# Red Tape Review Rule Report

(Due: September 1, 2026)

Department	Health and	Date:	September 1, 2024	Total Rule	12
Name:	Human			Count:	
	Services				
	441	Chapter/	36	Iowa Code	249L.4
IAC #:		SubChapter/		Section	
		Rule(s):		Authorizing	
				Rule:	
Contact	Victoria L.	Email:	compliancerules@hhs.iowa.gov	Phone:	NA
Name:	Daniels				

#### PLEASE NOTE, THE BOXES BELOW WILL EXPAND AS YOU TYPE

What	is the	intended	henefit	of the	rule?
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To outline the quality assurance assessment fee for nursing facilities (QAAF), provider taxes for Intermediate Care Facilities for the Intellectually Disabled (ICFs/ID) and health care access assessment for hospitals pursuant to Iowa Code chapters 249A, 249L, and 249M.

## Is the benefit being achieved? Please provide evidence.

Yes, we have been able to maintain QAAF taxes to help expand services throughout the system. However, at this time we do not have measurable evidence.

What are the costs incurred by the public to comply with the rule?

No costs are incurred by the public to comply with the rule itself.

What are the costs to the agency or any other agency to implement/enforce the rule?

Personnel and other administrative costs.

Do the costs justify the benefits achieved? Please explain.

Yes, we have been able to maintain QAAF taxes to help expand services throughout the system. However, at this time we do not have measurable evidence.

Are there less restrictive alternatives to accomplish the benefit?  $\square$  YES  $\boxtimes$  NO If YES, please list alternative(s) and provide analysis of less restrictive alternatives from other states, if applicable. If NO, please explain.

Rulemaking is appropriate and required under the applicable laws.

Does this chapter/rule(s) contain language that is obsolete, outdated, inconsistent, redundant, or unnecessary language, including instances where rule language is duplicative of statutory language? [list chapter/rule number(s) that fall under any of the above categories]

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#### Modified 36.2 by:

- Deleting a specific form number
- Removing restrictive terms
- Simplifying language
- Removing specific reference to a department bureau/unit

Deleted a rescinded rule, 36.3., and renumbered throughout

Modified 36.4 by removing language duplicative of Iowa Code section 249A.21.

Deleted a reserved rule, 36.5

Modified 36.6 by updating a department's name pursuant to alignment

Modified 36.6(2) to update dates, amounts, and numbers as allowed by state law and approved by CMS

#### Modified 36.7 by:

- Deleting a specific form number
- Removing restrictive terms
- Simplifying language
- Adding new subrule to clarify that the provisions of 36.2(5) also apply to nursing facilities

Removed reserved rules, 36.8 and 36.9

### Modified 36.11 by:

- Removing restrictive terms
- Simplifying language
- Removing specific reference to a department bureau/unit
- Adding new subrule to clarify that the provisions of 36.2(5) also apply to participating hospitals

Modified 36.12 by deleting language duplicative of Iowa Code section 249M.3.

## **RULES PROPOSED FOR REPEAL (list rule number[s]):**

36.3

36.4

36.5

36.8	
36.9	
36.12	
RULES PROPOSED FOR RE-PROMULGATION (list rule number[s] or include rule text if ava	ilable):
36.1	
36.2	
36.6	
36.7	
36.10	
36.11	
*For rules being re-promulgated with changes, you may attach a document with suggest	ed changes.
AAFTDICC	
METRICS	6
Total number of rules repealed:	
Proposed word count reduction after repeal and/or re-promulgation	641
Proposed number of restrictive terms eliminated after repeal and/or re-promulgation	17
ADE THERE ANY STATISTORY CHANGES VOLUMENTED RECOMMEND INCLUDING CODIFYIN	IC ANY DULES
ARE THERE ANY STATUTORY CHANGES YOU WOULD RECOMMEND INCLUDING CODIFYIN	IG AINT RULES?