
 5 12 beginning July 1, 2025, and ending June 30, 2026, the following
 5 13 amount, or so much thereof as is necessary, to be used for
 5 14 behavioral health prevention, treatment, and recovery efforts
 5 15 to reduce the prevalence of the use of, provide treatment for,
 5 16 and support recovery from alcohol, tobacco, and substance use
 5 17 and misuse, problem gambling, and other addictive behaviors:
 5 18 \$ 1,750,000

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

DETAIL: This is no change in funding compared to estimated net FY 2025.

5 19 DIVISION IV
 5 20 PUBLIC HEALTH — FY 2025-2026

5 21 Sec. 5. DEPARTMENT OF HEALTH AND HUMAN SERVICES — PUBLIC
 5 22 HEALTH. There is appropriated from the general fund of the
 5 23 state to the department of health and human services for the
 5 24 fiscal year beginning July 1, 2025, and ending June 30, 2026,
 5 25 the following amount, or so much thereof as is necessary, to be
 5 26 used for the purposes designated:
 5 27 For programs that support health promotion, protect the
 5 28 health and safety of the public, conduct disease surveillance
 5 29 and investigation to reduce the incidence of morbidity and
 5 30 mortality, serve individuals with chronic conditions including
 5 31 but not limited to cancer, support the Iowa donor registry as
 5 32 specified in section 142C.18, and strengthen the health care
 5 33 delivery system and workforce to improve health outcomes for

General Fund appropriation to the HHS — Public Health for FY 2026.

DETAIL: This is a net decrease of \$98,452 in funding compared to estimated net FY 2025. Excluding federally funded FTE positions, this is an increase of 62.60 FTE positions compared to the previously authorized amount in 2024 Iowa Acts, [House File 2698](#) (FY 2025 Health and Human Services Appropriations Act), to move Family and Preventive Health Bureau staff from the Community Access and Eligibility appropriation. The funding changes include:

- An increase of \$95,548 for general operating expenses.
- An increase of \$20,000 for radon testing kits.
- A decrease of \$214,000 to consolidate funding for various health care-related loan repayment programs and move the

5 34 all lowans, and for not more than the following full-time
 5 35 equivalent positions:
 6 1 \$ 22,433,369
 6 2 FTEs 348.60

funding to the Department of Education.

The Division of Public Health's responsibilities include promoting the health and safety of the public, conducting disease surveillance and investigation to reduce the incidence of morbidity and mortality, serving individuals with chronic conditions, and strengthening the health care delivery system.

6 3 1. Of the moneys appropriated in this section, the following
 6 4 amounts are allocated to the department of health and human
 6 5 services to be used as follows to support the goals of
 6 6 increased access, health system integration, and engagement:

Allocates a total of \$1,224,000 of the Public Health appropriation to support increased access, health system integration, and engagement. This is no change in funding compared to the estimated net FY 2025 allocation.

6 7 a. \$600,000 for distribution to a nonprofit organization
 6 8 that established the first statewide drug donation repository
 6 9 for continuation of the pharmaceutical infrastructure for
 6 10 safety net providers established as described in 2007 Iowa
 6 11 Acts, chapter 218, section 108, and for the prescription drug
 6 12 donation repository program established in chapter 135M.
 6 13 Moneys under this paragraph shall be distributed in their
 6 14 entirety on July 1, 2025, for the purpose specified.

Distributes \$600,000 of the allocation to be used for pharmaceutical infrastructure for the SafeNetRx prescription drug donation repository program. Requires these moneys to be distributed in their entirety on July 1, 2025.

6 15 b. \$374,000 for distribution to free clinics, as defined in
 6 16 section 135.24, and a nonprofit organization that facilitates
 6 17 the initiation, operation, and collaboration of free clinics
 6 18 for necessary infrastructure, statewide coordination, provider
 6 19 recruitment, service delivery, and provision of assistance to
 6 20 patients in securing a medical home inclusive of oral health
 6 21 care. Of the moneys allocated, \$40,000 shall be used to lower
 6 22 fees associated with using an electronic prescribing system.
 6 23 Moneys under this paragraph shall be distributed in their
 6 24 entirety on July 1, 2025, for the purpose specified.

Distributes \$374,000 of the allocation to be used for free clinics and a nonprofit organization that facilitates free clinics. Of these moneys, \$40,000 will be used to lower fees associated with an electronic prescribing system. Requires these moneys to be distributed in their entirety on July 1, 2025.

6 25 c. \$25,000 for distribution to an organization that raises
 6 26 awareness about issues related to rural health clinics for
 6 27 necessary infrastructure and service delivery transformation.
 6 28 Moneys under this paragraph shall be distributed in their
 6 29 entirety on July 1, 2025, for the purpose specified.

Distributes \$25,000 of the allocation to be used for an organization that raises awareness about rural health clinic issues and infrastructure and service delivery transformation. Requires these moneys to be distributed in their entirety on July 1, 2025.

6 30 d. \$225,000 for distribution to an organization that is
 6 31 the oldest continuously operating medical society in the most

Distributes \$225,000 of the allocation to be used for an organization that is the oldest continuously operating medical society in the most

6 32 populous county in the state according to the most recently
6 33 published census for continuation of safety net provider
6 34 patients access to specialty care as described in 2007 Iowa
6 35 Acts, chapter 218, section 109. Moneys under this paragraph
7 1 shall be distributed in their entirety on July 1, 2025, for the
7 2 purpose specified.

populous county in the State to continue safety net provider patients' access to specialty care clinics. Requires these moneys to be distributed in their entirety on July 1, 2025.

7 3 2. Of the moneys appropriated in this section, \$600,000
7 4 shall be used for rural psychiatric residencies for residents
7 5 selected on or before June 30, 2025.

Allocates \$600,000 of the Public Health appropriation for rural psychiatric residencies to support the funding of psychiatric residents, selected on or before June 30, 2025, to provide mental health services to underserved areas of the State.

DETAIL: This is a decrease of \$200,000 compared to the estimated net FY 2025 allocation.

7 6 3. Of the moneys appropriated in this section, \$20,000 shall
7 7 be used to make radon test kits available, free of charge, to
7 8 homeowners and renters in the state. The department shall
7 9 provide a link on the department's internet site for homeowners
7 10 and renters in the state to order radon test kits.

Allocates \$20,000 of the Public Health appropriation to make radon test kits available, free of charge, to homeowners and renters in Iowa. Requires the HHS to provide a link on the HHS's website for homeowners and renters to order radon test kits.

DETAIL: This is a new allocation for FY 2026.

7 11 4. Of the moneys appropriated in this section, \$2,300,000
7 12 shall be used for Medicaid graduate medical education efforts
7 13 and consistent with the purpose of the department's request for
7 14 approval to the centers of Medicare and Medicaid services of
7 15 the United States department of health and human services for
7 16 a Medicaid supplemental enhanced payment for the purposes of
7 17 maximizing federal funding opportunities for graduate medical
7 18 education as described in 2025 Iowa Acts, House File 972, or
7 19 successor legislation.

Allocates \$2,300,000 of the Public Health appropriation for Medicaid graduate medical education efforts as described in 2025 Iowa Acts, [House File 972](#) (Rural Health Care Bill).

DETAIL: This is a new allocation for FY 2026. The Bill repealed multiple residency and fellowship programs including the Health Care Workforce Support Initiative, the Medical Residency Training State Matching Grants Program, the Nurse Residency State Matching Grants Program, the Family Medicine Obstetrics Fellowship Program, and the Psychiatry Residency and Fellowship Program. The repealed programs are being replaced with Medicaid graduate medical education efforts.

7 20 5. The university of Iowa hospitals and clinics under
7 21 the control of the state board of regents shall not receive
7 22 indirect costs from the moneys appropriated in this section.
7 23 The university of Iowa hospitals and clinics billings to the
7 24 department shall be, at a minimum, on a quarterly basis.

Prohibits the University of Iowa Hospitals and Clinics (UIHC) from receiving indirect cost reimbursement from General Fund appropriations to the HHS. Requires the UIHC to submit billings to the HHS on no less than a quarterly basis.

7 25 DIVISION V

7 26 COMMUNITY ACCESS AND ELIGIBILITY — FY 2025-2026

7 27 Sec. 6. DEPARTMENT OF HEALTH AND HUMAN SERVICES — COMMUNITY
 7 28 ACCESS AND ELIGIBILITY. There is appropriated from the
 7 29 general fund of the state to the department of health and human
 7 30 services for the fiscal year beginning July 1, 2025, and ending
 7 31 June 30, 2026, the following amount, or so much thereof as is
 7 32 necessary, to be used for the purposes designated:
 7 33 To be used for salaries, support, maintenance, and
 7 34 miscellaneous purposes and for family investment program (FIP)
 7 35 assistance in accordance with chapter 239B, and for other costs

8 1	associated with providing needs-based benefits or assistance	
8 2	including but not limited to maternal and child health, oral	
8 3	health, obesity prevention, the promoting independence and	
8 4	self-sufficiency through employment, job opportunities and the	
8 5	basic skills (PROMISE JOBS) program, supplemental nutrition	
8 6	assistance program (SNAP) employment and training, the FIP	
8 7	diversion program, family planning, rent reimbursement,	
8 8	and eligibility determinations for medical assistance, food	
8 9	assistance, and the children’s health insurance program, and	
8 10	for not more than the following full-time equivalent positions:	
8 11	..... \$	68,542,456
8 12	..... FTEs	870.40

General Fund appropriation to the HHS — Community Access and Eligibility for FY 2026.

DETAIL: This is an increase of \$498,512 compared to estimated net FY 2025 for general operating expenses. Excluding federally funded FTE positions, this is a decrease of 77.60 FTE positions compared to the previously authorized amount in 2024 Iowa Acts, [House File 2698](#) (FY 2025 Health and Human Services Appropriations Act). This decrease in FTE positions includes:

- A decrease of 62.60 FTE positions to move staff in the Family and Preventive Health Bureau to the appropriation for Public Health.
- A decrease of 15.00 FTE positions to move child care registration staff to the appropriation for Child Care Assistance.

The Division of Community Access and Eligibility is the entity responsible for the determination of eligibility for needs-based benefits and assistance programs under the authority of the HHS.

8 13 1. Of the child support collections assigned under FIP,
 8 14 the federal share of the child support collections shall be
 8 15 credited to the child support services appropriation made in
 8 16 this division of this Act. Of the remainder of the child
 8 17 support collections assigned under FIP, a portion shall be
 8 18 credited to community access and eligibility, and the remaining
 8 19 moneys may be used to increase recoveries, to sustain cash flow
 8 20 in the collection services center refund account as provided in
 8 21 section 252B.13A, or for technology needs. If child support
 8 22 collections assigned under FIP are greater than estimated or
 8 23 are otherwise determined not to be required for maintenance of
 8 24 efforts, the state share of either amount is appropriated to
 8 25 the department for child support services as described in this
 8 26 Act, or may be transferred to or retained in the collection
 8 27 services center refund account.

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

8 28 2. Of the moneys appropriated in this section, \$3,075,000
 8 29 shall be used for continuation of the department’s initiative

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

8 30 to provide for adequate developmental surveillance and
 8 31 screening during a child's first five years. The moneys shall
 8 32 be used first to fully fund the current participating counties
 8 33 to ensure that those counties are fully operational, with
 8 34 the remaining moneys to be used for expanding participation
 8 35 to additional counties. Full implementation and expansion
 9 1 shall include enhancing the scope of the initiative through
 9 2 collaboration with child health specialty clinics to promote
 9 3 the use of developmental surveillance and screening to
 9 4 support healthy child development through early identification
 9 5 and response to both biomedical and social determinants of
 9 6 healthy development by providing practitioner consultation
 9 7 and continuous improvement through training and education,
 9 8 particularly for children with behavioral conditions and
 9 9 needs. The department shall also collaborate with the Medicaid
 9 10 program and child health specialty clinics to assist in
 9 11 coordinating the activities of the first five initiative into
 9 12 the establishment of patient-centered medical homes developed
 9 13 to improve health quality and population health while reducing
 9 14 health care costs. To the maximum extent possible, moneys
 9 15 allocated in this subsection shall be utilized as matching
 9 16 moneys for Medicaid program reimbursement.

9 17 3. Of the moneys appropriated in this section, \$1,145,102
 9 18 is allocated to the Iowa commission on volunteer service for
 9 19 programs and grants.

9 20 4. The university of Iowa hospitals and clinics under
 9 21 the control of the state board of regents shall not receive
 9 22 indirect costs from the moneys appropriated in this section.
 9 23 The university of Iowa hospitals and clinics billings to the
 9 24 department shall be, at a minimum, on a quarterly basis.

9 25 CHILD SUPPORT SERVICES

9 26 Sec. 7. CHILD SUPPORT SERVICES. There is appropriated from
 9 27 the general fund of the state to the department of health and
 9 28 human services for the fiscal year beginning July 1, 2025, and
 9 29 ending June 30, 2026, the following amount, or so much thereof
 9 30 as is necessary, to be used for the purposes designated:

DETAIL: This is no change in funding compared to the estimated net FY 2025 allocation. This is a public-private mental development initiative that partners primary care and public health services in Iowa to enhance high-quality well-child care. The First Five Model supports health providers in the early detection of socioemotional delays, developmental delays, and family risk-related factors in children from birth to age five. The Initiative then coordinates referrals, interventions, and follow-ups.

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

DETAIL: This is no change in funding compared to the estimated net FY 2025 allocation.

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

General Fund appropriation to the HHS — Child Support Services for FY 2026.

