

HUMAN SERVICES DEPARTMENT [441]

Notice of Intended Action

Pursuant to the authority of Iowa Code section 234.6(6) and 249A.4, the Department of Human Services proposes to amend Chapter 65, “Food Assistance Program Administration,” and Chapter 75 “Conditions of Eligibility,” Iowa Administrative Code.

The proposed amendments would remove the requirement to verify dependent care expenses for determination of Food Assistance eligibility and of Medicaid eligibility related to the Family Medical Assistance Program. Both programs allow a deduction for the expenses of care for children or dependent adults when the client is working or looking for a job. Federal regulations do not require verification of these expenses, and this has not been an error-prone area. The Department would like to streamline eligibility requirements in this area as a means of dealing with higher caseloads. Questionable claims are still subject to verification.

These amendments do not provide for waivers in specified situations because a reduction in documents that need to be supplied is a benefit to clients.

Any interested person may make written comments on the proposed amendments on or before January 5, 2010. Comments should be directed to Mary Ellen Imlau, Bureau of Policy Analysis and Appeals, Department of Human Services, Hoover State Office Building, 1305 East Walnut Street, Des Moines, Iowa 50319-0114. Comments may be sent by fax to (515)281-4980 or by E-mail to policyanalysis@dhs.state.ia.us.

These amendments are intended to implement Iowa Code sections 234.12 and 249A.4.

The following amendments are proposed.

ITEM 1. Rescind and reserve paragraphs **65.22(1)**“b,” “d,” and “e.”

ITEM 2. Amend rule **441--65.33(234)** as follows:

441--65.33(234) Dependent care deduction. Households shall be allowed a deduction for the amount of ~~verified~~ monthly dependent care expenses.

ITEM 3. Amend subparagraph **75.57(2)**“b”(7) as follows:

(7) ~~The~~ If the amount claimed is questionable, the expense shall be verified by a receipt or a statement from the provider of care ~~and~~. The expense shall be allowed when paid to any person except a parent or legal guardian of the child, ~~or~~ another member of the eligible group, or ~~to~~ any person whose needs are met by diversion of income from any person in the eligible group.