DETAIL: This is an increase of \$209,832 compared to estimated net FY 2025 for general operating expenses. Excluding federally funded

9 31 For child support services, including salaries, support,
 9 32 maintenance, and miscellaneous purposes, and for not more than
 9 33 the following full-time equivalent positions:
 9 34 \$ 15,644,114
 9 35 FTEs 464.00

FTE positions, this is no change in FTE positions compared to the previously authorized amount in 2024 Iowa Acts, [House File 2698](#) (FY 2025 Health and Human Services Appropriations Act).

10 1 1. Federal access and visitation grant moneys shall be used
 10 2 for services designed to increase compliance with the child
 10 3 access provisions of court orders, including but not limited to
 10 4 neutral visitation sites and mediation services.

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

10 5 2. The appropriation made to the department for child
 10 6 support services may be used throughout the fiscal year in the
 10 7 manner necessary for purposes of cash flow management, and for
 10 8 cash flow management purposes the department may temporarily
 10 9 draw more than the amount appropriated provided the amount
 10 10 appropriated is not exceeded at the close of the fiscal year.

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

10 11 TEMPORARY ASSISTANCE FOR NEEDY FAMILIES BLOCK GRANT

10 12 Sec. 8. TEMPORARY ASSISTANCE FOR NEEDY FAMILIES BLOCK
 10 13 GRANT. There is appropriated from the special fund created in
 10 14 section 8.41 to the department of health and human services
 10 15 for the fiscal year beginning July 1, 2025, and ending June
 10 16 30, 2026, from moneys received under the federal temporary
 10 17 assistance for needy families (TANF) block grant pursuant
 10 18 to the federal Personal Responsibility and Work Opportunity
 10 19 Reconciliation Act of 1996, Pub.L. No.104-193, and successor
 10 20 legislation, including any TANF block grant moneys received in
 10 21 any prior fiscal year that were deposited in the special fund
 10 22 and remain unencumbered or unobligated on June 30, 2025, the
 10 23 following amounts, or so much thereof as is necessary, to be
 10 24 used for the purposes designated:

Appropriates a total of \$158,980,383 from the Temporary Assistance for Needy Families (TANF) Federal Block Grant Fund appropriation for FY 2026.

DETAIL: This is an increase of \$15,000,000 compared to estimated net FY 2025. The federal government implemented Federal Welfare Reform on August 22, 1996. Reform eliminated Aid to Families with Dependent Children (AFDC), ending federal entitlement and creating a flexible funding source for states to use in helping needy families achieve self-sufficiency. Iowa's annual TANF award is \$131,524,959; however, federal law reduces the annual award by \$434,032 and reserves those funds for research and evaluation projects. In addition, \$582,859 is allocated to Native American tribes.

10 25 1. For community access and eligibility:
 10 26 \$ 12,988,627

Appropriates funds from the TANF Block Grant for community access and eligibility.

DETAIL: This is no change in funding compared to estimated net FY 2025. In 2024 Iowa Acts, [House File 2698](#) (FY 2025 Health and Human Services Appropriations Act), this appropriation was called General Transfer.

10 27 2. For community access and eligibility to provide
 10 28 pregnancy prevention grants on the condition that family
 10 29 planning services are funded:
 10 30 \$ 1,913,203

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

DETAIL: This is no change in funding compared to estimated net FY 2025.

10 31 Pregnancy prevention grants shall be awarded to programs
 10 32 in existence on or before July 1, 2025, if the programs have
 10 33 demonstrated positive outcomes. Grants shall be awarded
 10 34 to pregnancy prevention programs developed after July 1,
 10 35 2025, if the programs are based on existing models that have
 11 1 demonstrated positive outcomes. Grants shall comply with the
 11 2 requirements provided in 1997 Iowa Acts, chapter 208, section
 11 3 14, subsections 1 and 2, including the requirement that a
 11 4 program awarded a grant must emphasize sexual abstinence.
 11 5 Priority in the awarding of grants shall be given to programs
 11 6 that serve areas of the state which demonstrate the highest
 11 7 percentage of unplanned pregnancies of females of childbearing
 11 8 age within the geographic area to be served by the grant.

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

11 9 3. To meet one of the four purposes of TANF as specified
 11 10 in 45 C.F.R. §260.20, including by modernizing the program
 11 11 to promote economic mobility and self-sufficiency, ensuring
 11 12 that families are able to overcome benefit cliffs, encouraging
 11 13 healthy families, and streamlining service delivery to reduce
 11 14 duplication:
 11 15 \$ 25,000,000

Appropriates funds from the TANF Block Grant to promote economic mobility and self-sufficiency, ensure that families are able to overcome benefit cliffs, encourage healthy families, and streamline service delivery.

DETAIL: This is an increase of \$20,000,000 compared to estimated net FY 2025. In 2024 Iowa Acts, [House File 2698](#) (FY 2025 Health and Human Services Appropriations Act), this appropriation was called Community Access and Eligibility.

11 16 4. For early intervention and supports for child
 11 17 abuse prevention grants and the family development and
 11 18 self-sufficiency (FaDSS) grant program in accordance with
 11 19 section 216A.107:
 11 20 \$ 3,013,980

Appropriates funds from the TANF Block Grant for early intervention and supports for child abuse prevention grants and the Family Development and Self-Sufficiency (FaDSS) Grant Program.

DETAIL: This is a new appropriation for FY 2026. Due to organizational changes within the TANF Block Grant, appropriations from FY 2025 have been restructured. The new FY 2026 appropriation for Early Intervention and Supports is comprised of moneys formerly appropriated to Child Abuse Prevention and FaDSS. This restructured appropriation represents no change in funding compared to estimated net FY 2025.

<p>11 21 5. For accountability, compliance, program integrity, 11 22 technology needs, and other resources necessary to meet 11 23 federal and state reporting, tracking, and case management 11 24 requirements, and other departmental needs: 11 25 \$ 3,533,647</p>	<p>Appropriates funds from the TANF Block Grant for administration and compliance for federal and State reporting, tracking, and case management technology and resource needs.</p> <p>DETAIL: This is no change in funding compared to estimated net FY 2025.</p>
<p>11 26 6. For state child care assistance: 11 27 \$ 47,166,826</p>	<p>Appropriates funds from the TANF Block Grant to Child Care Assistance (CCA).</p> <p>DETAIL: This is no change in funding compared to estimated net FY 2025.</p>
<p>11 28 7. For child protective services: 11 29 \$ 65,364,100</p>	<p>Appropriates funds from the TANF Block Grant to Child Protective Services.</p> <p>DETAIL: This is an increase of \$3,000,000 compared to estimated net FY 2025.</p>
<p>11 30 DIVISION VI 11 31 MEDICAL ASSISTANCE PROGRAM — STATE SUPPLEMENTARY ASSISTANCE 11 32 HEALTHY AND WELL KIDS IN IOWA PROGRAM AND OTHER HEALTH-RELATED 11 33 PROGRAMS — FY 2025-2026</p>	
<p>11 34 Sec. 9. MEDICAL ASSISTANCE PROGRAM, STATE SUPPLEMENTARY 11 35 ASSISTANCE, AND HEALTHY AND WELL KIDS IN IOWA PROGRAM. There 12 1 is appropriated from the general fund of the state to the 12 2 department of health and human services for the fiscal year 12 3 beginning July 1, 2025, and ending June 30, 2026, the following 12 4 amount, or so much thereof as is necessary, to be used for the 12 5 purposes designated: 12 6 For medical assistance program reimbursement and associated 12 7 costs as specifically provided in the reimbursement 12 8 methodologies in effect on June 30, 2025, except as otherwise 12 9 expressly authorized by law, consistent with options under 12 10 federal law and regulations, and contingent upon receipt of 12 11 approval from the office of the governor of reimbursement for 12 12 each abortion performed under the medical assistance program; 12 13 for the state supplementary assistance program; for the health 12 14 insurance premium payment program; and for maintenance of</p>	<p>General Fund appropriation to the HHS for the Medical Assistance (Medicaid) Program, State Supplementary Assistance (SSA), and the Healthy and Well Kids in Iowa (Hawki) Program for FY 2026.</p> <p>DETAIL: This is a net increase of \$252,684,170 compared to estimated net FY 2025. The changes include:</p> <ul style="list-style-type: none"> • An increase of \$210,503,452 for the expected Medicaid shortfall in FY 2026. • An increase of \$20,000,000 for nursing facility provider reimbursement rate rebasing. • An increase of \$19,943,901 for an expected Hawki shortfall in FY 2026. • An increase of \$3,050,000 for intermittent community-based services. • An increase of \$2,136,304 for a dental provider rate adjustment. • An increase of \$420,000 for maternal health-related provider

12 15 the healthy and well kids in Iowa (Hawki) program pursuant
 12 16 to chapter 514I, including supplemental dental services,
 12 17 for receipt of federal financial participation under Tit.
 12 18 XXI of the federal Social Security Act, which creates the
 12 19 children's health insurance program; and for other specified
 12 20 health-related programs:
 12 21 \$1,903,550,706

- rate adjustments.
- An increase of \$330,513 for a personal needs allowance increase.
 - An increase of \$100,000 for a prosthetics rate increase.
 - A decrease of \$800,000 for nursing facility renovation and construction.
 - A decrease of \$3,000,000 due to an increased federal reimbursement rate for certified community behavioral health clinics.

12 22 1. Of the moneys appropriated in this section,
 12 23 \$1,837,804,073 is allocated for medical assistance program
 12 24 reimbursement and associated costs.

Allocates \$1,837,804,073 for the Medicaid Program.
 DETAIL: This is an increase of \$232,740,269 compared to estimated net FY 2025.

12 25 a. Of the moneys allocated in this subsection, \$3,383,880
 12 26 shall be used for program administration, outreach, and
 12 27 enrollment activities of the state family planning services
 12 28 program pursuant to section 217.41B, and of this amount, the
 12 29 department may use \$200,000 for administrative expenses.

Allocates \$3,383,880 of the funds appropriated for Medicaid to administer the State Family Planning Services Program. Permits \$200,000 to be used for administrative expenses.
 DETAIL: This is no change in funding compared to the estimated net FY 2025 allocation.

12 30 b. Of the moneys allocated in this subsection, \$3,050,000
 12 31 shall be used to expand the capacity of intermittent
 12 32 community-based services that allow an individual to remain
 12 33 in the community and that provide support to the individual,
 12 34 including employment services, hourly supported community
 12 35 living services, respite services, and day habilitation
 13 1 services.

Allocates \$3,050,000 of the funds appropriated for Medicaid to expand the capacity of intermittent community-based services.
 DETAIL: This is a new allocation for FY 2026.

13 2 2. Iowans support reducing the number of abortions
 13 3 performed in our state. Moneys appropriated under this section
 13 4 shall not be used for abortions, unless otherwise authorized
 13 5 under this section.

Prohibits moneys appropriated for Medical Assistance from being used for abortions, unless otherwise authorized under this Section.

13 6 3. The provisions of this section relating to abortions
 13 7 shall also apply to the Iowa health and wellness plan created
 13 8 pursuant to chapter 249N.

Specifies that the policy on abortion also applies to the Iowa Health and Wellness Plan.

13 9 4. Of the moneys appropriated in this section, \$4,479,762 is
 13 10 allocated for the state supplementary assistance program.

Allocates \$4,479,762 of the funds appropriated for Medicaid for the SSA Program.

DETAIL: This is no change in funding compared to the estimated net FY 2025 allocation.

13 11 5. Of the moneys appropriated in this section, \$61,266,871
13 12 is allocated for maintenance of the Hawki program pursuant
13 13 to chapter 514I, including supplemental dental services, for
13 14 receipt of federal financial participation under Tit.XXI of
13 15 the federal Social Security Act, which creates the children's
13 16 health insurance program.

Allocates \$61,266,871 of the funds appropriated for Medicaid for the Children's Health Insurance Program (CHIP), also known as the Hawki Program.

DETAIL: This is an increase of \$19,943,901 compared to the estimated net FY 2025 allocation due to an expected shortfall in FY 2026.

13 17 HEALTH PROGRAM OPERATIONS

13 18 Sec. 10. HEALTH PROGRAM OPERATIONS. There is appropriated
13 19 from the general fund of the state to the department of health
13 20 and human services for the fiscal year beginning July 1,
13 21 2025, and ending June 30, 2026, the following amount, or so
13 22 much thereof as is necessary, to be used for the purposes
13 23 designated:

General Fund appropriation to the HHS — Health Program Operations for FY 2026.

DETAIL: This is an increase of \$75,202 in funding compared to estimated net FY 2025 for general operating expenses. Excluding federally funded FTE positions, this is an increase of 1.00 FTE position compared to the previously authorized amount in 2024 Iowa Acts, [House File 2698](#) (FY 2025 Health and Human Services Appropriations Act), due to the restructuring of FTE positions within the HHS.

13 24 For health program operations, and the autism support
13 25 program under section 225D.2, and for not more than the
13 26 following full-time equivalent positions:
13 27 \$ 39,672,433
13 28 FTEs 82.00

13 29 1. The department of inspections, appeals, and licensing
13 30 shall provide all state matching moneys for survey and
13 31 certification activities performed by the department of
13 32 inspections, appeals, and licensing. The department of health
13 33 and human services shall be solely responsible for distributing
13 34 the federal matching moneys for such activities.

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

14 35 2. Of the moneys appropriated in this section, a sufficient
14 1 amount shall be allocated for the administration of the health
14 2 insurance premium payment program, including salaries, support,
14 3 maintenance, and miscellaneous purposes.

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

14 4 3. Of the moneys appropriated in this section, \$750,000
14 5 shall be allocated for a nonprofit organization that provides
14 6 access to emergency poison information and treatment. Pursuant

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

DETAIL: This is no change in funding compared to the estimated net FY 2025 allocation. Requires the moneys to be used by a nonprofit

14 7 to the directive under 2014 Iowa Acts, chapter 1140, section
 14 8 102, the federal matching moneys available to the nonprofit
 14 9 organization from the department under the federal Children’s
 14 10 Health Insurance Program Reauthorization Act of 2009 shall be
 14 11 subject to the federal administrative cap rule of 10 percent
 14 12 applicable to moneys provided under Tit.XXI of the federal
 14 13 Social Security Act and shall be included in the department’s
 14 14 calculations of the cap.

organization to provide access to emergency room poison information and treatment. Requires the federal matching moneys to be subject to the cap rule of 10.00% of applicable moneys to the federal Social Security cap and will be included in the HHS calculations of the cap.

14 15 4. Unless otherwise provided by law, if a contract for
 14 16 services provided under this section initially entered into
 14 17 during the fiscal year beginning July 1, 2025, and ending
 14 18 June 30, 2026, provides for an annual increase of the cost of
 14 19 services provided under the contract, the annual increase shall
 14 20 not exceed the amount by which the consumer price index for
 14 21 all urban consumers increased during the immediately preceding
 14 22 calendar year. This subsection shall not affect a contract
 14 23 entered into on or before June 30, 2025, that is for a term of
 14 24 more than one year.

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

DETAIL: The Consumer Price Index for all urban consumers rose 2.89% in calendar year 2024.

14 25 HEALTH CARE ACCOUNTS AND FUNDS

14 26 Sec. 11. PHARMACEUTICAL SETTLEMENT ACCOUNT — DEPARTMENT
 14 27 OF HEALTH AND HUMAN SERVICES. There is appropriated from the
 14 28 pharmaceutical settlement account created in section 249A.33 to
 14 29 the department of health and human services for the fiscal year
 14 30 beginning July 1, 2025, and ending June 30, 2026, the following
 14 31 amount, or so much thereof as is necessary, to be used for the
 14 32 purposes designated:

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

DETAIL: This is no change in funding compared to estimated net FY 2025.

14 33 Notwithstanding any provision of law to the contrary, to
 14 34 supplement the appropriation made in this Act from the general
 14 35 fund of the state for health program operations under the
 15 1 medical assistance program for the same fiscal year:
 15 2 \$ 234,193

15 3 Sec. 12. QUALITY ASSURANCE TRUST FUND — DEPARTMENT OF
 15 4 HEALTH AND HUMAN SERVICES. Notwithstanding any provision of
 15 5 law to the contrary, and subject to the availability of moneys,
 15 6 there is appropriated from the quality assurance trust fund
 15 7 created in section 249L.4 to the department of health and human
 15 8 services for the fiscal year beginning July 1, 2025, and ending
 15 9 June 30, 2026, the following amount, or so much thereof as is

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

DETAIL: This is no change in funding compared to estimated net FY 2025.

15 10 necessary, for the purposes designated:
 15 11 To supplement the appropriation made in this Act from the
 15 12 general fund of the state to the department of health and human
 15 13 services for medical assistance for the same fiscal year:
 15 14 \$ 111,216,205

15 15 Sec. 13. HOSPITAL HEALTH CARE ACCESS TRUST FUND —
 15 16 DEPARTMENT OF HEALTH AND HUMAN SERVICES. Notwithstanding
 15 17 any provision of law to the contrary, and subject to the
 15 18 availability of moneys, there is appropriated from the hospital
 15 19 health care access trust fund created in section 249M.4 to the
 15 20 department of health and human services for the fiscal year
 15 21 beginning July 1, 2025, and ending June 30, 2026, the following
 15 22 amount, or so much thereof as is necessary, for the purposes
 15 23 designated:
 15 24 To supplement the appropriation made in this Act from the
 15 25 general fund of the state to the department of health and human
 15 26 services for medical assistance for the same fiscal year:
 15 27 \$ 33,920,554

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

DETAIL: This is no change in funding compared to estimated net FY 2025.

15 28 SEX REASSIGNMENT SURGERIES OR ASSOCIATED PROCEDURES

15 29 Sec. 14. NEW SECTION 249A.14 SEX REASSIGNMENT SURGERIES OR
 15 30 ASSOCIATED PROCEDURES — REIMBURSEMENT PROHIBITED.
 15 31 1. Moneys appropriated from the general fund of the state
 15 32 to the department for the medical assistance program shall
 15 33 not be used for reimbursement for sex reassignment surgery
 15 34 or associated procedures, including hormone therapy or other
 15 35 medical interventions intended to alter primary or secondary
 16 1 sex characteristics related to an individual's gender dysphoria
 16 2 diagnosis.
 16 3 2. This section shall not be construed to prohibit Medicaid
 16 4 program reimbursement for services not described under
 16 5 subsection 1 that are otherwise covered under the Medicaid
 16 6 program.
 16 7 3. The department of health and human services shall adopt
 16 8 rules pursuant to chapter 17A to administer this section.

Prohibits FY 2026 moneys allocated for Medicaid from being used for reimbursement for sex reassignment surgery or associated procedures, including hormone therapy or other medical interventions intended to alter primary or secondary sex characteristics related to an individual's gender dysphoria diagnosis. Specifies that the Section does not prohibit Medicaid reimbursement for services not described in the Section that are otherwise covered under Medicaid. Requires the HHS to adopt administrative rules to administer this Section.

16 9 REIMBURSEMENT RATES

16 10 Sec. 15. REIMBURSEMENT RATES.
 16 11 1. Reimbursement for medical assistance, state

Requires that reimbursement for Medical Assistance, SSA, and social service providers and services remain at the reimbursement rate in

16 12 supplementary assistance, and social service providers and
 16 13 services reimbursed under the purview of the department of
 16 14 health and human services shall remain at the reimbursement
 16 15 rate in effect on June 30, 2025, or shall be determined
 16 16 pursuant to the reimbursement methodology in effect on June 30,
 16 17 2025, with the exception of the following:
 16 18 a. If reimbursement is otherwise negotiated by contract or
 16 19 pursuant to an updated fee schedule.
 16 20 b. As otherwise provided in this section of this Act.

effect of June 30, 2025, or be determined pursuant to the reimbursement methodology in effect on June 30, 2025, unless otherwise negotiated by contract or provided in this Section.

16 21 2. Of the moneys appropriated for medical assistance
 16 22 program reimbursement and associated costs as specifically
 16 23 provided in the reimbursement methodologies June 30, 2025, the
 16 24 following amounts, or so much thereof as is necessary, are
 16 25 allocated to the department of health and human services to be
 16 26 used for the following purposes:

Requires the HHS to rebase case-mix nursing facility reimbursement rates for FY 2026 using the Medicaid cost reports on file for the period ending December 31, 2024, within State funding, including no more than \$20,000,000 from the allocation for Medicaid. The HHS is required to calculate each nursing facility's case-mix index for FY 2025 using weighting based on the current patient-driven payment model schedule.

16 27 a. (1) Notwithstanding any provision of law to the
 16 28 contrary, for the fiscal year beginning July 1, 2025, and
 16 29 ending June 30, 2026, the department of health and human
 16 30 services shall rebase case-mix nursing facility rates beginning
 16 31 July 1, 2025, using the Medicaid cost reports on file for
 16 32 the period ending December 31, 2024, to the extent possible
 16 33 within state funding, including no more than \$20,000,000
 16 34 from the allocation provided for medical assistance program
 16 35 reimbursement and associated costs.

17 1 (2) The department of health and human services shall
 17 2 calculate each nursing facility's case-mix index for the period
 17 3 beginning July 1, 2024, using weighting based on the current
 17 4 patient-driven payment model schedule. Rosters shall be
 17 5 made to show a separate calculation to determine the average
 17 6 case-mix index for a nursing-facility-wide case-mix index, and
 17 7 a case-mix index for the residents of a nursing facility who
 17 8 are Medicaid recipients using all minimum data set reports by
 17 9 the nursing facility for the previous semiannual period using a
 17 10 day weighted calculation.

17 11 b. For the fiscal year beginning July 1, 2025, \$2,136,304
 17 12 shall be used to increase to the extent possible reimbursement
 17 13 rates for dentists, excluding orthodontic services, compared to
 17 14 rates in effect on June 30, 2025.

Requires \$2,136,304 from the Medicaid allocation in FY 2026 to be used to increase Medicaid reimbursement rates for dentists.

DETAIL: This is a new allocation for FY 2026.

<p>17 15 c. For the fiscal year beginning July 1, 2025, \$420,000 17 16 shall be used to increase to the extent possible reimbursement 17 17 rates for maternal health providers compared to the rates in 17 18 effect on June 30, 2025.</p>	<p>Requires \$420,000 from the Medicaid allocation in FY 2026 to be used to increase Medicaid reimbursement rates for maternal health providers.</p> <p>DETAIL: This is a new allocation for FY 2026.</p>
<p>17 19 d. For the fiscal year beginning July 1, 2025, \$100,000 17 20 shall be used to increase to the extent possible reimbursement 17 21 rates for prosthetics compared to rates in effect on June 30, 17 22 2025.</p>	<p>Requires \$100,000 from the Medicaid allocation in FY 2026 to be used to increase Medicaid reimbursement rates for prosthetics.</p> <p>DETAIL: This is a new allocation for FY 2026.</p>
<p>17 23 3. For the fiscal year beginning July 1, 2025, reimbursement 17 24 rates for home health agencies shall continue to be based 17 25 on the Medicare low utilization payment adjustment (LUPA) 17 26 methodology with state geographic wage adjustments, and shall 17 27 be adjusted to increase the rates to the extent possible.</p>	<p>Requires reimbursement rates for home health agencies to continue to be based on the Medicare Low Utilization Payment Adjustment (LUPA) methodology with State geographic wage adjustments and to be adjusted to increase the reimbursement rates to the extent possible, beginning July 1, 2025.</p>
<p>17 28 4. For the fiscal year beginning July 1, 2026, and for 17 29 each fiscal year thereafter, the department shall review the 17 30 reimbursement rates for home health agencies and pharmacy 17 31 dispensing fees.</p>	<p>Requires the HHS to review reimbursement rates for home health agencies and pharmacy dispensing fees, beginning July 1, 2025.</p>
<p>17 32 5. On or before December 15, 2025, the department shall 17 33 review the current rate limit calculation and application for 17 34 special population nursing facility rates.</p>	<p>Requires the HHS to review the current rate limit calculation and application for special population nursing facility rates on or before December 15, 2025.</p>
<p>18 1 NURSING FACILITIES — MEDICAID REIMBURSEMENT METHODOLOGY 18 2 PROPOSAL</p>	
<p>18 3 Sec. 16. NURSING FACILITIES — MEDICAID REIMBURSEMENT 18 4 METHODOLOGY PROPOSAL.</p>	<p>Requires the HHS, by April 1, 2026, to develop a reimbursement methodology proposal for reimbursement of nursing facilities under the Medicaid program that includes a base-rate payment component, a quality assurance assessment pass-through component, and a quality assurance add-on component, which includes a fixed fee payment and a quality-based payment. Provides that the reimbursement methodology proposal must include recommendations developed by the HHS, in consultation with stakeholders including the Iowa Health Care Association and LeadingAge Iowa, for specific metrics the HHS will use to determine whether a nursing facility is eligible to receive all or a portion of the quality-based payment portion of the reimbursement to the nursing facility. Prohibits the total State expenditures for</p>
<p>18 5 1. By April 1, 2026, the department of health and human 18 6 services shall develop a reimbursement methodology proposal for 18 7 reimbursement of nursing facilities under the Medicaid program 18 8 that includes all of the following:</p>	
<p>18 9 a. A base-rate payment component.</p>	
<p>18 10 b. A quality assurance assessment pass-through component.</p>	
<p>18 11 c. A quality assurance add-on component, which includes a 18 12 fixed fee payment and a quality-based payment.</p>	
<p>18 13 2. The reimbursement methodology proposal shall include 18 14 recommendations developed by the department of health and human</p>	

18 15 services, in consultation with stakeholders including the Iowa
 18 16 health care association and leadingage Iowa, for specific
 18 17 metrics the department of health and human services will use
 18 18 to determine whether a nursing facility is eligible to receive
 18 19 all or a portion of the quality-based payment portion of the
 18 20 reimbursement to the nursing facility.

18 21 3. The total state expenditures for reimbursement of
 18 22 nursing facilities under the Medicaid program using the
 18 23 reimbursement methodology proposed in this section shall
 18 24 not exceed the amount appropriated for this purpose for the
 18 25 applicable fiscal year.

18 26 NURSING FACILITY BED FORECASTING FORMULA

18 27 Sec. 17. NURSING FACILITY BED FORECASTING FORMULA.

18 28 1. On or before July 1, 2026, the department of health and
 18 29 human services, in consultation with appropriate stakeholders,
 18 30 shall develop and implement a nursing bed facility forecasting
 18 31 formula utilizing the recommendations for improvement to the
 18 32 nursing facility bed need formula developed by the workgroup
 18 33 convened pursuant to 2023 Iowa Acts, chapter 158, section 11,
 18 34 to ensure the availability of sufficient nursing facility beds
 18 35 to meet future demand for nursing facility beds.

19 1 2. The department of health and human services shall
 19 2 consider the forecasting formula developed and implemented
 19 3 under subsection 1 when completing the formal review of an
 19 4 application for a certificate of need under chapter 10A,
 19 5 subchapter VII, part 2.

19 6 PERSONAL NEEDS ALLOWANCE

19 7 Sec. 18. PERSONAL NEEDS ALLOWANCE. Of the moneys
 19 8 appropriated for the medical assistance program reimbursement
 19 9 and associated costs as specifically provided in the
 19 10 reimbursement methodologies in effect on June 30, 2025,
 19 11 \$330,513 shall be allocated to provide for the increased
 19 12 monthly personal needs allowance under section 249A.30A.

19 13 Sec. 19. Section 249A.30A, Code 2025, is amended to read as

reimbursement of nursing facilities under the Medicaid program using the reimbursement methodology proposed in this Section of the Bill from exceeding the amount appropriated for this purpose for the applicable fiscal year.

Requires the HHS, on or before July 1, 2026, to develop and implement a forecasting formula utilizing the recommendations for improvement to the nursing facility bed need formula developed by the workgroup convened pursuant to 2023 Iowa Acts, [chapter 158](#) (Medicaid, Liens, and Third-Party Recovery Act), to ensure a sufficient number of nursing facility beds are available to meet the future demand.

Requires the HHS to consider the forecasting formula to complete the formal review of an application for a certificate of need.

Requires \$330,513 from the Medicaid allocation in FY 2026 to be used to increase the monthly personal needs allowance for Medicaid beneficiaries who are residents of nursing facilities, intermediate care facilities (ICFs) for persons with an intellectual disability, ICFs for persons with mental illness, or psychiatric medical institutions for children (PMICs).

DETAIL: This is a new allocation for FY 2026.

CODE: Increases the personal needs allowance for residents of

19 14 follows:
 19 15 249A.30A MEDICAL ASSISTANCE — PERSONAL NEEDS ALLOWANCE.
 19 16 1. The personal needs allowance under the medical
 19 17 assistance program, which may be retained by a person who is a
 19 18 resident of a nursing facility, an intermediate care facility
 19 19 for persons with an intellectual disability, or an intermediate
 19 20 care facility for persons with mental illness, as defined in
 19 21 section 135C.1, or a person who is a resident of a psychiatric
 19 22 medical institution for children as defined in section 135H.1,
 19 23 shall be ~~fifty~~fifty-five dollars per month.
 19 24 2. A resident who has income of less than ~~fifty~~fifty-five
 19 25 dollars per month shall receive a supplement from the state in
 19 26 the amount necessary to receive a personal needs allowance of
 19 27 ~~fifty~~fifty-five dollars per month. The general assembly shall
 19 28 annually appropriate a sufficient amount from the general fund
 19 29 of the state to the department of health and human services for
 19 30 this purpose.

19 31 DIVISION VII
 19 32 FAMILY WELL-BEING AND PROTECTION — FY 2025-2026

19 33 STATE CHILD CARE ASSISTANCE

19 34 Sec. 20. STATE CHILD CARE ASSISTANCE. There is appropriated
 19 35 from the general fund of the state to the department of health
 20 1 and human services for the fiscal year beginning July 1,
 20 2 2025, and ending June 30, 2026, the following amount, or so
 20 3 much thereof as is necessary, to be used for the purposes
 20 4 designated:
 20 5 For state child care assistance in accordance with sections
 20 6 237A.13 and 237A.14, and for not more than the following
 20 7 full-time equivalent positions:
 20 8 \$ 34,983,000
 20 9 FTEs 53.00

20 10 1. If the appropriation made for purposes of the state child
 20 11 care assistance program for the fiscal year is determined to
 20 12 be insufficient, it is the intent of the general assembly to
 20 13 appropriate sufficient moneys for the fiscal year to avoid
 20 14 application of waiting list requirements.

20 15 2. A portion of the state match for the federal child care

certain facilities enrolled in Medicaid from \$50.00 to \$55.00.

FISCAL IMPACT: Increasing the personal needs allowance by \$5.00 is estimated to cost approximately \$758,000. Of the cost, the federal government will pay \$427,000 and the State will pay \$331,000. Additionally, the HHS may incur approximately \$80,000 in Information Technology (IT) costs.

General Fund appropriation to the HHS for CCA.

DETAIL: This is an increase of \$16,069 in funding compared to estimated net FY 2025 for general operating expenses. Excluding federally funded FTE positions, this is an increase of 15.00 FTE positions compared to the previously authorized amount in 2024 Iowa Acts, [House File 2698](#) (FY 2025 Health and Human Services Appropriations Act), to move child care registration staff from the Community Access and Eligibility appropriation.

Specifies that it is the intent of the General Assembly to provide sufficient funding for the State CCA Program in FY 2026 to avoid the establishment of a waiting list.

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

20 16 and development block grant shall be provided as necessary to
 20 17 meet federal matching moneys requirements through the state
 20 18 general fund appropriation made for child development grants
 20 19 and other programs for at-risk children in section 279.51.

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

20 20 EARLY INTERVENTION AND SUPPORTS

20 21 Sec. 21. EARLY INTERVENTION AND SUPPORTS. There is
 20 22 appropriated from the general fund of the state to the
 20 23 department of health and human services for the fiscal year
 20 24 beginning July 1, 2025, and ending June 30, 2026, the following
 20 25 amount, or so much thereof as is necessary, to be used for the
 20 26 purposes designated:

General Fund appropriation to the HHS — Early Intervention and Supports for FY 2026.

20 27 For promoting optimum health status for children and
 20 28 adolescents from birth through 21 years of age, and for
 20 29 families, and for not more than the following full-time
 20 30 equivalent positions:
 20 31 \$ 35,301,904
 20 32 FTEs 29.00

DETAIL: This is an increase of \$24,165 compared to estimated net FY 2025 for general operating expenses. Excluding federally funded FTE positions, this is an increase of 4.00 FTE positions compared to the previously authorized amount in 2024 Iowa Acts, [House File 2698](#) (FY 2025 Health and Human Services Appropriations Act) to move Criminal and Juvenile Justice Planning (CJJP) staff from the Accountability, Compliance, and Program Integrity appropriation.

20 33 1. Of the moneys appropriated in this section, not more
 20 34 than \$734,000 shall be used for the healthy opportunities for
 20 35 parents to experience success (HOPES)-healthy families Iowa
 21 1 (HFI) program established pursuant to section 135.106.

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

DETAIL: This is no change in funding compared to the estimated net FY 2025 allocation. This Program provides support for families through home visits that begin during pregnancy or at the birth of a child and can continue through age four.

21 2 2. Of the moneys appropriated in this section, \$4,313,854
 21 3 is allocated for the FaDSS grant program, and not more than 5
 21 4 percent of the moneys shall be used for administration of the
 21 5 grant program.

Allocates \$4,313,854 for the Family Development and Self-Sufficiency (FaDSS) Grant Program. Requires that a maximum of 5.00% (\$215,693) of the allocation be spent on administration of the Program.

DETAIL: This is no change in funding compared to the estimated net FY 2025 allocation.

21 6 3. Of the moneys appropriated in this section, \$29,256,799
 21 7 shall be deposited in the early childhood Iowa fund created in
 21 8 section 256I.11.

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

DETAIL: This is no change in funding compared to the estimated net FY 2025 allocation. The funds are distributed to local ECI Area Boards in addition to the following five allocations:

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

21 9 CHILD PROTECTIVE SERVICES

21 10 Sec. 22. CHILD PROTECTIVE SERVICES. There is appropriated
 21 11 from the general fund of the state to the department of health
 21 12 and human services for the fiscal year beginning July 1,
 21 13 2025, and ending June 30, 2026, the following amount, or so
 21 14 much thereof as is necessary, to be used for the purposes
 21 15 designated:
 21 16 For child, family, and adoption services, and for salaries,
 21 17 support, maintenance, and miscellaneous purposes, and for not
 21 18 more than the following full-time equivalent positions:
 21 19 \$ 165,558,031
 21 20 FTEs 977.00

General Fund appropriation to the HHS — Child Protective Services for FY 2026.

DETAIL: This is a net decrease of \$543,003 compared to estimated net FY 2025. Excluding federally funded FTE positions, this is no change in FTE positions compared to the previously authorized amount in 2024 Iowa Acts, [House File 2698](#) (FY 2025 Health and Human Services Appropriations Act). The changes in funding include:

- An increase of \$308,765 to increase foster care rates by 5.00%.
- An increase of \$148,232 to increase adoption subsidy rates by 5.00%.
- A decrease of \$1,000,000 for the More Options for Maternal Support (MOMS) Program.

21 21 1. Of the moneys appropriated in this section, \$1,717,000
 21 22 is allocated specifically for expenditure for the fiscal
 21 23 year beginning July 1, 2025, through the decategorization
 21 24 services funding pools and decategorization governance boards
 21 25 established pursuant to section 232.188.

Allocates \$1,717,000 for decategorization services funding pools and governance boards.

DETAIL: This is no change in funding compared to the estimated net FY 2025 allocation.

21 26 2. A portion of the moneys appropriated in this section
 21 27 may be used to provide other resources, based on client need,
 21 28 required to support family preservation, emergency client need,
 21 29 or family reunification efforts.

Permits funds to be used for emergency family assistance under certain conditions.

21 30 3. Of the moneys appropriated in this section, a sufficient
 21 31 amount is allocated for foster family care, group foster care

Allocates a sufficient amount to group foster care.

<p>21 32 maintenance and services, shelter care, child welfare emergency 21 33 services, qualified residential treatment programs, supervised 21 34 apartment living contracts, and for medical assistance program 21 35 reimbursement and associated costs.</p>	<p>DETAIL: In FY 2024, \$40,500,000 was allocated for group foster care.</p>
<p>22 1 4. Federal moneys received by the state during the fiscal 22 2 year beginning July 1, 2025, as the result of the expenditure 22 3 of state moneys appropriated during a previous state fiscal 22 4 year for a service or activity funded under this section, are 22 5 appropriated to the department to be used as additional moneys 22 6 for services and purposes provided for under this section. 22 7 Notwithstanding section 8.33, moneys appropriated under this 22 8 subsection that remain unencumbered or unobligated at the close 22 9 of the fiscal year shall not revert but shall remain available 22 10 for the purposes designated until the close of the succeeding 22 11 fiscal year.</p>	<p>Requires federal moneys received in FY 2026 because of the expenditure of State funds in a previous year to be used for Child Protective Services. Allows any unencumbered or unobligated funds to remain available for expenditure through FY 2027.</p>
<p>22 12 5. a. Of the moneys appropriated in this section, \$748,000 22 13 is allocated for the payment of the expenses of court-ordered 22 14 services provided to children who are under the supervision 22 15 of the department, which expenses are a charge upon the state 22 16 pursuant to section 232.141, subsection 4.</p>	<p>Allocates \$748,000 for court-ordered services provided to children who are under the supervision of the HHS.</p> <p>DETAIL: This is no change in funding compared to the estimated net FY 2025 allocation.</p>
<p>22 17 b. Notwithstanding chapter 232 or any other provision of 22 18 law to the contrary, a district or juvenile court shall not 22 19 order any service which is a charge upon the state pursuant to 22 20 section 232.141, subsection 4, if the moneys allocated under 22 21 paragraph "a" for court-ordered services are insufficient to 22 22 pay for the service.</p>	<p>Prohibits a district or juvenile court from ordering any service that is a charge to the State if there are insufficient funds to pay for the service.</p>
<p>22 23 6. Of the moneys appropriated in this section, \$1,658,000 22 24 shall be allocated for child protection centers located in Iowa 22 25 pursuant to the child protection center grant program under 22 26 section 135.118. The grant amounts under the program shall be 22 27 equalized so that each center receives a uniform base amount 22 28 of \$245,000, and the remaining moneys are awarded through a 22 29 funding formula based upon the volume of children served by a 22 30 center. To increase access to child protection center services 22 31 for children in rural areas, the funding formula for awarding 22 32 the remaining moneys shall provide for awarding an enhanced 22 33 amount to eligible grantees to develop and maintain satellite 22 34 centers in underserved regions of the state.</p>	<p>Requires \$1,658,000 to be used for the Child Protection Center (CPC) Grant Program. Each CPC will receive \$245,000, and the remaining funds will be distributed through a funding formula based on the volume of children served. Requires the funding formula to provide for the awarding of an enhanced amount to eligible grantees to develop and maintain satellite centers in underserved regions of the State.</p> <p>DETAIL: This is no change in funding compared to the estimated net FY 2025 allocation.</p>

<p>22 35 7. Of the moneys appropriated in this section, \$4,359,500 23 1 is allocated for the preparation for adult living program 23 2 established pursuant to section 234.46.</p>	<p>Allocates \$4,359,500 to the Preparation for Adult Living (PAL) Program.</p> <p>DETAIL: This is no change in funding compared to the estimated net FY 2025 allocation.</p>
<p>23 3 8. Of the moneys appropriated in this section, up to 23 4 \$227,000 shall be used for the public purpose of continuing a 23 5 grant to a nonprofit human services organization that provides 23 6 services to individuals and families in multiple locations in 23 7 southwest Iowa and Nebraska, for support of a project providing 23 8 immediate, sensitive support and forensic interviews, medical 23 9 exams, needs assessments, and referrals for victims of child 23 10 abuse and their nonoffending family members.</p>	<p>Allocates \$227,000 to Project Harmony for support of victims of child abuse and their nonoffending family members.</p> <p>DETAIL: This is no change in funding compared to the estimated net FY 2025 allocation.</p>
<p>23 11 9. Of the moneys appropriated in this section, a portion may 23 12 be used for family-centered services for purposes of complying 23 13 with the federal Family First Prevention Services Act of 2018, 23 14 Pub.L. No.115-123, and successor legislation.</p>	<p>Allows the HHS to use a portion of the funds allocated in this Section for family-centered services to comply with the federal Family First Prevention Services Act.</p>
<p>23 15 10. a. Of the moneys appropriated in this section, 23 16 \$39,823,955 is allocated for adoption subsidy payments and 23 17 related costs.</p>	<p>Allocates \$39,823,955 to the Adoption Subsidy Program.</p> <p>DETAIL: This allocation was previously an appropriation of \$40,883,507 for the Adoption Subsidy Program in FY 2024. 2024 Iowa Acts, House File 2698 (FY 2025 Health and Human Services Appropriations Act), specified that a sufficient amount was allocated to the Adoption Subsidy Program for FY 2025. The HHS allocated the same amount that was appropriated in FY 2024 (\$40,883,507) to the Program for FY 2025. The FY 2026 allocation is a decrease of \$1,059,552 compared to the estimated net FY 2025 allocation.</p>
<p>23 18 b. Of the moneys allocated in this subsection, \$148,232 23 19 shall be used to increase the adoption subsidy pursuant to 23 20 section 600.17 for a child adopted after July 1, 2025.</p>	<p>Requires \$148,232 of the moneys allocated to the Adoption Subsidy Program to be used to increase the adoption subsidy by 5.00% compared to the rates in effect on June 30, 2025, for a child adopted after July 1, 2025.</p> <p>DETAIL: This is no change in funding compared to the estimated net FY 2025 allocation.</p>
<p>23 21 c. Any moneys remaining after the allocations under 23 22 paragraphs "a" and "b" are designated and allocated as state</p>	<p>CODE: Directs the HHS to use the funds appropriated to the Adoption Subsidy Program for adoption subsidy payments and post-adoption</p>

<p>23 23 savings resulting from implementation of the federal Fostering 23 24 Connections to Success and Increasing Adoptions Act of 2008, 23 25 Pub.L. No.110-351, and successor legislation, as determined 23 26 in accordance with 42 U.S.C. §673(a)(8), and shall be used for 23 27 post-adoption services and for other purposes allowed under 23 28 those federal laws, Tit.IV-B or Tit.IV-E of the federal 23 29 Social Security Act.</p>	<p>services as allowed under Title IV-B and Title IV-E of the federal Social Security Act, due to the federal Fostering Connections to Success and Increasing Adoptions Act of 2008.</p>
<p>23 30 11. Of the moneys appropriated in this section, a sufficient 23 31 amount is allocated to support training needs for child welfare 23 32 providers and to address disproportionality within the child 23 33 welfare system.</p>	<p>Allocates a sufficient amount of moneys appropriated for Child Protective Services to support training and to address disproportionality within the child welfare system.</p>
<p>23 34 12. Of the moneys appropriated in this section, \$308,765 23 35 shall be allocated to increase the foster care reimbursement 24 1 rates pursuant to section 234.38, not to exceed the maximum 24 2 reimbursement rate established in section 234.38.</p>	<p>Allocates \$308,765 to increase foster care reimbursement rates by 5.00% over the rates in effect on June 30, 2025.</p>
<p>24 3 13. If a separate funding source is available that reduces 24 4 the need for state moneys within an allocation under this 24 5 section, the allocated state moneys may be redistributed to 24 6 other allocations under this section for the same fiscal year.</p>	<p>Specifies that if other funding is available, the allocations of State funds in this Section may be redistributed to other allocations for FY 2026.</p>
<p>24 7 Sec. 23. REIMBURSEMENT RATES — CHILD PROTECTIVE SERVICES.</p>	
<p>24 8 1. Of the moneys appropriated for child, family, and 24 9 adoption services, the following amounts, or so much thereof 24 10 as is necessary, are allocated to the department of health and 24 11 human services for the following purposes:</p>	
<p>24 12 a. For the fiscal year beginning July 1, 2025, \$3,245,594 24 13 shall be used to increase to the extent possible reimbursement 24 14 rates for qualified residential treatment program providers 24 15 compared to rates in effect June 30, 2025.</p>	<p>Allocates \$3,245,594 from the Child Protective Services appropriation in FY 2026 to increase reimbursement rates for Qualified Residential Treatment Program (QRTP) providers.</p> <p>DETAIL: This is a new allocation for FY 2026.</p>
<p>24 16 b. For the fiscal year beginning July 1, 2025, \$1,590,842</p>	<p>Allocates \$1,590,842 from the Child Protective Services appropriation</p>

24 17 shall be used to increase to the extent possible reimbursement
24 18 rates for shelter care providers compared to rates in effect
24 19 June 30, 2025.

in FY 2026 to increase reimbursement rates for shelter care providers.

DETAIL: This is a new allocation for FY 2026.

24 20 2. The department of health and human services, in
24 21 consultation with qualified residential treatment program
24 22 providers, shelter care providers, and representatives
24 23 of juvenile court services, shall develop a reimbursement
24 24 methodology for the fiscal year beginning July 1, 2026, for
24 25 reimbursement of qualified residential treatment program
24 26 providers and shelter care providers to improve service quality
24 27 and provide the appropriate level of care for a child.

Requires the HHS, in consultation with QRTP providers, shelter care providers, and representatives of Juvenile Court Services, to develop a reimbursement methodology for FY 2027 for reimbursement of QRTP providers and shelter care providers to improve service quality and provide the appropriate level of care for a child.

24 28 DIVISION VIII
24 29 STATE-OPERATED SPECIALTY CARE — FY 2025-2026

24 30 Sec. 24. STATE-OPERATED SPECIALTY CARE. There is
24 31 appropriated from the general fund of the state to the
24 32 department of health and human services for the fiscal year
24 33 beginning July 1, 2025, and ending June 30, 2026, the following
24 34 amount, or so much thereof as is necessary, to be used for the
24 35 purposes designated:

General Fund appropriation to the HHS — State-Operated Specialty Care for FY 2026.

DETAIL: This is an increase of \$2,337,379 compared to estimated net FY 2025. This includes:

25 1 For salaries, support, maintenance, and miscellaneous
25 2 purposes at institutions under the jurisdiction of the
25 3 department of health and human services, and for not more than
25 4 the following full-time equivalent positions:
25 5 \$ 102,343,507
25 6 FTEs 756.00

- An increase of \$1,191,962 for general operating expenses.
- An increase of \$1,145,417 to annualize staffing at the mental health institutes (MHIs) and the Civil Commitment Unit for Sexual Offenders (CCUSO).

Excluding federally funded FTE positions, this is no change in FTE positions compared to the previously authorized amount in 2024 Iowa Acts, [House File 2698](#) (FY 2025 Health and Human Services Appropriations Act).

25 7 1. The department shall utilize the moneys appropriated in
25 8 this section as necessary to maximize bed capacity and to most
25 9 effectively meet the needs of the individuals served.

Requires the HHS to utilize funds as necessary to maximize bed capacity and meet the needs of the individuals served.

25 10 2. Of the moneys appropriated in this section, the following
25 11 amounts are allocated to each institution as follows:

25 12 a. For the state mental health institute at Cherokee:
25 13 \$ 20,529,101

Allocates \$20,529,101 for the MHI at Cherokee.

			DETAIL: This is an increase of \$1,090,015 compared to estimated net FY 2025. Of this, \$159,608 is to annualize staffing and \$930,407 is for general operating expenses.
25 14	b. For the state mental health institute at Independence:		Allocates \$24,851,083 for the MHI at Independence.
25 15	.....	\$ 24,851,083	
			DETAIL: This is an increase of \$934,804 compared to estimated net FY 2025. Of this, \$41,550 is to annualize staffing and \$893,254 is for general operating expenses.
25 16	c. For the civil commitment unit for sexual offenders at		Allocates \$20,461,284 for the CCUSO at Cherokee.
25 17	Cherokee:		
25 18	.....	\$ 20,461,284	DETAIL: This is an increase of \$2,705,887 compared to estimated net FY 2025. Of this, \$944,259 is to annualize staffing and \$1,761,628 is for general operating expenses.
25 19	d. For the state resource center at Woodward:		Allocates \$14,433,872 for the State Resource Center at Woodward.
25 20	.....	\$ 14,433,872	DETAIL: This is an increase of \$415,155 compared to estimated net FY 2025 for general operating expenses.
25 21	e. For the state resource center at Glenwood:		Allocates \$1,590,130 for the State Resource Center at Glenwood.
25 22	.....	\$ 1,590,130	DETAIL: This is a decrease of \$3,665,002 compared to estimated net FY 2025 due to the closure of the Glenwood Resource Center. The State announced the closure of the Glenwood Resource Center in 2022, which was completed by the close of FY 2024. Allocated moneys are used to maintain the facilities at Glenwood.
25 23	f. For the state training school at Eldora:		Allocates \$20,478,037 for the State Training School at Eldora.
25 24	.....	\$ 20,478,037	DETAIL: This is an increase of \$856,520 compared to estimated net FY 2025 for general operating expenses.
25 25	DIVISION IX		
25 26	ADMINISTRATION AND COMPLIANCE — FY 2025-2026		
25 27	Sec. 25. ACCOUNTABILITY, COMPLIANCE, AND PROGRAM		General Fund appropriation to the HHS — Accountability, Compliance, and Program Integrity for FY 2026.
25 28	INTEGRITY. There is appropriated from the general fund of the		
25 29	state to the department of health and human services for the		

25 30 fiscal year beginning July 1, 2025, and ending June 30, 2026,
 25 31 the following amount, or so much thereof as is necessary, to be
 25 32 used for the purposes designated:
 25 33 For accountability, compliance, and program integrity,
 25 34 including salaries, support, maintenance, and miscellaneous
 25 35 purposes, and for not more than the following full-time
 26 1 equivalent positions:
 26 2 \$ 21,904,214
 26 3 FTEs 409.00

DETAIL: This is net decrease of \$452,384 compared to estimated net FY 2025. This includes a decrease of \$874,059 to align the Criminal Justice Planning research staff from the HHS Accountability, Compliance, and Program Integrity appropriation line item under the DOM Department Operations appropriation and an increase of \$421,675 for general operating expenses. Excluding federally funded FTE positions, this is a decrease of 14.00 FTE positions compared to the previously authorized amount in 2024 Iowa Acts, [House File 2698](#) (FY 2025 Health and Human Services Appropriations Act). The decrease in FTE positions includes:

- A decrease of 8.00 FTE positions to align the Criminal Justice Planning research staff from the HHS Accountability, Compliance, and Program Integrity appropriation line item under the DOM Department Operations appropriation.
- A decrease of 4.00 FTE positions to move CJJP staff to the HHS Early Intervention and Supports appropriation line item.
- A decrease of 2.00 FTE position due to the restructuring of FTE positions within the HHS.

26 4 1. Of the moneys appropriated in this section, \$200,000
 26 5 shall be transferred to and deposited in the Iowa ABLE savings
 26 6 plan trust administrative fund created in section 121.4, to be
 26 7 used for implementation and administration activities of the
 26 8 Iowa ABLE savings plan trust.

Transfers \$200,000 to the Treasurer of State to implement the Iowa Achieving a Better Life Experience (ABLE) Savings Plan Trust.

DETAIL: This is no change in funding compared to the estimated net FY 2025 transfer.

26 9 2. Of the moneys appropriated in this section, \$2,602,312
 26 10 shall be allocated for foster care review and the court
 26 11 appointed special advocate program, including for salaries,
 26 12 support, maintenance, and miscellaneous purposes.

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

DETAIL: This is no change in funding compared to the estimated net FY 2025 allocation. The State's Local Foster Care Review Boards and the CASA Program work to recruit, train, and support community volunteers through the State to represent the interests of abused and neglected children.

26 13 3. Of the moneys appropriated in this section, \$1,148,959
 26 14 shall be allocated for the office of long-term care ombudsman
 26 15 for salaries, support, administration, maintenance, and
 26 16 miscellaneous purposes.

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

DETAIL: This is no change in funding compared to the estimated net FY 2025 allocation.

26 17 DIVISION X

26 18 DEPARTMENT OF HEALTH AND HUMAN SERVICES TRANSFERS, CASH FLOW,
26 19 AND NONREVERSIONS — FY 2025-2026

26 20 Sec. 26. DEPARTMENT OF HEALTH AND HUMAN SERVICES TRANSFERS
26 21 AND CASH FLOW.

26 22 1. Notwithstanding any provision of law to the contrary,
26 23 the department of health and human services may transfer moneys
26 24 appropriated in this Act to support continuing alignment
26 25 efforts, to maximize federal support in accordance with the
26 26 department's federal costs allocation plan, and for resources
26 27 necessary to implement and administer the services for which
26 28 moneys are appropriated. The department shall report any
26 29 transfers made pursuant to this subsection to the general
26 30 assembly.

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

26 31 2. If, due to ongoing cost management efforts, the
26 32 appropriations under this Act for the Medicaid program
26 33 exceed the associated costs for the Medicaid program for the
26 34 fiscal year, the department may transfer any savings to the
26 35 appropriations made in this Act for health program operations,
27 1 or for accountability, compliance, and program integrity,
27 2 to defray the costs associated with ongoing cost management
27 3 efforts.

Specifies that if savings to the Medicaid Program for cost management efforts during FY 2026 exceed costs, the HHS may transfer any savings to the appropriations in this Bill to Health Program Operations, or for Accountability, Compliance, and Program Integrity, to defray the costs associated with implementation of cost management efforts.

27 4 3. Notwithstanding any provision of law to the contrary,
27 5 the department may transfer moneys appropriated under this Act
27 6 for child protective services to pay the nonfederal share costs
27 7 of services reimbursed under the medical assistance program,
27 8 state child care assistance program, or the family investment
27 9 program which are provided to children who would otherwise
27 10 receive services paid by the appropriation for child protective
27 11 services.

Permits the HHS to transfer funds appropriated to Child Protective Services to pay the nonfederal share of services reimbursed under Medicaid, the State CCA Program, or the Family Investment Program (FIP) for children who would otherwise receive services paid under the appropriation for Child Protective Services.

27 12 4. The department may transfer moneys from the temporary
27 13 assistance for needy families block grant to the federal social
27 14 services block grant appropriation, and to the child care and
27 15 development block grant appropriation, in accordance with
27 16 federal law.

Permits the HHS to transfer funds from the TANF Block Grant to the Federal Social Services Block Grant appropriation and the Child Care and Development Block Grant appropriation in accordance with federal law.

27 17 5. To the extent the department determines that moneys
27 18 appropriated under this Act, or allocated for a specific

Allows the HHS to use unencumbered and unobligated moneys for any other purpose for which the moneys appropriated may be used or

27 19 purpose under this Act, will remain unencumbered or unobligated
 27 20 at the close of the fiscal year, such unencumbered or
 27 21 unobligated moneys may be used in the same fiscal year for any
 27 22 other purpose for which the appropriated moneys may be used, or
 27 23 for any other allocation within the same appropriation.

for any other allocation within the same appropriation.

27 24 Sec. 27. DEPARTMENT OF HEALTH AND HUMAN SERVICES
 27 25 NONREVERSIONS.

27 26 1. Notwithstanding section 8.33, moneys appropriated under
 27 27 this Act from the general fund of the state and the temporary
 27 28 assistance for needy families block grant to the department of
 27 29 health and human services for the fiscal year beginning July 1,
 27 30 2025, and ending June 30, 2026, for the purposes of the FaDSS
 27 31 grant program that remain unencumbered or unobligated at the
 27 32 close of the fiscal year shall not revert, but shall remain
 27 33 available for expenditure for the purposes designated until the
 27 34 close of the succeeding fiscal year.

CODE: Allows any unencumbered or unobligated funds appropriated for the FaDSS Grant Program in FY 2026 to remain available for FY 2027.

27 35 2. Notwithstanding section 8.33, of the moneys appropriated
 28 1 under this Act from the general fund of the state, the quality
 28 2 assurance trust fund, and the hospital health care access trust
 28 3 fund to the department of health and human services for the
 28 4 fiscal year beginning July 1, 2025, and ending June 30, 2026,
 28 5 for the purposes of the medical assistance program, the amount
 28 6 in excess of actual expenditures for the medical assistance
 28 7 program that remains unencumbered or unobligated at the close
 28 8 of the fiscal year shall not revert, but shall remain available
 28 9 for expenditure for the medical assistance program until the
 28 10 close of the succeeding fiscal year.

CODE: Allows any unencumbered or unobligated funds appropriated from the General Fund, the QATF, and the HHCAT to the HHS in FY 2026 for the Medicaid Program to remain available for FY 2027.

28 11 3. Notwithstanding section 8.33, and notwithstanding the
 28 12 nonreversion amount limitation specified for state resource
 28 13 centers in section 222.92, subsection 4, moneys appropriated
 28 14 under this Act from the general fund of the state to the
 28 15 department of health and human services for the fiscal
 28 16 year beginning July 1, 2025, and ending June 30, 2026, for
 28 17 the purposes of state-operated specialty care that remain
 28 18 unencumbered or unobligated at the close of the fiscal year
 28 19 shall not revert, but shall remain available for expenditure
 28 20 for the purposes designated for subsequent fiscal years.

CODE: Allows any unencumbered or unobligated funds appropriated from the General Fund to the HHS for State-Operated Specialty Care in FY 2026 to remain available for subsequent fiscal years.

28 21 4. Notwithstanding section 8.33, moneys appropriated in
28 22 this Act from the general fund of the state to the department
28 23 of health and human services for the fiscal year beginning July
28 24 1, 2025, and ending June 30, 2026, for the Iowa commission
28 25 on volunteer service for programs and grants that remain
28 26 unencumbered or unobligated at the close of the fiscal year
28 27 shall not revert, but shall remain available for expenditure
28 28 for the purposes designated for subsequent fiscal years.

CODE: Allows any unencumbered or unobligated funds appropriated from the General Fund to the HHS for the Iowa Commission on Volunteer Services in FY 2026 to remain available for subsequent fiscal years.

28 29 5. Notwithstanding section 8.33, moneys appropriated under
28 30 this Act from the general fund of the state to the department
28 31 of health and human services for the fiscal year beginning July
28 32 1, 2025, and ending June 30, 2026, and allocated for rural
28 33 psychiatric residencies that remain unencumbered or unobligated
28 34 at the close of the fiscal year shall not revert, but shall
28 35 remain available for expenditure for the purposes designated
29 1 until the close of the succeeding fiscal year.

CODE: Allows any unencumbered or unobligated funds appropriated from the General Fund to the HHS and allocated for rural psychiatric residencies in FY 2026 to remain available for FY 2027.

29 2 6. Notwithstanding section 8.33, moneys appropriated
29 3 under this Act from the general fund of the state to the
29 4 department of health and human services for the fiscal
29 5 year beginning July 1, 2025, and ending June 30, 2026, and
29 6 allocated for adoption subsidy payments and related costs, or
29 7 for post-adoption services and related allowable purposes,
29 8 that remain unencumbered or unobligated at the close of the
29 9 fiscal year shall not revert, but shall remain available for
29 10 expenditure for the purposes designated until the close of the
29 11 succeeding fiscal year.

CODE: Allows any unencumbered or unobligated funds appropriated from the General Fund to the HHS and allocated for adoption subsidy payments or post-adoption services in FY 2026 to remain available for FY 2027.

29 12 7. Notwithstanding section 8.33, moneys appropriated under
29 13 this Act from the general fund of the state to the department
29 14 of health and human services for the fiscal year beginning July
29 15 1, 2025, and ending June 30, 2026, and allocated for child
29 16 protective services that remain unencumbered or unobligated at
29 17 the close of the fiscal year shall not revert but shall remain
29 18 available for expenditure for the purposes designated until the
29 19 close of the succeeding fiscal year.

CODE: Allows any unencumbered or unobligated funds appropriated from the General Fund to the HHS and allocated for Child Protective Services in FY 2026 to remain available for FY 2027.

29 20 DIVISION XI
29 21 DEPARTMENT OF HEALTH AND HUMAN SERVICES PRIOR APPROPRIATIONS
29 22 AND OTHER PROVISIONS

29 23 THRIVE IOWA PROGRAM CLOSED-LOOP REFERRAL SYSTEM

29 24 Sec. 28. 2024 Iowa Acts, chapter 1157, section 21,
 29 25 subsection 6, is amended to read as follows:
 29 26 6. To the extent the department determines that moneys
 29 27 appropriated under this 2024 Iowa Act will remain unencumbered
 29 28 or unobligated at the close of the fiscal year or that
 29 29 services will not be impacted, the department may utilize
 29 30 up to \$3,000,000 of such unencumbered or unobligated moneys
 29 31 appropriated to develop and support the thrive Iowa program,
 29 32 a closed-loop referral system utilizing a navigator model,
 29 33 that acts as the connection point to link lowans on an
 29 34 individualized path to prosperity and self-sufficiency
 29 35 to available resources in all sectors of the community.
 30 1 Notwithstanding section 8.33, any moneys utilized for this
 30 2 purpose shall not revert but shall remain available for
 30 3 expenditure for the purposes designated.

CODE: Allows funds appropriated in 2024 Iowa Acts, [House File 2698](#) (FY 2025 Health and Human Services Appropriations Act), for FY 2025 from the General Fund for the Thrive Iowa Program to remain available for expenditure.

30 4 COMMUNITY ACCESS AND ELIGIBILITY

30 5 Sec. 29. 2024 Iowa Acts, chapter 1157, section 22, is
 30 6 amended by adding the following new subsection:
 30 7 NEW SUBSECTION 7. Notwithstanding section 8.33, moneys
 30 8 appropriated under this 2024 Iowa Act from the general fund
 30 9 of the state to the department of health and human services
 30 10 for the fiscal year beginning July 1, 2024, and ending June
 30 11 30, 2025, for community access and eligibility that remain
 30 12 unencumbered or unobligated at the close of the fiscal year
 30 13 shall not revert but shall remain available for expenditure for
 30 14 the purposes designated, or are appropriated to the department
 30 15 for any purpose described in this division of this Act or to be
 30 16 used as necessary to enhance the department's accountability,
 30 17 compliance, program integrity, and efficiency, until the close
 30 18 of the succeeding fiscal year.

CODE: Allows any unencumbered or unobligated funds appropriated in 2024 Iowa Acts, [House File 2698](#) (FY 2025 Health and Human Services Appropriations Act), from the General Fund for Community Access and Eligibility in FY 2025 to remain available for expenditure until the close of FY 2026.

30 19 MORE OPTIONS FOR MATERNAL SUPPORT PROGRAM

30 20 Sec. 30. 2024 Iowa Acts, chapter 1157, section 22, is
 30 21 amended by adding the following new subsection:
 30 22 NEW SUBSECTION 8. Notwithstanding section 8.33, moneys
 30 23 appropriated under this 2024 Iowa Act from the general fund
 30 24 of the state to the department of health and human services

CODE: Allows any unencumbered or unobligated funds appropriated in 2024 Iowa Acts, [House File 2698](#) (FY 2025 Health and Human Services Appropriations Act), from the General Fund for the MOMS Program in FY 2025 to remain available for expenditure until the close of FY 2026.

30 25 for the fiscal year beginning July 1, 2024, and ending June
 30 26 30, 2025, for the more options for maternal support program
 30 27 that remain unencumbered or unobligated at the close of the
 30 28 fiscal year shall not revert but shall remain available for
 30 29 expenditure for the purposes designated until the close of the
 30 30 succeeding fiscal year.

30 31 CHILD PROTECTIVE SERVICES

30 32 Sec. 31. 2024 Iowa Acts, chapter 1157, section 22, is
 30 33 amended by adding the following new subsection:
 30 34 NEW SUBSECTION 9. Notwithstanding section 8.33, moneys
 30 35 appropriated under this 2024 Iowa Act from the general fund of
 31 1 the state to the department of health and human services for
 31 2 the fiscal year beginning July 1, 2024, and ending June 30,
 31 3 2025, for child protective services that remain unencumbered or
 31 4 unobligated at the close of the fiscal year shall not revert
 31 5 but shall remain available for expenditure for the purposes
 31 6 designated until the close of the succeeding fiscal year.

CODE: Allows any unencumbered or unobligated funds appropriated in 2024 Iowa Acts, [House File 2698](#) (FY 2025 Health and Human Services Appropriations Act), from the General Fund for Child Protective Services in FY 2025 to remain available for expenditure until the close of FY 2026.

31 7 Sec. 32. EFFECTIVE DATE. This division of this Act, being
 31 8 deemed of immediate importance, takes effect upon enactment.

Specifies that Division XI of the Bill related to prior appropriations for FY 2025 takes effect upon enactment.

31 9 Sec. 33. RETROACTIVE APPLICABILITY. This division of this
 31 10 Act applies retroactively to July 1, 2024.

Specifies that Division XI of the Bill related to prior appropriations for FY 2025 applies retroactively to July 1, 2024.

31 11 DIVISION XII
 31 12 BEER AND LIQUOR CONTROL FUND — BEHAVIORAL HEALTH FUND

31 13 Sec. 34. 2024 Iowa Acts, chapter 1157, is amended by adding
 31 14 the following new section:
 31 15 NEW SECTION SEC. 4A. IN LIEU OF STANDING
 31 16 APPROPRIATION. The moneys appropriated and allocated in this
 31 17 division of this Act for purposes of treatment and prevention
 31 18 of substance use and misuse and addictive behaviors are in lieu
 31 19 of the standing appropriation to the department of health and
 31 20 human services pursuant to section 123.17, subsection 5, for
 31 21 the fiscal year beginning July 1, 2024.

CODE: Amends 2024 Iowa Acts, [House File 2698](#) (FY 2025 Health and Human Services Appropriations Act), to make inapplicable the standing appropriation under Iowa Code section [123.17](#)(5) for the Comprehensive Substance Use Disorder Program for FY 2025.

FISCAL IMPACT: This is a decrease of \$2,000,000 to the HHS for FY 2025.

31 22 Sec. 35. 2024 Iowa Acts, chapter 1161, section 14, is
 31 23 amended by striking the section and inserting in lieu thereof

CODE: Amends 2024 Iowa Acts, [House File 2673](#) (Behavioral Health Service System Act), to decrease the standing appropriation from the

<p>31 24 the following:</p> <p>31 25 SEC. 14. Section 123.17, subsection 5, Code 2024, is amended</p> <p>31 26 to read as follows:</p> <p>31 27 5. After any transfer provided for in subsection 3 is</p> <p>31 28 made, the department shall transfer into a special revenue</p> <p>31 29 account in the general fund of the state, a sum of money at</p> <p>31 30 least equal to seven percent of the gross amount of sales made</p> <p>31 31 by the department from the beer and liquor control fund on a</p> <p>31 32 monthly basis but not less than nine million dollars annually.</p> <p>31 33 Of the amounts transferred, two <u>one</u> million dollars, plus an</p> <p>31 34 additional amount determined by the general assembly, shall be</p> <p>31 35 appropriated to the department of health and human services for</p> <p>32 1 use by the staff who administer the comprehensive substance use</p> <p>32 2 disorder program under chapter 125 for substance use disorder</p> <p>32 3 treatment and prevention programs shall be transferred to the</p> <p>32 4 behavioral health fund established under section 225A.7. Any</p> <p>32 5 amounts received in excess of the amounts appropriated to the</p> <p>32 6 department of health and human services for use by the staff</p> <p>32 7 who administer the comprehensive substance use disorder program</p> <p>32 8 under chapter 125 transferred to the behavioral health fund</p> <p>32 9 shall be considered part of the general fund balance.</p>	<p>General Fund to the HHS from the 7.00% of the liquor sales for the Behavioral Health Fund from \$2,000,000 to \$1,000,000 beginning in FY 2026.</p> <p>DETAIL: 2024 Iowa Acts, House File 2673 (Behavioral Health Service System Act), increased this same standing appropriation to \$3,000,000; therefore, this change results in a decrease of \$2,000,000 to the Behavioral Health Fund beginning in FY 2026, and a corresponding increase of \$2,000,000 to the General Fund compared to current law.</p>
<p>32 10 Sec. 36. EFFECTIVE DATE. This division of this Act, being</p> <p>32 11 deemed of immediate importance, takes effect upon enactment.</p>	<p>Specifies that Division XII of the Bill related to the Beer and Liquor Control Fund standing appropriation takes effect upon enactment.</p>
<p>32 12 Sec. 37. RETROACTIVE APPLICABILITY. This division of this</p> <p>32 13 Act applies retroactively to July 1, 2024.</p>	<p>Specifies that Division XII of the Bill related to the Beer and Liquor Control Fund standing appropriation applies retroactively to July 1, 2024.</p>
<p>32 14 DIVISION XIII</p> <p>32 15 REPORT ON NONREVERSION OF MONEYS</p>	
<p>32 16 Sec. 38. REPORT ON NONREVERSION OF MONEYS. The department</p> <p>32 17 of health and human services shall report the expenditure of</p> <p>32 18 any moneys for which nonreversion authorization was provided</p> <p>32 19 for the fiscal year beginning July 1, 2024, and ending June 30,</p> <p>32 20 2025, to the general assembly on a quarterly basis beginning</p> <p>32 21 October 1, 2025.</p>	<p>Requires the HHS to report the expenditure of any moneys for which nonreversion authorization was provided for FY 2025 to the General Assembly on a quarterly basis beginning October 1, 2025.</p>
<p>32 22 DIVISION XIV</p> <p>32 23 EMERGENCY RULES</p>	

32 24 Sec. 39. EMERGENCY RULES.

32 25 1. If necessary to comply with federal requirements,
32 26 including time frames, the department of health and human
32 27 services shall adopt administrative rules under section 17A.4,
32 28 subsection 3, and section 17A.5, subsection 2, paragraph “b”,
32 29 to implement the applicable provisions of this Act. The rules
32 30 shall be effective immediately upon filing unless a later date
32 31 is specified in the rules. Any rules adopted in accordance
32 32 with this section shall also be published as a notice of
32 33 intended action as provided in section 17A.4.

Requires the HHS to adopt emergency administrative rules to comply with federal requirements or to implement the Bill. The rules are required to be effective immediately upon filing or on a later effective date specified in the rules. The rules must also be published as a Notice of Intended Action under Iowa Code section [17A.4](#).

32 34 2. If the department of health and human services adopts
32 35 emergency rules in accordance with this section, or as
33 1 otherwise directed or authorized by state law, and the rules
33 2 will result in an increase in expenditures beyond the amount
33 3 anticipated in the budget for the fiscal year, or if the
33 4 expenditures were not addressed in the budget for the fiscal
33 5 year, the department shall notify the general assembly and the
33 6 department of management concerning the rules and the increase
33 7 in expenditures. The notification shall be provided at least
33 8 thirty calendar days prior to the date notice of the rules
33 9 is submitted to the administrative rules coordinator and the
33 10 administrative code editor.

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

33 11 DIVISION XV

33 12 HOSPITAL DIRECTED PAYMENT PROGRAM

33 13 Sec. 40. NEW SECTION 2490.1 DEFINITIONS.

33 14 As used in this chapter, unless the context otherwise
33 15 requires:

33 16 1. “Centers for Medicare and Medicaid services” means the
33 17 centers for Medicare and Medicaid services of the United States
33 18 department of health and human services.

33 19 2. “Department” means the department of health and human
33 20 services.

33 21 3. “Hospital” means a nonstate-owned hospital licensed by
33 22 the state.

33 23 4. “Hospital directed payment program” means a program that
33 24 provides a state directed payment to a hospital for inpatient
33 25 and outpatient hospital services.

33 26 5. “State directed payment” means the same as defined in 42

CODE: Establishes definitions for Iowa Code chapter 2490 (Hospital Directed Payment Program), which is created by the Bill.

33 27 C.F.R. §438.2.

33 28 Sec. 41. NEW SECTION 2490.2 HOSPITAL DIRECTED PAYMENT
33 29 PROGRAM.

33 30 1. Prior to the department administering a hospital
33 31 directed payment program under this chapter for any specific
33 32 fiscal year, the department shall submit any authorizing
33 33 documentation necessary to the centers for Medicare and
33 34 Medicaid services for approval. Upon receipt of approval from
33 35 the centers for Medicare and Medicaid services, the department
34 1 shall administer the hospital directed payment program during
34 2 the specified fiscal year.

CODE: Requires the HHS to submit any authorizing documentation necessary to the Centers for Medicare and Medicaid Services (CMS) for approval prior to administering a Hospital Directed Payment Program for any specific fiscal year.

34 3 2. a. For the sole purpose of the hospital directed payment
34 4 program, the department may impose an assessment on a hospital.
34 5 The total amount of assessments collected by the department
34 6 shall not exceed the amount necessary to fully fund the
34 7 nonfederal share of the maximum state directed payment allowed
34 8 under federal regulations.

CODE: Permits the HHS to impose an assessment on a hospital for the sole purpose of the Hospital Directed Payment Program. Prohibits the total amount of assessments collected by the HHS from exceeding the amount necessary to fund the nonfederal share of the maximum State directed payment allowed under federal regulations.

34 9 b. The department shall establish requirements for timely
34 10 payment of an assessment, and any penalties for late payment
34 11 or nonpayment of an assessment. Any assessment imposed under
34 12 this section shall constitute a debt due the state and may be
34 13 collected by civil action under any method provided by law.

CODE: Requires the HHS to establish requirements for timely payment of an assessment and any penalties for late payment or nonpayment of an assessment. Provides that any assessment imposed under this Section must constitute a debt due to the State and may be collected by civil action under any method provided by law.

34 14 c. The department and a third-party administrator contracted
34 15 with the department may collectively assess and collect an
34 16 administrative fee of no more than four percent of the amount
34 17 of each assessment imposed.

CODE: Allows the HHS and a third-party administrator contracted with the HHS to collectively assess and collect an administrative fee of no more than 4.00% of the amount of each assessment imposed.

34 18 3. Any assessments and penalties collected under this
34 19 section shall be used for the purposes of the hospital directed
34 20 payment program.

CODE: Requires any assessments and penalties collected under this Section to be used for the Hospital Directed Payment Program.

34 21 4. a. The hospital directed payment program shall not
34 22 be administered, an assessment shall not be imposed, and a
34 23 hospital shall not be required to pay an assessment if federal
34 24 financial participation is not available, or if the hospital
34 25 directed payment program and imposition of an assessment are
34 26 not approved by the centers for Medicare and Medicaid services.

CODE: Prohibits the Hospital Directed Payment Program from being administered, an assessment from being imposed, and a hospital from being required to pay an assessment if federal financial participation is not available or if the Program and imposition of an assessment are not approved by the CMS.

34 27 b. If federal law or policy significantly impacts the
34 28 hospital directed payment program as determined by the
34 29 department, the department, in collaboration with stakeholders,
34 30 may terminate the hospital directed payment program.

CODE: Allows the HHS, in collaboration with stakeholders, to terminate the Hospital Directed Payment Program if federal law or policy significantly impacts the Program, as determined by the HHS.

34 31 5. The department shall adopt rules pursuant to chapter 17A
34 32 as necessary to administer this chapter.

CODE: Requires the HHS to adopt administrative rules to administer Iowa Code chapter 249O (Hospital Directed Payment Program).

Health and Human Services General Fund

	Actual FY 2024 (1)	Estimated FY 2025 (2)	Supp-Final Act. FY 2025 (3)	Estimated Net FY 2025 (4)	Gov Rec FY 2026 (5)	Final Action FY 2026 (6)	Final Action vs Est Net FY 2025 (7)	Page and Line # (8)
<u>Veterans Affairs, Department of</u>								
Veterans Affairs, Dept. of								
General Administration	\$ 1,033,289	\$ 1,369,205	\$ 0	\$ 1,369,205	\$ 1,384,743	\$ 1,369,205	\$ 0	PG 2 LN 9
Home Ownership Assistance Program	2,200,000	2,200,000	0	2,200,000	2,700,000	2,200,000	0	PG 2 LN 24
Veterans County Grants – Standing	990,000	990,000	0	990,000	990,000	990,000	0	STANDING
Veterans Affairs, Dept. of	\$ 4,223,289	\$ 4,559,205	\$ 0	\$ 4,559,205	\$ 5,074,743	\$ 4,559,205	\$ 0	
Veterans Affairs, Dept. of								
Iowa Veterans Home	\$ 7,115,335	\$ 8,145,736	\$ 0	\$ 8,145,736	\$ 8,234,502	\$ 8,145,736	\$ 0	PG 2 LN 15
Total Veterans Affairs, Department of	\$ 11,338,624	\$ 12,704,941	\$ 0	\$ 12,704,941	\$ 13,309,245	\$ 12,704,941	\$ 0	
<u>Health and Human Services, Department of</u>								
HHS - Assistance Payment								
Family Investment Program/PROMISE JOBS	\$ 41,003,575	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	
Medical Assistance	1,543,626,779	0	0	0	0	0	0	
Health Program Operations	17,446,067	0	0	0	0	0	0	
State Supplementary Assistance	7,349,002	0	0	0	0	0	0	
State Children's Health Insurance	38,661,688	0	0	0	0	0	0	
Child Care Assistance	64,223,730	0	0	0	0	0	0	
Child and Family Services	79,027,794	0	0	0	0	0	0	
Adoption Subsidy	40,883,507	0	0	0	0	0	0	
Family Support Subsidy	949,282	0	0	0	0	0	0	
Conner Training	33,632	0	0	0	0	0	0	
Volunteers	84,686	0	0	0	0	0	0	
Child Abuse Prevention – Standing	210,570	0	0	0	0	0	0	
HHS - Assistance Payment	\$ 1,833,500,312	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	
HHS - Eldora State Training School								
Eldora Training School	\$ 17,568,511	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	
HHS - Cherokee Mental Health Institution								
Cherokee MHI	\$ 15,923,252	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	
HHS - Independence Mental Health Institution								
Independence MHI	\$ 19,811,470	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	
HHS - Glenwood Resource Center								
Glenwood Resource Center	\$ 16,255,132	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	
HHS - Woodward Resource Center								
Woodward Resource Center	\$ 13,389,577	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	
HHS - Civil Commitment Unit / Sexual Offenders								
Civil Commitment Unit for Sexual Offenders	\$ 14,865,337	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	
HHS - Community Services								
Child Support Services	\$ 15,914,329	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	
Field Operations	72,056,945	0	0	0	0	0	0	
HHS - Community Services	\$ 87,971,274	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	

Health and Human Services General Fund

	Actual FY 2024 (1)	Estimated FY 2025 (2)	Supp-Final Act. FY 2025 (3)	Estimated Net FY 2025 (4)	Gov Rec FY 2026 (5)	Final Action FY 2026 (6)	Final Action vs Est Net FY 2025 (7)	Page and Line # (8)
HHS - Human Services								
General Administration	\$ 18,913,662	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	
HHS Facilities	2,157,590	0	0	0	0	0	0	
Nonresident Mental Illness Commitment	8,032	0	0	0	0	0	0	
HHS - Human Services	\$ 21,079,284	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	
HHS - Aging								
Aging Programs	\$ 11,799,361	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	
Office of LTC Ombudsman	1,148,959	0	0	0	0	0	0	
HHS - Aging	\$ 12,948,320	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	
HHS - Human Rights								
LiHEAP Weatherization Assistance Program – Star	\$ 8,142	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	
Central Administration	186,913	0	0	0	0	0	0	
Community Advocacy and Services	956,894	0	0	0	0	0	0	
Criminal & Juvenile Justice	1,318,547	0	0	0	0	0	0	
Single Grant Program	140,000	0	0	0	0	0	0	
HHS - Human Rights	\$ 2,610,496	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	
Health and Human Services								
Child Abuse Prevention – Standing	\$ 0	\$ 232,570	\$ 0	\$ 232,570	\$ 232,570	\$ 232,570	\$ 0	STANDING
Congenital & Inherited Disorders Registry – Standi	0	223,521	0	223,521	223,521	223,521	0	STANDING
Psychiatry Residency & Fellowship Program – Star	0	1,200,000	0	1,200,000	1,200,000	1,200,000	0	STANDING
Centers of Excellence – Standing	0	425,000	0	425,000	425,000	425,000	0	STANDING
LiHEAP Weatherization Assistance Program – Star	0	1	0	1	1	1	0	STANDING
Commission of Inquiry – Standing	0	1,394	0	1,394	1,394	1,394	0	STANDING
Nonresident Mental Illness Commitment – Standin	0	142,802	0	142,802	142,802	142,802	0	STANDING
Aging and Disability Services	0	19,088,714	0	19,088,714	19,208,822	19,208,180	119,466	PG 2 LN 33
Behavioral Health	0	24,400,114	0	24,400,114	24,442,347	24,442,121	42,007	PG 4 LN 6
Public Health	0	22,531,821	0	22,531,821	22,413,883	22,433,369	-98,452	PG 5 LN 21
Community Access and Eligibility	0	68,043,944	0	68,043,944	68,545,138	68,542,456	498,512	PG 7 LN 27
Child Support Services	0	15,434,282	0	15,434,282	15,645,242	15,644,114	209,832	PG 9 LN 26
Medical Assistance	0	1,650,866,536	0	1,650,866,536	1,874,154,258	1,903,550,706	252,684,170	PG 11 LN 34
Health Program Operations	0	39,597,231	0	39,597,231	39,672,838	39,672,433	75,202	PG 13 LN 18
Child Care Assistance	0	34,966,931	0	34,966,931	34,983,087	34,983,000	16,069	PG 19 LN 34
Early Intervention and Supports	0	35,277,739	0	35,277,739	35,302,034	35,301,904	24,165	PG 20 LN 21
Child Protective Services	0	166,101,034	0	166,101,034	172,151,751	165,558,031	-543,003	PG 21 LN 10
State Specialty Care	0	100,006,128	0	100,006,128	102,343,507	102,343,507	2,337,379	PG 24 LN 30
Accountability, Compliance, and Program Integrity	0	22,356,598	0	22,356,598	21,906,483	21,904,214	-452,384	PG 25 LN 27
Substance Use Disorder Program - Standing	0	2,000,000	-2,000,000	0	2,000,000	0	0	PG 31 LN 13
Behavioral Health Fund - Standing	0	0	0	0	0	1,000,000	1,000,000	PG 31 LN 22
Health and Human Services	\$ 0	\$ 2,202,896,360	\$ -2,000,000	\$ 2,200,896,360	\$ 2,434,994,678	\$ 2,456,809,323	\$ 255,912,963	

Health and Human Services General Fund

	Actual FY 2024 <u>(1)</u>	Estimated FY 2025 <u>(2)</u>	Supp-Final Act. FY 2025 <u>(3)</u>	Estimated Net FY 2025 <u>(4)</u>	Gov Rec FY 2026 <u>(5)</u>	Final Action FY 2026 <u>(6)</u>	Final Action vs Est Net FY 2025 <u>(7)</u>	Page and Line # <u>(8)</u>
HHS - Public Health								
Congenital & Inherited Disorders Registry – Standi	\$ 210,570	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	
Addictive Disorders	23,656,992	0	0	0	0	0	0	
Healthy Children and Families	5,815,491	0	0	0	0	0	0	
Chronic Conditions	4,256,595	0	0	0	0	0	0	
Community Capacity	7,435,682	0	0	0	0	0	0	
Essential Public Health Services	7,662,464	0	0	0	0	0	0	
Infectious Diseases	1,795,902	0	0	0	0	0	0	
Public Protection	4,581,792	0	0	0	0	0	0	
Resource Management	933,543	0	0	0	0	0	0	
HHS - Public Health	<u>\$ 56,349,031</u>	<u>\$ 0</u>	<u>\$ 0</u>	<u>\$ 0</u>	<u>\$ 0</u>	<u>\$ 0</u>	<u>\$ 0</u>	
Total Health and Human Services, Department of	<u>\$ 2,112,271,996</u>	<u>\$ 2,202,896,360</u>	<u>\$ -2,000,000</u>	<u>\$ 2,200,896,360</u>	<u>\$ 2,434,994,678</u>	<u>\$ 2,456,809,323</u>	<u>\$ 255,912,963</u>	
Total Health and Human Services	<u><u>\$ 2,123,610,620</u></u>	<u><u>\$ 2,215,601,301</u></u>	<u><u>\$ -2,000,000</u></u>	<u><u>\$ 2,213,601,301</u></u>	<u><u>\$ 2,448,303,923</u></u>	<u><u>\$ 2,469,514,264</u></u>	<u><u>\$ 255,912,963</u></u>	

Health and Human Services

Other Funds

	Actual FY 2024 (1)	Estimated Net FY 2025 (2)	Gov Rec FY 2026 (3)	Final Action FY 2026 (4)	Final Action vs Est Net FY 2025 (5)	Page and Line # (6)
Health and Human Services, Department of						
HHS - Human Services						
FIP - TANF	\$ 2,252,945	\$ 0	\$ 0	\$ 0	\$ 0	
PROMISE JOBS - TANF	3,924,087	0	0	0	0	
Field Operations - TANF	31,296,232	0	0	0	0	
General Administration - TANF	3,744,000	0	0	0	0	
Child & Family Services - TANF	35,161,880	0	0	0	0	
Training & Technology - TANF	387,517	0	0	0	0	
ICAR System - TANF	0	5,000,000	0	0	-5,000,000	
FaDSS - TANF	3,094,816	2,888,980	0	0	-2,888,980	
Child Abuse Prevention - TANF	0	125,000	0	0	-125,000	
Kinship Stipend - TANF	0	3,000,000	0	0	-3,000,000	
Community Access and Eligibility - TANF	0	12,988,627	0	12,988,627	0	PG 10 LN 25
Core Purposes - TANF	0	5,000,000	0	25,000,000	20,000,000	PG 11 LN 9
Early Intervention and Supports - TANF	0	0	0	3,013,980	3,013,980	PG 11 LN 16
Administration and Compliance - TANF	0	3,533,647	0	3,533,647	0	PG 11 LN 21
Child Care Assistance - TANF	26,205,412	47,166,826	0	47,166,826	0	PG 11 LN 26
Child Protective Service - TANF	0	62,364,100	0	65,364,100	3,000,000	PG 11 LN 28
HHS - Human Services	\$ 106,066,889	\$ 142,067,180	\$ 0	\$ 157,067,180	\$ 15,000,000	
HHS - Assistance Payment						
Pregnancy Prevention - TANF	\$ 1,430,257	\$ 1,913,203	\$ 0	\$ 1,913,203	\$ 0	PG 10 LN 27
Categorical Eligibility SNAP - TANF	7,150	0	0	0	0	
Medical Assistance - HCTF	189,860,000	0	0	0	0	
Medicaid Supplemental - MFF	150,000	0	0	0	0	
Health Program Operations - PSA	234,193	0	0	0	0	
Medical Assistance - QATF	111,216,205	0	0	0	0	
Medical Assistance - HHCAT	33,920,554	0	0	0	0	
HHS - Assistance Payment	\$ 336,818,359	\$ 1,913,203	\$ 0	\$ 1,913,203	\$ 0	
HHS - Public Health						
Gambling Treatment Program - SWRF	\$ 1,750,000	\$ 0	\$ 0	\$ 0	\$ 0	
Health and Human Services						
Behavioral Analysis Treatment – ASF	\$ 0	\$ 750,000	\$ 750,000	\$ 0	\$ -750,000	
Gambling Treatment Program – SWRF	0	1,750,000	1,750,000	1,750,000	0	PG 5 LN 8
Medical Assistance - MFF	0	150,000	150,000	150,000	0	STANDING
Health Program Operations – PSA	0	234,193	234,193	234,193	0	PG 14 LN 26
Medical Assistance – QATF	0	111,216,205	111,216,205	111,216,205	0	PG 15 LN 3

Health and Human Services

Other Funds

	Actual FY 2024 (1)	Estimated Net FY 2025 (2)	Gov Rec FY 2026 (3)	Final Action FY 2026 (4)	Final Action vs Est Net FY 2025 (5)	Page and Line # (6)
Medical Assistance – HHCAT	0	33,920,554	33,920,554	33,920,554	0	PG 15 LN 15 STANDING
Medical Assistance - HCTF	0	176,470,000	150,997,000	150,997,000	-25,473,000	
Health and Human Services	\$ 0	\$ 324,490,952	\$ 299,017,952	\$ 298,267,952	\$ -26,223,000	
Total Health and Human Services, Department of	\$ 444,635,248	\$ 468,471,335	\$ 299,017,952	\$ 457,248,335	\$ -11,223,000	
Total Health and Human Services	\$ 444,635,248	\$ 468,471,335	\$ 299,017,952	\$ 457,248,335	\$ -11,223,000	

Health and Human Services

FTE Positions

	Actual FY 2024 (1)	Estimated Net FY 2025 (2)	Gov Rec FY 2026 (3)	Final Action FY 2026 (4)	Final Action vs Est Net FY 2025 (5)	Page and Line # (6)
Health and Human Services, Department of						
HHS - Assistance Payment						
Family Investment Program/PROMISE JOBS	23.40	2.00	2.00	0.00	-2.00	
Medical Assistance	9.58	0.00	0.00	0.00	0.00	
Health Program Operations	3.79	0.00	0.00	0.00	0.00	
Child Care Assistance	4.58	3.00	3.00	0.00	-3.00	
Child and Family Services	7.27	7.50	7.50	0.00	-7.50	
Volunteers	0.98	0.00	0.00	0.00	0.00	
HHS - Assistance Payment	49.60	12.50	12.50	0.00	-12.50	
HHS - Eldora State Training School						
Eldora Training School	171.65	0.00	0.00	0.00	0.00	
HHS - Cherokee Mental Health Institution						
Cherokee MHI	156.10	0.00	0.00	0.00	0.00	
HHS - Independence Mental Health Institution						
Independence MHI	164.04	0.00	0.00	0.00	0.00	
HHS - Glenwood Resource Center						
Glenwood Resource Center	326.97	0.00	0.00	0.00	0.00	
HHS - Woodward Resource Center						
Woodward Resource Center	483.47	0.00	0.00	0.00	0.00	
HHS - Civil Commitment Unit / Sexual Offenders						
Civil Commitment Unit for Sexual Offenders	137.06	0.00	0.00	0.00	0.00	
HHS - Community Services						
Child Support Services	417.21	0.00	0.00	0.00	0.00	
Field Operations	1,563.10	0.00	0.00	0.00	0.00	
HHS - Community Services	1,980.31	0.00	0.00	0.00	0.00	
HHS - Human Services						
General Administration	323.25	0.00	0.00	0.00	0.00	
HHS - Aging						
Aging Programs	29.68	0.00	0.00	0.00	0.00	
Office of LTC Ombudsman	11.73	0.00	0.00	0.00	0.00	
HHS - Aging	41.41	0.00	0.00	0.00	0.00	
HHS - Human Rights						
Central Administration	5.60	0.00	0.00	0.00	0.00	
Community Advocacy and Services	7.42	0.00	0.00	0.00	0.00	
Criminal & Juvenile Justice	8.36	0.00	0.00	0.00	0.00	
HHS - Human Rights	21.38	0.00	0.00	0.00	0.00	

Health and Human Services

FTE Positions

	Actual FY 2024 (1)	Estimated Net FY 2025 (2)	Gov Rec FY 2026 (3)	Final Action FY 2026 (4)	Final Action vs Est Net FY 2025 (5)	Page and Line # (6)
Health and Human Services						
Aging and Disability Services	0.00	75.00	75.00	88.00	13.00	PG 2 LN 33
Behavioral Health	0.00	64.00	64.00	71.00	7.00	PG 4 LN 6
Public Health	0.00	263.05	273.05	348.60	85.55	PG 5 LN 21
Community Access and Eligibility	0.00	830.65	830.65	870.40	39.75	PG 7 LN 27
Child Support Services	0.00	408.00	408.00	464.00	56.00	PG 9 LN 26
Health Program Operations	0.00	96.00	96.00	82.00	-14.00	PG 13 LN 18
Child Care Assistance	0.00	35.00	35.00	53.00	18.00	PG 19 LN 34
Early Intervention and Supports	0.00	22.40	22.40	29.00	6.60	PG 20 LN 21
Child Protective Services	0.00	829.00	827.00	977.00	148.00	PG 21 LN 10
State Specialty Care	0.02	1,368.33	1,380.33	756.00	-612.33	PG 24 LN 30
Accountability, Compliance, and Program Integrity	0.00	411.95	389.95	409.00	-2.95	PG 25 LN 27
Health and Human Services	<u>0.02</u>	<u>4,403.38</u>	<u>4,401.38</u>	<u>4,148.00</u>	<u>-255.38</u>	
HHS - Public Health						
Addictive Disorders	11.22	0.00	0.00	0.00	0.00	
Healthy Children and Families	10.54	0.00	0.00	0.00	0.00	
Chronic Conditions	10.80	0.00	0.00	0.00	0.00	
Community Capacity	5.21	0.00	0.00	0.00	0.00	
Infectious Diseases	4.93	0.00	0.00	0.00	0.00	
Public Protection	54.40	0.00	0.00	0.00	0.00	
Resource Management	3.02	0.00	0.00	0.00	0.00	
HHS - Public Health	<u>100.12</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	
Total Health and Human Services, Department of	<u>3,955.37</u>	<u>4,415.88</u>	<u>4,413.88</u>	<u>4,148.00</u>	<u>-267.88</u>	
<u>Veterans Affairs, Department of</u>						
Veterans Affairs, Dept. of						
General Administration	10.79	11.00	11.00	15.00	4.00	PG 2 LN 9
Total Veterans Affairs, Department of	<u>10.79</u>	<u>11.00</u>	<u>11.00</u>	<u>15.00</u>	<u>4.00</u>	
Total Health and Human Services	<u>3,966.16</u>	<u>4,426.88</u>	<u>4,424.88</u>	<u>4,163.00</u>	<u>-263.88</u>	